

Study on Violence against Children in Bulgaria

Part II

**Capacity of the institutions responsible for
the prevention, identification and response to
VAC in Bulgaria**



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Acknowledgements

This study was commissioned by UNICEF Bulgaria and was carried out by Coram International in collaboration with national researchers.

The report was written by Dr Sophie Hedges, Professor Dame Carolyn Hamilton and Elizabeth Yarrow. Technical input was also provided by Ruth Barnes, Dr Anna Mackin and Jorun Arndt throughout the study.

Our thanks further go to Miglena Baldzhieva and Blaga Banova who conducted the qualitative data collection for the study and to Joana Angelova and the team of researchers at ESTAT who undertook the quantitative data collection and provided technical support in relation to the sampling. Many thanks also to Radostina Angelova for her technical input during the different stages of the study.

Project co-ordination, implementation and monitoring of the research project was provided by the following individuals from UNICEF Bulgaria: Lyubomir Krilchev, Violence Against Children Consultant, Kremena Chobanova, Access to Justice Officer, Dani Koleva, Child Protection Specialist and Elena Atanassova, Child Rights Monitoring Specialist.

The Advisory Board comprised of experts from the Ministry of Labor and Social Policy, Ministry of Interior, Ministry of Justice, Ministry of Education and Science State Agency for Child Protection, Agency for Social Assistance, National Association of the Municipalities in Republic of Bulgaria, National Statistics Institute, National Center of Public Health and Analyses, NGOs (SAPI and Demetra Association). They took part in designing the ToR of the study, providing information and consultation on and input into the survey tools and case studies.

In addition we are indebted to the many stakeholders, including Government and NGO representatives, academics, representatives from the media, UNICEF staff members as well as the education, health care, justice, law enforcement and social welfare professionals who offered their time and insight through interviews, focus group discussions and surveys.

Last, but by no means least, we would like to thank the children and adults who took part in the research. Their views underpinned the findings in this study and the recommendations that resulted.

List of acronyms

ASA	Agency of Social Assistance
CAC	Child Advocacy Centre (known as “Zona ZaKmila”)
CC	Crisis Centre
CCCJD	Central Commission for Combatting Juvenile Delinquency
CM	Coordination Mechanism
CPA	Child Protection Act
CPD	Child Protection Department
CPR	Children’s Pedagogical Room
CSC	Community Support Centre
GP	General Practitioner
LCCJD	Local Commission for Combatting Juvenile Delinquency
MLSP	Ministry of Labour and Social Protection
MOES	Ministry of Education and Science
MOI	Ministry of Interior
MOJ	Ministry of Justice
NCCP	National Council on Child Protection
NGO	Non-governmental organisation
NPPVACB	National Programme for the Prevention of Violence and Abuse Against Children in Bulgaria
PDVA	Protection against Domestic Violence Act
RSAD	Regional Social Assistance Directorate
SACP	State Agency for Child Protection
SAD	Social Assistance Directorate
SAPI	Institute for Social Activities and Practices
SDG	Sustainable Development Goal
SJC	Supreme Judicial Council
UN	United Nations
UNICEF	United Nations Children’s Fund
VAC	Violence against children

1 Introduction and background

This study was commissioned by UNICEF Bulgaria and carried out by Coram International in collaboration with national consultants. The international consultancy team has involved Professor Dame Carolyn Hamilton as Team Leader, together with Elizabeth Yarrow, Ruth Barnes, Kara Aplan, Jorun Arndt, Dr Anna Mackin and Dr Sophie Hedges. Qualitative interviewing was carried out by Miglena Baldzhieva and Blaga Banova, while the quantitative surveys were carried out by the research and consultancy company ESTAT.

1.1 Context and background to the study

Ending violence against children is an organisation-wide priority for UNICEF across all programme areas.¹ In Bulgaria, UNICEF has been collaborating with the Government of Bulgaria on the National Programme for the Prevention of Violence and Abuse of Children. Data collection and research form an important part of the Programme's aims, in order to develop a better understanding of the phenomenon of violence, including where it occurs, what forms it takes, and who the most vulnerable children are. Understanding violence against children better and collecting reliable data on its occurrence is the first key step towards preventing and eliminating it. The research further supports the other action points in the Programme, helping to identify areas for improvement and intervention to improve the prevention of and response to violence against children in Bulgaria.

1.1.1 Purpose of the study

The purpose of this study is to conduct a national study on Violence against Children (VAC) in Bulgaria. In particular, the study will focus on three main areas of research, focusing on three central objectives:

1. To provide a comprehensive picture of the current situation with respect to attitudes, knowledge, beliefs and practices concerning violence against children (VAC) in Bulgaria;
2. To estimate the prevalence of VAC in Bulgaria (broken down by different 'types' of violence and the settings in which they occur), the risk and protective factors, identify more vulnerable groups of children;
3. To evaluate the current capacity of the institutions responsible for preventing, identifying and responding to VAC in Bulgaria to protect children from all forms of violence and abuse.

This second report focuses on the third objective, evaluating the capacity of the child protection system to prevent and respond to violence against children. The findings and recommendations in this report will be used as an evidence based tool for further development and implementation of strategic documents regarding VAC in Bulgaria, through identifying where and how improvements can be made in current systems, institutions, and organisations, for identifying, responding and preventing VAC.

For findings and recommendations pertaining to the first two objectives, please consult the first report for this study, 'Study on Violence against Children in Bulgaria: Final report'.

¹ United Nations Children's Fund, '[A Familiar Face: Violence in the lives of children and adolescents](#)', UNICEF, New York, USA, 2017, p.12



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2 Methods

A detailed methodology for this study is presented in Annex A. This was a mixed methods study, using both a quantitative survey and qualitative interviews with professionals and other stakeholders working within the Bulgarian child protection system.

2.1 Quantitative survey

The groups of professionals included in the survey were teachers, judges, prosecutors, police officers, medical professionals (GPs, paediatricians and emergency doctors), and social workers. During the preparation for the professionals' survey, the COVID-19 outbreak occurred and a state of emergency was declared in Bulgaria, meaning enumerators could no longer travel throughout Bulgaria. It was therefore decided to pursue an alternative sampling approach during the state of emergency, with enumerators using their existing networks of contacts and snowball sampling to recruit participants. Surveys were administered orally by enumerators and data was recorded using tablets.

The survey covered a number of topics, including professionals' attitudes towards VAC, knowledge and understanding of VAC and appropriate responses, their experience of responding to VAC cases, and their cooperation with other institutions involved in responding to VAC.

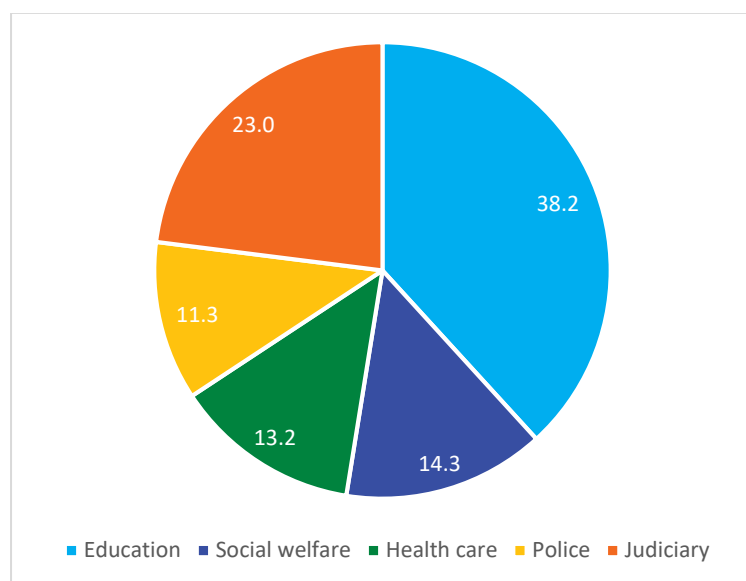
2.1.1 Respondent profile

The survey had 887 respondents across all six regions of Bulgaria. Respondents came from five different sectors, with the most represented sector being education, comprising 339 respondents.²

² Education professionals were deliberately over-represented in the sampling approach to reflect their important role in identifying VAC and preventing VAC and bullying in schools

Two hundred and four respondents represented the judiciary, followed by social welfare with 127 respondents, health care with 117 respondents and finally the police with 100 respondents.

Figure 1 Survey respondents by sector



Overall, 72 per cent of the sample was female, though this varied significantly by sector, ranging from 92 per cent of social welfare respondents to 40 per cent of police respondents.³ Respondents ranged in age from 24 to 76, with health care professionals being the oldest on average (mean age = 54 years old) and social welfare professionals being the youngest (mean age = 43 years old).

Health care professionals were much more likely to work in the private sector than education professionals, with 48 per cent working solely in the private sector and 9 per cent working in both sectors, compared to 1.5 per cent and 2.4 per cent of education professionals.⁴ This reflects the division between public and private in both sectors. The majority of Bulgarian children are educated in the public sector and there are only 86 private schools in the country (out of 1,963 total).⁵ By contrast, expenditure on health care is split almost evenly between private and public spending.⁶

Almost all respondents (99 per cent) had attained higher education. Among these respondents, 11 per cent had a Bachelor's degree, 83 per cent had a Master's degree and 5 per cent had a doctorate. Those with a more advanced degree were older on average, suggesting that professionals continue with their education as they progress in their career.⁷ Law and health care professionals appear to specialise early, with 98 per cent of legal professionals having studied law and 99 per cent of health care professionals having studied medicine. By contrast, only 68 per cent of education professionals had studied pedagogics, 51 per cent of social workers had studied social work, and 39 per cent of police officers had studied policing.

³ $\chi^2=152.5999$, $p<0.001$

⁴ $\chi^2 = 177.4340$, $p<0.001$

⁵ National Statistical Institute, '[General schools by type](#)', April 2020, Republic of Bulgaria

⁶ OECD and World Health Organization, '[State of Health in the EU: Bulgaria Country Health Profile 2019](#)', p.22

⁷ $F=21.27$, $p<0.0001$

2.2 Qualitative research

Researchers carried out a number of in-depth interviews with national-level stakeholders in the Bulgarian child protection system, including representatives from UNICEF, relevant government ministries, and national agencies. Individual and group interviews were also carried out in Sofia city and in Sofia, Slivo Pole, Ruse and Vidin provinces with teachers, school counsellors, social workers, NGO staff, doctors, members of the judiciary and police officers working on child protection issues. Due to the COVID-19 outbreak, some of these interviews were carried out using phone and Zoom video conferencing. A total of 32 interviews were conducted with a total of 71 respondents.

Qualitative interviews were guided by a set of questions that investigated the participants' roles and responsibilities, their coordination with other institutions, what they felt to be effective in their work on VAC and what challenges they encounter. Interviews also featured a series of scenarios which described some different VAC cases that professionals might encounter. Participants were asked if they ever encountered similar situations and how they would respond.

2.3 Case studies

Three programmes have been used as 'case studies' of good practice or promising approaches to preventing and responding to violence against children in Bulgaria. Programmes were selected in collaboration with UNICEF and the Advisory Group to cover different types of violence against children. The programmes selected were:

- Child Advocacy Centres (known as "Zona ZaKrila")
- Cyberscout
- Zippy's Friends

Researchers reviewed existing documentation and evaluations (where available) of the selected programmes. The document review aimed to describe the programme and its impacts, identify factors involved in the success of the programme and any remaining barriers, and to assess whether the programme could be replicated in other settings.

3 Overview of legal and institutional framework for preventing and responding to VAC

Overall, Bulgaria has a well-developed legal and institutional framework for preventing and responding to violence against children, which is largely compliant with international standards. Nevertheless, a number of gaps and challenges have been identified. The legal framework, however, falls short of explicitly prohibiting all forms of VAC in all settings. For example, the framework does not explicitly prohibit corporal punishment in detention and other institutional settings for children who are in conflict with the law. In addition, the institutional framework is onerously complex, with various different bodies sharing overlapping responsibilities and functions, including in the areas of data collection, enforcement and compliance. This section of the report presents a brief overview of key elements of the child protection architecture. A full legal and institutional review can be found in Annex B.

3.1 Law and policy

Bulgaria's 1991 Constitution establishes the foundations for preventing and responding to VAC. Although the Constitution does not explicitly mention children at risk of violence, article 14 establishes that "The family, motherhood and children shall enjoy the protection of the State and society" and article 47 places an obligation on the State to assist parents to fulfil their obligations to provide care for their children, as well as providing that "the conditions and procedure for the restriction or suspension of parental rights.. be established by law".⁸ These broad protections have subsequently been expounded within a number of substantive pieces of primary and secondary legislation, which include the Child Protection Act (CPA), the Family Code, the Social Services Act, the Social Assistance Act, the Family Allowances for Children Act, the Penal and Penal Procedure Codes, the Law on Combating the Anti-social Acts of Minors and Underaged, the Protection Against Domestic Violence Act, the Labour Code, the Pre-School and School Education Act, the Mechanism for Counteracting Bullying and Violence in the Institutions of the Pre-school and School Education System, and the National Programme for Prevention of Violence and Abuse of Children (2017-20) (NPPVAC). Of these, the Child Protection Act, the Social Assistance Act, and the NPPVAC are key in setting out the administrative and operational measures for preventing and responding to VAC.

3.1.1 The Child Protection Act (CPA) and accompanying regulations

The **Child Protection Act** (CPA), last amended in 2020,⁹ and the Regulations for its Implementation, set out the principles and measures for responding to violence, abuse and neglect of children in different settings. Under the regulations VAC is defined as: "any act of physical, mental or sexual violence, neglect, commercial or other exploitation, resulting in actual or potential damage to the child's health, life, development or dignity that may be performed in a family, school or social environment."¹⁰ Under the Act, all children are entitled to protection while special protection is granted to children "at risk".

⁸ Constitution of the Republic of Bulgaria, July 1991, last amended December 2015

⁹ Government of the Republic of Bulgaria, *Child Protection Act 2000*.

¹⁰ Government of the Republic of Bulgaria, *Regulations on the implementation of the Child Protection Act*, 2003, §1(1) Additional Provisions

According to this definition, a child at risk is a child:

- a) whose parents are deceased, unknown, have been deprived of parental rights or their rights have been limited, or the child has been deprived of their care;
- b) who has become victim of abuse, violence, exploitation or any other inhuman or degrading treatment or punishment either in or out of their family;
- c) for whom there is a danger of causing harm to their physical, mental, moral, intellectual and social development;
- d) who is at risk of dropping out of school or who has dropped of school.’¹¹

The CPA establishes the bodies responsible for child protection, both at the policy level (namely, the State Agency for Child Protection) and at the level of implementation (the Social Assistance Directorates), as well as specifying the co-ordinated responsibilities of different ministries (including Health, Education, Justice, the Interior and Labour and Social Policy) in fulfilling their various roles in the child protection infrastructure.

According to Article 18 of the CPA, “the National Council for Child Protection (NCCP)”, chaired by the State Agency for Child Protection, has consultative and coordination functions in relation to child protection. This Council is large, diverse and multi-sectoral, including participation of the Ministry of Labour and Social Policy, the Ministry of Justice, the Ministry of Foreign Affairs, the Ministry of Education and Science, the Ministry of Health, the Ministry of the Interior, the Ministry of Finance, the Ministry of Culture, the Ministry for Youth and Sport, the Social Assistance Agency, the Bulgarian National Anti-Traffic Commission, National Narcotic Substances Council, National Statistics Institute, National Insurance Institute, the Central Commission for fighting the antisocial acts of the minors and underage, the National Association of the municipalities in the Republic of Bulgaria as well as child protection NGOs.

3.1.2 The Social Assistance Act and accompanying regulations

The Social Assistance Act, and the Regulations for the Implementation of the Social Assistance Act, set out the social assistance – including monetary assistance and other social welfare support – that should be provided by the State to those in need, and establishes the administrative architecture for the delivery of this assistance. Under the Act, the Social Assistance Agency and its local branches, the Social Assistance Directorates at Regional and Municipal levels, are responsible for delivering social assistance. The Social Assistance Agency falls within the directorship of the Ministry of Labour and Social Policy.

Although the scope of the Social Assistance Act is much broader than child protection, the Act requires that Child Protection Departments are established under each Social Assistance Directorate (article 5.6). These departments contain the social workers who are responsible for the day to day delivery of services for children affected by, and at risk of, violence at local level.¹²

¹¹ §1(11) Supplementary Provisions, Government of the Republic of Bulgaria, *Child Protection Act 2000*, last amended 2020, §1(11) Supplementary Provisions.

¹² Article 5(6), Government of the Republic of Bulgaria, *Social Assistance Act, 1998*, last amended December 2019, Article 5(6).

Article 6.10 of the Act also stipulates that the Social Assistance Agency is responsible for maintaining registers of children who are eligible for adoption, as well as of adopters and foster families, through the regional Social Assistance Directorates (article 6.10).¹³

3.1.3 The Social Services Act

In 2019 a new Social Services Act was passed by Parliament and entered into force on 1st July 2020. However, in July the Constitutional Court declared some parts of the Act unconstitutional following a challenge by 54 MPs representing the Bulgarian Socialist Party.¹⁴ The objectives of the new Social Services Act, amongst others, are: to formalise the State regulation and funding of integrated social services; to improve the quality and effectiveness of social services (through the establishment of a new agency for quality assurance and the registration and licencing of social services), and to promote and develop new public-private partnerships in the provision of social services.

3.1.4 The National Programme for the Prevention of Violence and Abuse of Children (NPPVAC)

The **National Programme for the Prevention of Violence and Abuse of Children** (until 2020) was the main policy document in Bulgaria related to violence against children. It set out the context for child protection and violence against children, as well as a concrete, action-oriented programme to protect children from violence. This included clear responsibilities, duties and actions to be held and undertaken by a full range of bodies at all levels, as well as setting out the resources required (personnel, facilities and financial) for their implementation.¹⁵

The NPPVAC included within its objectives the need to strengthen the capacity of professionals working with children to prevent and respond to violence, to improve inter-institutional cooperation and coordination,¹⁶ and to establish integrated services for child victims of violence.¹⁷

The plan reiterated that overall responsibility for the coordination of all the ministries and agencies responsible for aspects of child protection lies with the State Agency for Child Protection, through the inter-agency coordination mechanism of the National Council for Child Protection, which (as above) includes the participation of NGOs.

3.2 Overview of Government Ministries and Agencies involved in child protection

3.2.1 Ministry of Labour and Social Policy

Under the Child Protection Act and the Social Assistance Act, the Ministry of Labour and Social Policy (MLSP) is responsible for the development and implementation of all social assistance and support services, including to children affected by, and at risk of, violence.¹⁸ The State Agency for Child Protection, and the Agency for Social Assistance both sit within the directorship of the MLSP.

¹³ The same provision is foreseen in the *Family Code* 2009, article 83.

¹⁴ <https://bnr.bg/en/post/101310108/bulgarias-constitutional-court-rejects-parts-of-social-services-act>

¹⁵ Government of the Republic of Bulgaria, National Programme for the Prevention of Violence and Abuse of Children 2017-2020.

¹⁶ *Ibid.* Strategic objective VII

¹⁷ *Ibid.* Strategic objective VI

¹⁸ Article 6a(4)1 Child Protection Act 2000, last amended 2020; Interview with representative from Ministry of Labour and Social Policy, August 2019, Sofia, Bulgaria

State Agency for Child Protection

The State Agency for Child Protection sits under the MLSP and is responsible for developing, implementing and monitoring State policy for child protection and children's rights¹⁹ as well as for running the national children's helpline.²⁰

The State Agency for Child Protection also has coordination and control powers and functions, developing regulations and managing the activities of the National Council for Child Protection (NCCP; see below).²¹ The State Agency for Child Protection is one of the three agencies that should be informed when it is suspected that a child needs protection, alongside the local Social Assistance Directorate and the Ministry of the Interior.²² When the Agency receives a referral, the State Agency for Child Protection Chairperson is required to immediately forward it to the Child Protection Department of the Social Assistance Directorate that is closest to the child's residence.²³

Agency for Social Assistance

The Agency for Social Assistance is responsible for the provision of statutory services and social assistance, including for children affected by and at risk of violence, and has units in every district and municipality in Bulgaria, called Social Assistance Directorates (SAD). Each Social Assistance Directorate contains a Child Protection Department, which is responsible for protecting and responding to cases where children are at risk of violence. These Departments contain the social workers who are responsible for coordinating the overall investigation, assessment and care planning for child protection cases.

The Agency for Social Assistance maintains a register of social service providers and performs inspections, with a particular responsibility to monitor financial accountability.²⁴ If the Agency receives a complaint about a Child Protection Department they forward it to the Regional Social Assistance Directorate which will conduct an inspection, give recommendations and guidance and follow up to ensure improvements are made.²⁵ The Agency for Social Assistance also has an Integrated Information System which has been in place since 2016, in which reports of child abuse are logged for the purposes of case management.²⁶

Agency for the Quality of Social Services

The new Social Services Act establishes an Agency for the Quality of Social Services which took over some of the responsibilities of the State Agency for Child Protection regarding setting criteria and standards for social services, the control and monitoring of social service provision and maintaining databases relating to children at risk, social support and NGOs working on child protection. The Agency for the Quality of Social Services exercises control and monitoring of the provision of social services, licenses the providers of social services, proposes standards and criteria for efficient, high-quality

¹⁹ Article 17a(1-3) Child Protection Act 2000, last amended 2017.

²⁰ Article 17a(9) Child Protection Act 2000, last amended 2017.

²¹ Article 17a(12-13) Child Protection Act 2000, last amended 2017.

²² Article 7 Child Protection Act 2000, last amended 2017.

²³ Article 7(3) Child Protection Act 2000, last amended 2017.

²⁴ Fresno, J. M. et al., 'Analysis of the Child Protection System in Bulgaria', July 2019, p.50

²⁵ Interview with representative from the Agency for Social Assistance, July 2019, Sofia, Bulgaria

²⁶ Analysis of the Child Protection System, 2019; Interview with representative from the Agency for Social Assistance, July 2019, Sofia, Bulgaria

social services, gives methodological support for observing these standards and criteria, and develops criteria to analyse good practices in the provision of high-quality social services, select such practices and propose their approval at national level.²⁷

National Council for Child Protection

The State Agency for Child Protection, chairs an inter-ministerial coordination mechanism called the National Council for Child Protection, which has national consultative and coordination functions in relation to preventing and responding to VAC. The State Agency for Child Protection provides the secretariat for the Council, organises its activities and coordinates the implementation of its decisions.

The council may have no fewer than 23 and no more than 29 members, including the Chairperson. Members include the Deputy Minister of Labour and Social Policy, Deputy Minister of Justice, Deputy Minister of Foreign Affairs, Deputy Minister of Education and Science, Deputy Minister of Health, Deputy Minister of Interior, Deputy Minister of Finance, Deputy Minister of Culture, Chairman of the State Agency for Youth and Sports, Executive Director of the Agency for Social Assistance, Secretary of the National Commission for Combating Trafficking in Human Beings, representative of the National Council on Narcotic Drugs, Deputy Chairman of the National Statistical Institute, the Deputy Governor of the National Social Security Institute, the Governor of the National Social Security Institute, the Secretary of the Central Commission for Combating Juvenile Delinquency and a responsible representative of the National Association of Municipalities in the Republic of Bulgaria.²⁸ The Council also includes up to 12 representatives of child protection NGOs and the Chairperson may invite other representatives to participate in meetings, for example media representatives, a representative from the Ombudsman, or other 'persons of high public authority'.²⁹

The Council meets at least twice a year and each member may propose items for inclusion on the agenda. The functions of the Council include consulting with the State Agency for Child Protection Chairperson to develop and implement policies and programmes on child protection; discussing and coordinating state policy priorities on child protection including their financial provision; reading drafts for Acts containing provisions related to children's rights before their submission to the Council of Ministers; supporting and facilitating the contribution of NGOs to State policy on child protection; and monitoring the implementation of national, regional and international child protection programmes.³⁰

The Child Protection System analysis completed in 2019 highlighted some issues with the National Council for Child Protection. First, there is no limit on how many items can be included on the agenda, leading to long and ineffective meetings. At the same time, however, NGOs struggle to get their issues included in the agenda, which creates frustration. Second, the Council is not chaired by a Deputy Minister or Minister, as is usual for other national councils, which reduces its political influence and ability to engage participation from relevant ministries. Finally, the municipalities are not sufficiently

²⁷ Article 22(3), Social Services Act, last amended August 2020

²⁸ State Agency for Child Protection, '[Activity of the National Council for Child Protection](#)', accessed 27 October 2020

²⁹ Article 18 Child Protection Act 2000, last amended 2020; Article 5 of the Rules for the Structure, Organization and Activity of the National Council for the Protection of the Child, 2006, last amended 2013

³⁰ Article 2, Rules for the Structure, Organization and Activity of the National Council for the Protection of the Child, 2006, last amended 2013

represented. There is only one representative from the National Assembly of Municipalities and there is no formal process for consulting with the municipalities, meaning the breadth of views and situations at a municipal level are not reflected in the Council's work.³¹

3.2.2 Ministry of Interior

The Ministry of the Interior (MOI) is responsible for developing policies and guidelines on working with child victims and witnesses of violence, as well as children in conflict with the law.³²

The MOI is one of the three institutions, alongside the State Agency for Child Protection and the Directorates of 'social support' that should be informed when it is known that a child needs protection.³³ They are responsible for Police Protection Measures, which include protective custody of children at risk of violence from their parents or guardians (article 39 of the CPA). These measures allow the police to accommodate children in "specialist premises" or "institutions" or to request emergency placement in resident social services in circumstances where children need to be separated from persons who might cause them harm.³⁴ In cases requiring police protection, the MOI is required to provide security and escort of the children involved to the placements to which they have been referred.³⁵ Under the Coordination Mechanism (see below), the MOI must ensure the participation of police officers working in the Regional Directorates of the MOI in local multidisciplinary teams, and follow information sharing and data sharing procedures.³⁶

In terms of children in conflict with the law, the MOI is responsible for children in police detention facilities and participates in meetings for cases where children are placed in Social and Pedagogical Boarding Schools and Pedagogical Boarding Schools for Juvenile Delinquents, as well as meetings of Local Commissions for Combating Juvenile Delinquency.³⁷

The Ministry of Interior staff working with children are the inspectors at the Children's Pedagogical Rooms. They undergo initial police training at the Academy of the Ministry of Interior with a focus on working with children. Their job description specifies that they must have a professional qualification as a teacher or psychologist. As a child protection body according to art. 4, item 7 of the CPA, these are the only employees who can provide police protection. The amendments to the Penal Procedure Code in 2017 provide for the interrogation of child victims and witnesses of crime in "separate premises", which has been recognised as a limited, but positive step towards the implementation of more child-sensitive policing. There are proposals for further amendments to the Penal Procedure Code which are to be discussed by Parliament.

3.2.3 Ministry of Justice

The Ministry of Justice has some responsibilities relating to child protection and the protection of children from violence under the CPA. They are the central authority for overseeing international

³¹ Fresno, J. M. et al., 'Analysis of the Child Protection System in Bulgaria', July 2019, p.48

³² Interview with representative from the Ministry of Interior, October 2019, Sofia, Bulgaria

³³ Child Protection Act 2000, last amended 2017, Article 7

³⁴ Articles 39 & Article 6a(2) Child Protection Act 2000, last amended 2020

³⁵ Procedure for interaction upon notification of child abuse or child at risk of abuse, provided by UNICEF Bulgaria, 2017; Article 36(d) & Article 36(e) Child Protection Act 2000, last amended 2020

³⁶ Procedure for interaction upon notification of child abuse or child at risk of abuse, provided by UNICEF Bulgaria, 2017.

³⁷ Interview with representative of the Ministry of Interior, October 2019, Sofia, Bulgaria

adoption in accordance with the rules set out in the Family Code and are responsible for researching and concluding bilateral agreements with State Parties to the *Hague Convention on Protection of Children and Co-operation in Respect of Intercountry Adoption*. The Ministry of Justice is also responsible for ensuring that children who are deprived of their liberty are safeguarded while in detention.³⁸

3.2.4 Prosecutor's Office

The Prosecutor's Office monitors investigations and proceedings conducted with respect to criminal offences alleged to have been committed by minors and cases in which victims are children. The Prosecutor's Office has a cooperation agreement with the State Agency for Child Protection under which they have agreed to share information about child victims of crime and children in conflict with the law, including information on reports of crimes, and pre-trial proceedings. This agreement was made partially in response to an investigation in 2013, which found that whilst local Prosecutor's offices were informed about child protection cases, they did not always initiate proceedings (for example, the investigation found that trial proceedings are rarely initiated in early marriage cases),³⁹ potentially leaving children unprotected.

Prosecutors are also part of the Multidisciplinary Coordination Mechanism (described in more detail below) which consists of multi-disciplinary teams established at the Municipal level to handle individual cases of VAC. Further, the Prosecutor's Office conducts prevention campaigns among adolescents to help reduce crime and violence among young people, and sits on local committees dedicated to combating young offending (the Local Commissions to Combat Juvenile Delinquency).⁴⁰

3.2.5 Supreme Judicial Council

The Supreme Judicial Council has responsibility for ensuring that magistrates have opportunities to improve their competence, skills and qualifications. The Supreme Judicial Council is also involved in amending existing laws and drafting new laws in the area of criminal policy, including child protection legislation and domestic violence. The Council also maintains and manages all court buildings.⁴¹

3.2.6 National Ombudsman

Bulgaria does not have a children's ombudsman, but the National Ombudsman has a "Children's Rights" directorate which deals with complaints regarding children's rights. The Ombudsman, as a National Preventive Mechanism, also monitors the places where children are administratively detained, including residential social services and correctional boarding schools. The inspections aim to determine if there is a risk of violence or torture as well as to consider the treatment of children in these institutions, including the residential conditions, health and education services available. Following inspections, the Ombudsman makes recommendations to the relevant Ministry (MOES or MLSP) on reducing risk in these institutions.⁴² In 2019 the Ombudsman received 492 complaints related to children's rights, with the majority of complaints related to violations of civil rights and

³⁸ Article 6a(4)(4) Child Protection Act 2000, last amended 2020.

³⁹ SACP and Prosecutor's Office signed a partnership agreement, Justice News, <https://nmd.bg/en/sacp-and-prosecutorvs-office-signed-a-partnership-agreement/>, 2014, last accessed November 2020.

⁴⁰ Interview with representative from the Bulgarian Prosecution Service, October 2019, Sofia

⁴¹ Interview with representative from Supreme Judicial Council, July 2019, Sofia

⁴² Interview with representative from National Ombudsman, September 2019, Sofia

freedoms (222 complaints) and the family environment (150 complaints).⁴³ The Ombudsman additionally monitors the progress of government institutions in their commitment to guarantee the rights of the child provided for in the UN Convention on the Rights of the Child. The Ombudsman examines the strengths and weaknesses in the policies regarding children, the regulatory framework for them and any challenges associated, and makes recommendations for their improvement.⁴⁴

3.2.7 Ministry of Education and Science

The Ministry of Education and Science (MOES) is responsible for schools and education institutions, and, as such, must ensure the safety of children in State schools and kindergartens.⁴⁵ MOES is responsible for developing policies on the prevention of violence in schools and educational institutions to ensure children's rights are protected. An MOES representative sits on the National Council on the Prevention of Violence and cooperates with the State Agency for Child Protection and works with NGOs to develop projects to prevent violence among children and young people in schools.⁴⁶ As part of their activities for addressing VAC, the MOES have established the Mechanism for Counteracting Bullying and Violence in the Institutions of the Pre-school and School Education System (hereafter 'Mechanism for Counteracting Bullying and Violence in Schools'). The Mechanism outlines a standard approach for the prevention of and intervention against violence and bullying, assisting schools and pre-schools to create a safe education environment. The Mechanism sets out definitions of violence and bullying and clear prevention and intervention measures against violence and bullying in education institutions. Under the Mechanism, education institutions should develop an overall policy for prevention and response to violence, which can be integrated into other policies on the creation of a safe education environment or can be a standalone policy. Education institutions should establish a Coordination Council consisting of teachers, children and parents to plan, monitor and assess efforts for dealing with violence and bullying. The Coordination Council should develop and implement an action plan of prevention intervention against violence and bullying should be developed and implemented each year. The Mechanism establishes three levels of violence and bullying with suggested response and recording procedures.⁴⁷

3.2.8 Ministry of Health

The Ministry of Health (MOH) is responsible for care and protection of children, including medical care and protection.⁴⁸ Health officials have an obligation to report children at immediate risk of abandonment.⁴⁹ Health care professionals must notify the MOI and their local SAD of any suspected

⁴³ Ombudsman of the Republic of Bulgaria, 'Summary of the Annual Report of the Work of the Ombudsman 2010', March 2020, p.40

⁴⁴ Ombudsman of the Republic of Bulgaria, 'Summary of the Annual Report of the Work of the Ombudsman 2010', March 2020, p.81

⁴⁵ Article 6a(4)(3) Child Protection Act 2000, last amended 2020.

⁴⁶ Interview with representative from the Ministry of Education and Science, October 2019, Sofia, Bulgaria

⁴⁷ Ministry of Education and Science, 'Mechanism of Counteracting Bullying and Violence in the Institutions of the Preschool and School Education System', 2012, last amended 2017

⁴⁸ Article 6(a)(4)(7) Child Protection Act 2000, last amended 2020.

⁴⁹ Article 9 Ordinance For The Conditions And The Order Of Implementing Measures For Prevention Of Abandoning Children And Their Accommodation In Institutions, As Well As Their Reintegration (2003).

case of abuse or violence against a child admitted at hospital or visiting a school medical professional.⁵⁰

Under the multi-disciplinary Coordination Mechanism (detailed below), the MOH must ensure that medical professionals participate in local multidisciplinary teams and must provide free forensic examinations for child victims, which includes issuing forensic medical certificates.⁵¹

3.2.9 Coordination mechanism

The Multidisciplinary Coordination Mechanism (hereafter 'Coordination Mechanism') was adopted in 2010. This mechanism, which operates at the municipal level, requires that a multidisciplinary meeting be convened within 24 hours in response to any report of violence against a child. Following the adoption of the Social Services Act, the Child Protection Act was amended to cover the Coordination Mechanism in Case of Violence and to stipulate that a multidisciplinary team should be created to provide protection for a child at risk of or victim of violence or exploitation.⁵²

The team must include the social worker from the Child Protection Department, who is in charge of investigating the initial alert and who must notify the multidisciplinary team members within 24 hours, setting a date and time for the team to meet. The multidisciplinary team includes representatives from the municipality authority and representatives from the regional department of the MOI. Depending on the case, the team may also include representatives from the regional directorate of the Ministry of Health, the child's GP, or a representative from the relevant hospital department; representatives of the regional education inspectorate of the MOES, the principal of the child's school and the child's teacher; a representative from the Local Commission for Combating Juvenile Delinquency; a regional judge or regional prosecutor; a specialist from the relevant social service or the manager of a residential social service if applicable. The mayor of the municipality supports the coordination of the activities of the multidisciplinary team.⁵³ The multidisciplinary team develops an action plan to protect the child or prevent violence, outlining the health, social and education services required for protection and rehabilitation.⁵⁴

The State Agency for Child Protection monitors the Coordination Mechanism on an annual basis. Reports demonstrate a decrease in cooperation over time, with 97 per cent of municipalities reporting the use of multi-disciplinary teams in 2013 compared to 87 per cent in 2017.⁵⁵ Representatives from non-mandatory institutions only attended two-thirds of meetings in 2017 and the majority of these representatives were from social services, the Local Commission for Combating Juvenile Delinquency, NGOs or the judiciary, with participation by health and education authorities being very low.⁵⁶

⁵⁰ As set out under Article 125a of the Health Act 2004.

⁵¹ Procedure for interaction upon notification of child abuse or child at risk of abuse, provided by UNICEF Bulgaria, 2017.

⁵² Article 36(d) and Article 36(e) Child Protection Act 2000, last amended 2020

⁵³ Interview with representative from the Agency of Social Assistance, July 2019, Sofia, Bulgaria; Fresno, J. M. et al., 'Analysis of the Child Protection System in Bulgaria', July 2019, p.55; Article 36(d) Child Protection Act, last amended 2020

⁵⁴ Article 36(e) Child Protection Act, last amended 2020

⁵⁵ Fresno, J. M. et al., 'Analysis of the Child Protection System in Bulgaria', July 2019, pp.55-56

⁵⁶ Fresno, J. M. et al., 'Analysis of the Child Protection System in Bulgaria', July 2019, p.56

3.3 Services for children affected by or at risk of violence

The Social Assistance Act and its regulations set out the statutory services that must be provided to children affected by or at risk of violence. The new Social Services Act 2020 now governs the provision, use, planning, financing, quality, control and monitoring of social services.⁵⁷

3.3.1 Community support services

Social Rehabilitation and Integration Centres provide hourly support for children and adults including rehabilitation, social and psychological counselling, vocational guidance and assistance, support for children with behavioural problems, and programmes for social inclusion.⁵⁸ There are 54 Social Rehabilitation and Integration Centres across 22 regions. The Centres have an average capacity of 34, though this ranges from 15 in some centres to 150 in others.⁵⁹

Community Support Centres also provide support services, such as social and psychological counselling for children and families at risk, assessment of parental capacity, mediation in cases of parental divorce or separation, assessment and training of prospective foster and adoptive parents, counselling and support for children with behavioural problems, and the implementation of social programmes for children and families at risk.⁶⁰ Community Support Centres are the most common form of community service provided, with 143 Centres across all 28 regions. The Community Support Centres have an average capacity of 41, ranging from 15 to 130.⁶¹

Staff from Community Support Centres and Social Rehabilitation and Integration Centres may participate in multi-disciplinary teams to perform individual assessments of support needs and to prepare individual support plans.⁶²

3.3.2 Crisis Centres and Mother and Baby Units

Crisis Centres provide support and accommodation to children and young people who have been victims of violence, trafficking or other forms of exploitation. Support is provided for a period of up to 6 months and services include the provision of social and psychological support, legal aid, and the satisfaction of everyday needs.⁶³ There are 19 Crisis Centres across 14 regions, with multiple Crisis Centres in Sofia city, Silistra, Plovdiv and Burgas regions. The average capacity of a Crisis Centre is 10, ranging from 6 to 20 individuals.⁶⁴

⁵⁷ Article 1(1), Social Services Act, July 2020

⁵⁸ Additional provisions of the Regulations of the Social Assistance Act, number 22, January 2018; Focus group discussion with social workers, July 2020, Vidin, Bulgaria; Focus group discussion with social workers, July 2020, Ruse, Bulgaria

⁵⁹ Agency for Social Assistance, '[Register of the types of social services financed from the state budget](#)', accessed 30 October 2020

⁶⁰ Representative from Agency of Social Assistance, July 2019, Sofia, Bulgaria; Additional provisions of the Regulations of the Social Assistance Act, number 29, January 2018

⁶¹ Agency for Social Assistance, '[Register of the types of social services financed from the state budget](#)', accessed 30 October 2020

⁶² Additional provisions of the Regulations of the Social Assistance Act, number 29, January 2018

⁶³ Additional provisions to the Regulations of the Social Assistance Act, number 25, November 2016

⁶⁴ Agency for Social Assistance, '[Register of the types of social services financed from the state budget](#)', accessed 30 October 2020

Mother and Baby Units provide temporary accommodation for a period of up to 6 months for pregnant women and mothers at risk of abandoning their children. The units support mothers by providing employment support, housing assistance, and psychological and legal support.⁶⁵ There are 13 Mother and Baby Units across 13 different regions, with an average capacity of 6 individuals (ranging from 4 to 10).⁶⁶

Victims of domestic violence may be accommodated with their dependent children at a Crisis Centre or Mother and Baby Unit, with the latter being used if the victim is pregnant or has dependent children under the age of 3. Where the lives of the victim or their children are deemed to be in imminent danger, the Crisis Centre or Mother and Baby Unit must inform the Ministry of Interior.⁶⁷

3.3.3 Centre for working with children on the street

Centres for working with children on the street provide social services for street-connected children, including their social rehabilitation and integration, family consulting and support, medical services, educational services, and training to build parenting capacity.⁶⁸ There are 21 centres for working with children on the street across 11 regions. The centres have an average capacity of 20, ranging from 5 to 30.⁶⁹

3.3.4 Day centres for children and young people with disabilities

Day centres provide support for children and young people with permanent disabilities to meet their daily and rehabilitation needs and to provide leisure activities. The aim is to promote social inclusion and prevent placement in specialised institutions. Specialists from day centres participate in multi-disciplinary teams to conduct individual needs assessments and to prepare individual support plans.⁷⁰ There are 98 day centres for children and young people with disabilities in all 28 regions. Day centre capacity varies from 8 to 72, with an average capacity of 28 individuals. There are an additional two day centres for children and young people with severe multiple disabilities that provide very specialised services, with a capacity of 20 individuals per centre.⁷¹

3.3.5 Other community residential services

Family type accommodation centres provide living accommodation modelled on a family environment for individuals in need of longer-term care, for example children and young people with disabilities, adults who are dependent on care, and elderly people. Children and young people without disabilities may also be accommodated in family type accommodation centres where they may receive social, health, educational and other services according to their needs.⁷² There are 267 family type

⁶⁵ Focus group discussion with social workers, February 2020, Sofia, Bulgaria; Additional provisions of the Regulations of the Social Assistance Act, number 30

⁶⁶ Agency for Social Assistance, '[Register of the types of social services financed from the state budget](#)', accessed 30 October 2020

⁶⁷ Regulations of the Social Assistance Act, Article 40b, last amended February 2017

⁶⁸ Additional provisions to the Regulations of the Social Assistance Act, number 31

⁶⁹ Agency for Social Assistance, '[Register of the types of social services financed from the state budget](#)', accessed 30 October 2020

⁷⁰ Additional provisions to the Regulations of the Social Support Act, number 21, January 2018; Agency for Social Assistance, '[Register of the types of social services financed from the state budget](#)', accessed 30 October 2020

⁷¹ Agency for Social Assistance, '[Register of the types of social services financed from the state budget](#)', accessed 30 October 2020

⁷² Additional provisions of the Regulations of the Social Assistance Act, number 26, November 2016

accommodation centres for children and/or young people, with an average capacity of 12 individuals (ranging from 5 to 15). Family type accommodation centres are found in all 28 regions.⁷³

Transition housing is provided for children at risk under the Child Protection Act aged between 15 and 18, providing accommodation and support to live independently in the community. Children who have been accommodated in residential institutions may also be accommodated in transition housing to prepare them for integration back into the community.⁷⁴ There are 16 transition housing services across 11 regions, with all but one providing accommodation for 8 young people.⁷⁵ Foster care describes the placement of a child with family or friends or in a foster family.⁷⁶

3.3.6 Variation in services by municipality

Some municipalities, including Vidin, have a Complex for Social Services which bring services together under one roof, for example a Community Support Centre, a Crisis Centre, residential accommodation, and a 'blue room' for child-friendly interviewing (see Box 1 for a description of a blue room). Vidin municipality also has a Homeless Youth Centre, a Family-type Placement Facility for children with disabilities and a [Daycare] Centre for Children and Young People with Disabilities.

Not all municipalities have these services, however, and there is considerable variation between municipalities. In the more rural municipalities, such as Bregovo, social workers must refer cases to social service providers in the regional town. An NGO staff member in Pernik highlighted the problem of access to services:

"One of our services, the Community Support Centre, is located in a more suburban neighbourhood and this makes it difficult to access the service because, for example, two means of transportation need to be taken in order to reach the Community Support Centre. It makes it difficult for us and for the users of the service, but apparently there wasn't any other building available when it was created. And we usually are met with the resistance of the parents regarding the use of this service, because it takes time and resources to reach it."

- NGO staff member, Pernik

While some areas have mobile services, social workers in Bregovo reported that "the mobile service provider is not inclined to conduct home visits here" and that "mobile services have a long way to go before they can meet the needs of all children".⁷⁷ This leads to an unequal distribution of services around the country, with many services concentrated in larger cities and no services available to those living in the smaller towns or rural areas.

⁷³ Agency for Social Assistance, '[Register of the types of social services financed from the state budget](#)', accessed 30 October 2020

⁷⁴ Additional provisions to the Regulations of the Social Assistance Act, number 32, November 2016

⁷⁵ Agency for Social Assistance, '[Register of the types of social services financed from the state budget](#)', accessed 30 October 2020

⁷⁶ Agency for Social Assistance, '[Register of the types of social services financed from the state budget](#)', accessed 30 October 2020

⁷⁷ Focus group discussion with social workers, July 2020, Bregovo, Bulgaria; Focus group discussion with local government authorities, July 2020, Vidin and Bregovo, Bulgaria

3.3.7 NGOs

In many municipalities NGOs provide some or all social services. Qualitative interviews demonstrated the important role of NGOs in service provision. For example, in Vidin, interview participants said that NGOs are responsible for providing all social services.⁷⁸ In Pernik, the Pulse Foundation is a major partner in providing services, including childcare and crisis placements for children at risk of violence.⁷⁹ In Ruse, one of the crisis centres is managed by the NGO Centar Dinamika.⁸⁰ Animus provides several services in Sofia including a crisis centre that provides psychological counselling and therapy, crisis intervention and counselling for non-abusive parents of child victims of violence, and intervention programmes to work with abusers.⁸¹ Animus, Pulse and the Social Activities and Practices Institutes are some of the main NGOs operating in Bulgaria that specialise in child protection and violence against children and that provide services in multiple regions. Their work is described in more detail in the following sections

Animus Association Foundation

Animus Association Foundation (hereafter ‘Animus’) was founded in 1994 and works to support women and children, to promote gender equality in Bulgarian society and to coordinate government and NGO efforts to combat violence against women and children.⁸² Animus is funded by Sofia Municipality, the European Commission, the Bulgarian-Swiss programme of cooperation, Medicor Foundation Liechtenstein, the EEA, and the Oak Foundation.⁸³ Animus operated the national child helplines until 2020 and the national domestic violence helpline and conducts educational and training programmes for professionals working with children. One programme aiming to prevent violence in schools is the ‘Zippy’s Friends’ programme, which takes a whole school approach to mental health promotion and bullying prevention (see Box 2 below for more information about this programme).⁸⁴

Animus also provides services in several regions of Bulgaria. One of these services is the Child Advocacy Centre (“Zona ZaKrila”) in Sofia. The Child Advocacy Centre provides a ‘one stop shop’ for children who have been victims of violence or abuse, offering counselling and therapeutic services, coordination with other institutions such as social assistance and medical assistance, forensic or domestic violence practitioners, legal counselling and representation, working with the child’s school, and working with the child’s family. See Box 1 for more information about the Protection Zones.⁸⁵

Box 1: Child Advocacy Centres “Zona ZaKrila” case study

Three Child Advocacy Centres (“Zona ZaKrila”) have been established to date, in Montana (September 2015; SAPI), Sofia (October 2015; Animus) and Shumen (January 2016; SAPI).

⁷⁸ Focus group discussion with SAD staff and service providers, July 2020, Vidin

⁷⁹ Focus group discussion with CPD and NGO representatives, October 2020, Pernik

⁸⁰ Focus group discussion with NGO service providers, July 2020, Ruse

⁸¹ Interview with Animus representative, September 2019, Sofia

⁸² Animus Association website, ‘[Mission, history, goals](#)’, accessed 8 October 2020

⁸³ Animus Association website, ‘[Funding](#)’, accessed 30 October 2020

⁸⁴ Focus group discussion with NGOs, September 2019, Sofia

⁸⁵ Focus group discussion with NGOs, September 2019, Sofia

Beneficiaries: Child victims and witnesses of violence; abusive parents; non-abusive parents and parents who have experienced domestic violence. In 2019 more than 7,500 children were supported through the three Child Advocacy Centres.⁸⁶

Services: Designed to be a 'one-stop shop' providing integrated support and rehabilitation services and promoting child-friendly practices in legal and judicial proceedings. Staffed by multidisciplinary teams including specially trained social workers, psychologists and lawyers, who cooperate closely with police investigators, prosecutors and social workers from CPDs.

Children have an individual needs assessment to determine what support they need. If necessary, staff accompany the child to forensic medical examinations or medical appointments and offer legal advice to the child's parents and legal representation to the child. Legal aid is provided free of charge and Zone lawyers accompany the child and their family throughout proceedings. A 'blue room' is used to interview children in a child-friendly manner. 'Blue rooms' have a one-way mirror or video conferencing system and are designed to be comfortable, inviting and calm. The child is interviewed by a professional such as a psychologist or social worker, while other participants such as the judge, prosecutor, police officer, defendant and his/her lawyer, and the child's parents or guardians can observe in a separate room and ask questions through headphones to the professional leading the interview. The whole process is recorded and videoed to ensure that the hearing or interview can be used as evidence at later stages.

Psychologists provide crisis interventions and long-term therapeutic support to assist the child's recovery. Staff also work with parents, providing psychological and parenting support to enable parents to assist their child's recovery as well. In cases of domestic violence, staff work with non-abusive parents to develop their protective capacity and ability to recognise risk. The main goal is to support parents to continue to care for the child within a family environment. Where possible and appropriate, staff will also work with abusive parents to help them change their behaviour.

In addition, Child Advocacy Centres run activities in local schools to train children in conflict resolution, bullying prevention, and emotion regulation, with the aim of reducing violence and aggression in schools and helping children to recognise abusive or violent behaviour.

Evaluation: An evaluation carried out in 2019–20 found that the Child Advocacy Centres deliver high-quality, integrated services for child victims and witnesses, and are widely recognised as models of best practice. Service integration and staff expertise were crucial to the Zones' success and enabled them to coordinate between different institutions. The Centres were found to improve access to justice, particularly for disadvantaged children. Children who had received support emphasised the value of the psychosocial services while parents highlighted the role of the legal support in alleviating their anxiety. Both parents and children reported increased wellbeing as a result of the services they received, including feeling less anxious, less fearful and more confident.⁸⁷

Areas for improvement include the need to formulate plans for sustainable funding. The current model relies on financial support from UNICEF. Both bodies should be actively exploring means to continue funding for the service once UNICEF funding ceases. Further, a full training programme for new staff needs to be put in place, to ensure a high-quality and consistent service. More awareness

⁸⁶ UNICEF [Annual Report](#) 2019, p.7

⁸⁷ UNICEF Bulgaria, 'Evaluation of Child Advocacy Centres Supported by UNICEF Bulgaria: Final Report', May 2020, Sofia, Bulgaria

raising is needed with law enforcement staff. For instance, some police and justice officials see the use of child friendly interviewing techniques and use of the blue rooms as inconvenient or unnecessary and time wasting, and are unwilling to conduct their interviews there, preferring to use adult interview rooms and techniques.



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The Pulse Foundation

The Pulse Foundation provides prevention and rehabilitation programmes for children, young people and their families who have suffered or are at risk of violence. The Pulse Foundation runs violence prevention activities in schools and kindergartens and organises trainings, seminars and workshops for professionals on working with child victims of violence and domestic abuse. Pulse also provides crisis centres for child victims of violence and their families.⁸⁸ Pulse is funded by the Oak Foundation, the European Commission, EEA, Agir Ensemble pour les Droits de l'Homme, Global Fund for Women, Netherlands government, Open Society Foundation, Ma Ma Cash, Government ministries including the MLSP, the MOH, the MOES, the MOJ and the Ministry of Regional Development and Public Works, and various Bulgarian organisations.⁸⁹

The Social Activities and Practices Institute

The Social Activities and Practices Institute (SAPI) has four main areas of work. The first is the provision of social services for children and families in Sofia, Shumen, Vidin, Sliven, Stara Zagora and Montana. In Montana and Shumen, SAPI manages two Protection Zones (described above and in more detail in Box 1). SAPI also carries out research and develops policies and guidelines for working with child victims of abuse and child victims or witnesses of crimes, runs a Professional Training Centre

⁸⁸ Anna Lindh Foundation website, '[Members: Pulse Foundation](#)', accessed 8 October 2020

⁸⁹ Pulse Foundation Website, '[Donors and Partners](#)', accessed 30 October 2020

offering training programmes and qualifications for social workers, and supports the Agency for Social Assistance in developing best practice guidelines for the provision of social services and case management and provides supervision to social workers working in the municipalities.⁹⁰ As with Animus and Pulse, SAPI is funded both by municipalities and centrally by the SACP, Sofia Prison, MoJ, and MLSP, as well as by Bulgarian NGOs and various European and international organisations such as Eurochild, the Oak Foundation, and the World Bank.⁹¹

⁹⁰ SAPI website, '[Programs](#)', accessed 8 October 2020; Interview with representative from SAPI, September 2019, Sofia

⁹¹ SAPI website, '[Partners and links](#)', accessed 30 October 2020

4 Research findings: capacity of social services

Key findings

- > Altogether, social workers are aware of violence against children as a serious issue in Bulgaria and show good awareness of the markers of violence or abuse. Social workers are less likely to identify cases of sexual abuse and may be less able to recognise these cases.
- > While many study participants were positive about cooperation between agencies and the use of the Coordination Mechanism, there is evidence that the mechanism is not working as intended, with participation from justice, education and health professionals being difficult to secure.
- > There are inefficiencies in the use of the Coordination Mechanism with no clear prioritisation of cases resulting in waiting lists and a high workload for CPD social workers.
- > There is evidence that social workers, particularly those working in Child Protection Departments, face a high workload and a lack of resources, leading to high levels of stress and staff turnover. CPD social workers in particular reported feeling overwhelmed by their workload, with nearly a quarter reporting that they rarely or never receive supervision.
- > There is a need for a more consistent and sustainable approach to providing social worker training in order to ensure they have the competencies required, as well as a minimum educational qualification for social workers.
- > The system of oversight prioritises documentary evidence resulting in a large volume of paperwork for social workers. There are also inefficiencies in the information management system, for example in sharing data between different CPDs.
- > Social workers highlighted working with hostile or unreceptive parents as a particular challenge. The relationship between parents and social services appears to have become particularly strained in the context of recent public debate around children's rights and child protection

As set out above, child protection at the municipal level is delivered by the Social Assistance Directorates, through their Child Protection Departments (CPDs) (as set out in Article 20 of the Child Protection Act). The SAD receives child protection referrals, including from the State Agency for Child Protection, and is responsible for handling such cases from the point of referral onwards.⁹²

4.1 Awareness and identification of VAC by social workers

Among the professionals surveyed, social workers were the most likely to see violence against children as a serious issue, with 34 per cent rating all types of violence as serious problems compared to 18 per cent of all professionals.⁹³ Child neglect was seen as the most serious issue, rated as a serious problem by 72 per cent of social workers, followed by physical violence (68 per cent) and psychological violence (68 per cent). All social workers viewed these three issues as problematic to a certain extent (i.e. none rated them as 'insignificant problems'). Opinion was more divided on child sexual abuse, with 54 per cent viewing it as a serious problem and 21 per cent viewing it as an insignificant problem. Online abuse was also seen as less problematic overall.

⁹² Interview with representative from the Agency of Social Assistance, July 2019, Sofia, Bulgaria

⁹³ Pearson $\chi^2(12)=74.9679$, $p<0.001$



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Awareness of the issues of different types of violence appears to be connected to the types of cases that social workers encounter. In interviews, social workers reported that physical and emotional abuse are the most common types of violence that they encounter, and that domestic violence is also a common reason for children to come into contact with social services.⁹⁴ However, in the survey, the most common type of case encountered was neglect, reported by 83 per cent of social workers, followed by physical violence (78 per cent) and emotional abuse (74 per cent). Social workers were more likely to have identified cases of neglect and emotional abuse compared to other professionals.⁹⁵ Sexual violence and online abuse were less commonly encountered, reported by 44 per cent and 31 per cent respectively. Interview respondents recognised that the types of cases encountered may be influenced by perceptions and attitudes towards different types of violence, and that certain types may be underreported. For example, one social worker commented:

In my opinion, the scale is much larger than it seems at first glance. We see emotional abuse when the parents separate, schooling needs are neglected, etc. The cases of physical abuse are more easily recognisable but we try to reach the root causes for every child we work with.

- Social worker, Sofia⁹⁶

All social workers surveyed could name at least one marker that could indicate a child is at risk of violence, abuse or neglect, and social workers named seven markers on average (out of a possible 12).

⁹⁴ Focus group discussion with social workers, July 2020, Ruse; Focus group discussion with social workers, July 2020, Vidin

⁹⁵ Neglect: Pearson $\chi^2(4)=22.8173$, $p<0.001$; Emotional abuse: Pearson $\chi^2(4)=23.6072$, $p<0.001$

⁹⁶ Focus group discussion with social workers, Sofia

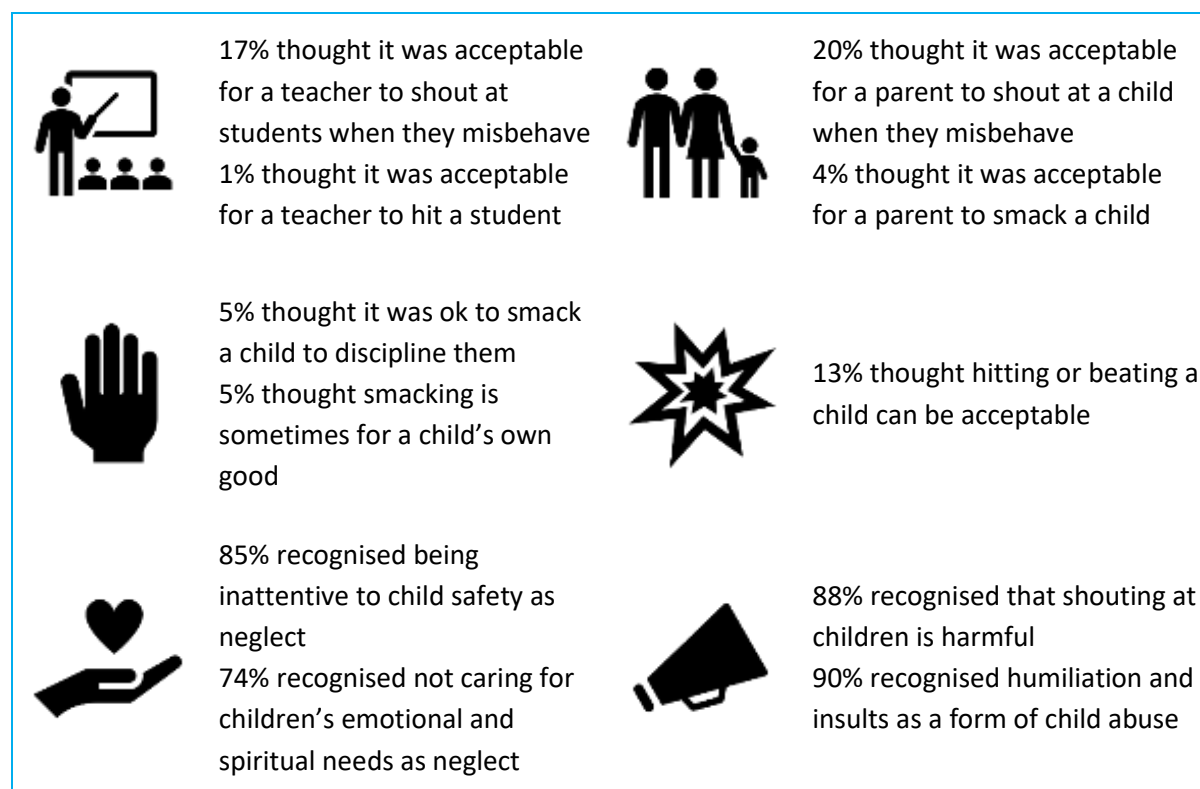
The most common marker named was a change in the child's behaviour (91 per cent), followed by unexplained marks, bruises or scratches (77 per cent), flinching or cowering at sudden movement (73 per cent), and being reluctant to go home (73 per cent). Less known markers were having knowledge that seems inappropriate for their age (35 per cent), expressing concern about siblings (28 per cent) and acquiring expensive items (22 per cent). The former and latter of these may be markers of sexual violence or exploitation, suggesting that social workers may be less familiar with these forms of violence and less able to identify them.

Altogether, social workers are aware of violence against children as a serious issue in Bulgaria and show good awareness of the markers of violence or abuse. Social workers are less likely to come across cases of sexual abuse and may be less able to recognise these cases. Online abuse was not mentioned in interviews and was seen as a less serious problem in the survey, suggesting that this may be an area in which greater awareness is required.

Acceptability of VAC by social workers

Most social workers saw physical punishment of children as unacceptable, though 13 per cent disagreed that hitting or beating a child is always unacceptable (Figure 2). Shouting was seen as more acceptable though most did recognise that it may harm children. While the majority of social workers recognised forms of neglect, 26 per cent did not recognise the importance of caring for children's emotional and spiritual needs.

Figure 2 Summary of social workers' attitudes towards VAC



4.2 Response to VAC cases by social workers

Following the referral of a case of violence against a child, child abuse or neglect, the Coordination Mechanism is triggered and the local SAD, the State Agency for Child Protection and the MOI must all

be notified. The SAD appoints a social worker from the CPD to work on the case and they prepare a report for the multidisciplinary team, which must convene within 24 hours. Discussions may be had with the child's family or neighbours to ascertain the nature of the violence, for example whether it is a one-off incident or an ongoing problem.⁹⁷ During the meeting, the team discusses the report and the facts of the case, and prepares an Action Plan outlining the responsibilities of the different institutions and specifying the measures to be taken, including whether the child should be removed from their family.⁹⁸ The Action Plan will specify which community or social services the child should be referred to and whether any other services are required. For example, in cases of sexual abuse, a forensic medical examination must be arranged and carried out in the presence of witnesses including a forensic doctor.⁹⁹

In interviews, social workers emphasised the need to convene a Coordination Mechanism meeting and the importance of gathering evidence from multiple stakeholders in order to determine the best course of action:

"...we usually hold a workshop where we invite representatives of other institutions – CPD, the police, Children's Pedagogical Room, school officials, kindergarten, general practitioner, the municipality, i.e. all stakeholders in order to get a complete picture of who has observed what."

- NGO social worker, Pernik¹⁰⁰

Many highlighted the need to act in the best interests of the child and to take an individual approach, which might involve taking the child into kinship care, foster care or a Crisis Centre or Family-Type Placement Centre if the child is deemed to be at risk of further violence. Temporary placements might also be used to protect children while investigations are conducted, with the ultimate aim of returning the child to the family.

"We would place the child under police protection for 24 hours in order to conduct a discussion with their father and determine the cause of violence. We would take actions in the best interest of the child, with their removal from the family environment being our last option."

- CPD social worker, Bregovo¹⁰¹

Many of the cases discussed by social workers involved domestic violence. Social workers described the use of the Protection against Domestic Violence Act to initiate proceedings for protection for both the mother and her children. Several social workers also described the difficulties in dealing with cases of domestic violence, as women may not want to leave their partner or press charges. Removing children from their families (an executive decision) was also described as a difficult decision, as being placed at a Crisis Centre was seen by some as a "form of punishment".¹⁰² Children may retract their testimony in order to return to their home environment. One social worker described:

⁹⁷ Focus group discussion with social workers, July 2020, Bregovo, Bulgaria

⁹⁸ Interview with representative from the Agency of Social Assistance, July 2019, Sofia, Bulgaria

⁹⁹ Focus group discussion with NGO and CSC social workers and service providers, October 2019, Pernik

¹⁰⁰ Focus group discussion with NGO and CSC social workers and service providers, October 2019, Pernik

¹⁰¹ Focus group discussion with CPD social workers, July 2020, Bregovo

¹⁰² Focus group discussion with social workers, July 2020 Ruse

“Often youths at the CC will ask me this: ‘If I say that I lied about the violence part, will they send me back home?’ I have also heard a child who has experienced violence ask ‘Are you punishing me for telling the truth?’ In such cases a child does not respond well to counselling sessions and the only thing they want is to go back home.”

- Social worker, Vidin¹⁰³

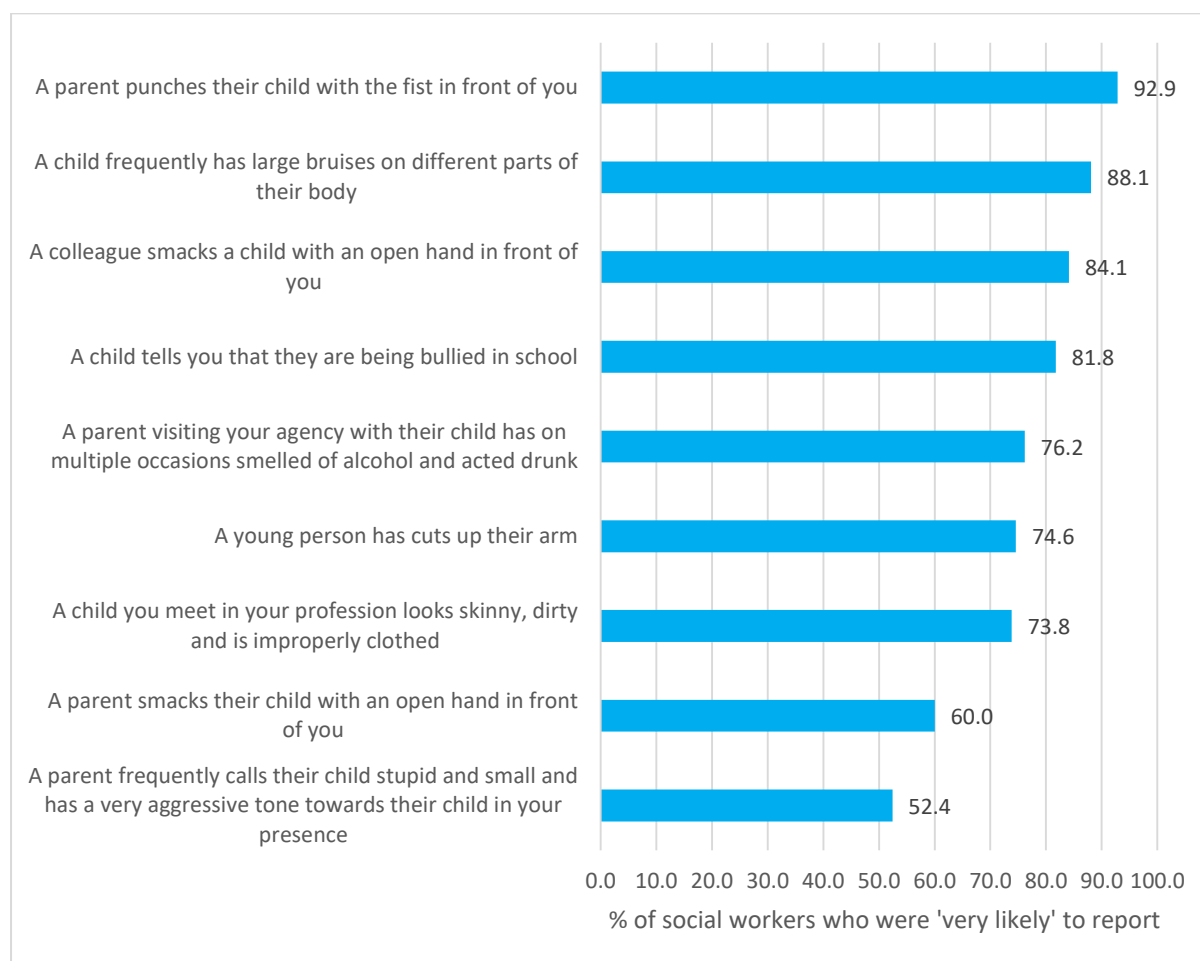
Survey results on responding to VAC

Social workers were asked a series of questions about their attitudes towards violence and responding to suspected violence against children, including how likely they would be to initiate a child protection process in various situations. Social workers were very likely to report in most of the situations, and most likely to report witnessing a parent punching their child with their fist (Figure 3). However, only 60 per cent were very likely to report witnessing a parent smacking their child with an open hand. It would appear from the findings that social workers are more reluctant to report cases involving a child’s parents unless the violence is serious, such as punching or causing injury.

Interestingly, social workers are more likely to initiate a child protection process for a child who is being bullied at school than for a child who appears to be neglected or who is being emotionally abused and, concerning, only half (52 per cent) were very likely to report a parent being emotionally abusive towards their child. These findings suggest that cases of neglect and emotional abuse may not be receiving the same attention as physical abuse. They could also reflect social workers’ reluctance to engage with families in the face of hostility towards social workers and the growing anti-child rights narrative.

¹⁰³ Focus group discussion with social workers, July 2020, Vidin

Figure 3 Percentage of social workers who are very likely to report different situations involving suspected violence against children



In the survey, social workers reported that the most common sources of referrals in the past year were the police (60 per cent of social workers had received a referral), education services (57 per cent) and the public (46 per cent). Social workers in CPDs were more likely to have received referrals from the police and the public.¹⁰⁴ Around a third (35 per cent) of social workers had received a referral from health services while a fifth (21 per cent) had received one from the justice system. When asked to name the institution from which they received the most referrals, social workers were evenly split among the police (31 per cent), education services (30 per cent) and the public (26 per cent), with very few receiving referrals from health services or the judiciary.

Official statistics, on the other hand, suggest the most common source of referrals is parents (26 per cent of alerts in 2017), followed by the MOI (22 per cent), educational institutions (16 per cent) and the national helpline (12 per cent), with very few from health institutions.¹⁰⁵ By comparison, in England the top two sources of referrals are the police and education services (29 per cent and 20 per cent of total referrals respectively), but health services were the third most common source (15 per cent of total referrals).¹⁰⁶ This suggests that health authorities in Bulgaria may be failing to recognise or report many cases of violence, which is concerning given the high proportion of physical violence seen (46

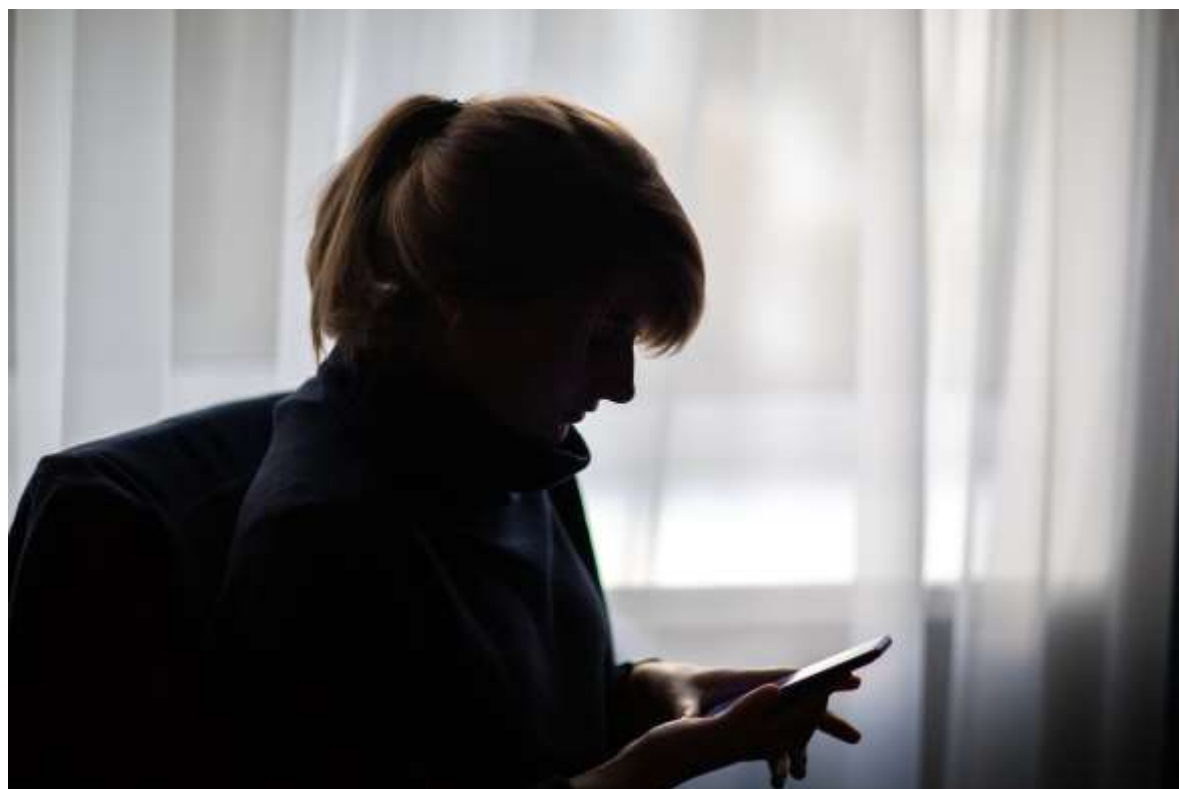
¹⁰⁴ The police: Pearson $\chi^2(2)=14.4621$, $p=0.001$; The public: Pearson $\chi^2(2)=8.5428$, $p=0.014$

¹⁰⁵ Fresno, J. M. et al., 'Analysis of the Child Protection System in Bulgaria', July 2019, p.56

¹⁰⁶ LG Inform, '[Source of referrals to children's social services](#)', 2018/19, accessed 23 October 2020

per cent of referrals). Health professionals are well-placed to identify early signs of physical violence, neglect and abuse and should be supported to recognise and report any suspected cases to ensure that early intervention or prevention is possible.

Just over half of social workers reported in the survey that they had identified a suspected case of violence, abuse or neglect in the past six months. Social workers in CPDs were more likely to have identified a case (63 per cent) than those in CSCs (48 per cent) or SADs (23 per cent), reflecting the different nature of these roles.¹⁰⁷ Social workers who had identified a child they thought was at risk of violence, abuse or neglect were asked what action they had taken. Two thirds had initiated a formal child protection process, half had spoken to the parents, 45 per cent had spoken to the child, 36 per cent had reported it to the person responsible for the child, and 30 per cent had reported it to the police.



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4.3 Social worker workload

Social workers were reluctant to report their caseload as they were concerned that they were being held accountable.¹⁰⁸ Among those who did respond, the minimum caseload reported was 2 while the maximum was 200. Social workers at CPDs reported a much higher caseload, reporting an average of 55 cases compared to 26 cases for those at SADs and 15 cases at CSCs.¹⁰⁹ This high caseload is also reported by participants in qualitative interviews, with one social workers in Sofia saying “We often have waiting lists. Our capacity is to serve 120 clients, but we worked with 260 clients and another 50

¹⁰⁷ Pearson $\chi^2=13.33$, $p=0.001$

¹⁰⁸ Personal communication from Estat enumerators

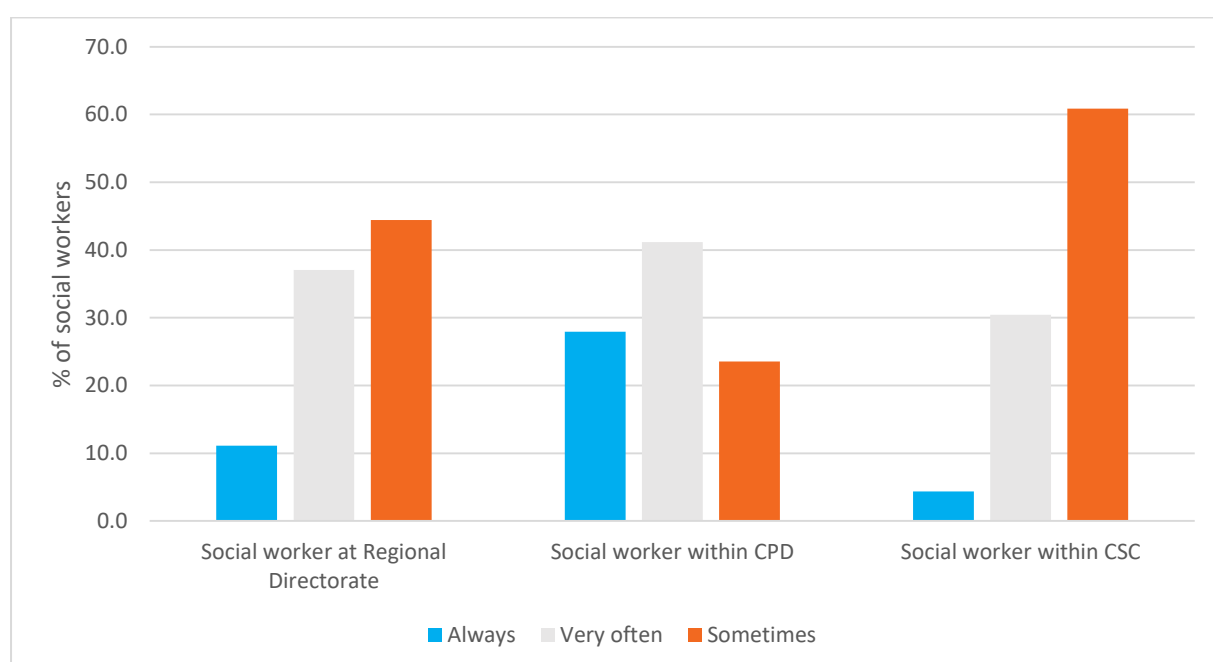
¹⁰⁹ $F=4.26$, $p=0.0192$

on the waiting list.”¹¹⁰ Social workers highlighted the impact that this has on the quality of services provided. A staff member at a residential care home commented “each CPD employee has 40 cases, which in itself does not speak of effective but rather of documentary work.”¹¹¹

In the survey, quite a low proportion of these cases were reported to involve violence against children, with around half of social workers saying that less than 10 per cent of their cases are VAC-related.

A large proportion of social workers said that they are overwhelmed by their workload. CPD social workers’ higher workload is reflected in over a quarter saying they always feel overwhelmed, while 40 per cent say they very often feel overwhelmed. Social workers at SADs and CSCs are slightly less likely to feel always overwhelmed, but 37 and 30 per cent respectively say they very often feel overwhelmed, and 44 and 61 per cent that they feel like this sometimes.

Figure 4 Percentage of social workers who feel overwhelmed by their workload



These findings indicate a worrying level of stress and lack of capacity among social workers that is reflected in the qualitative findings. Several participants across multiple institutions highlighted the need for more staff in CPDs and the high level of staff turnover due to high workloads, low salaries and a lack of support:

“I think the problem is that CPDs are understaffed, suffer from burnout, lack skills and there is a lot of employee turnover. These problems should be resolved and their remuneration should be better.”

- Staff member at Animus NGO, Sofia¹¹²

Another NGO worker commented:

¹¹⁰ Focus group discussion with social workers, February 2020, Sofia, Bulgaria

¹¹¹ Focus group discussion with NGO and CSC social workers and service providers, October 2019, Pernik

¹¹² Focus group discussion with NGOs, September 2019, Sofia, Bulgaria

“We have noticed that the social workers are reaching higher and higher degrees of burnout and the work is becoming harder.”

- Staff member at Pulse Foundation, Sofia¹¹³

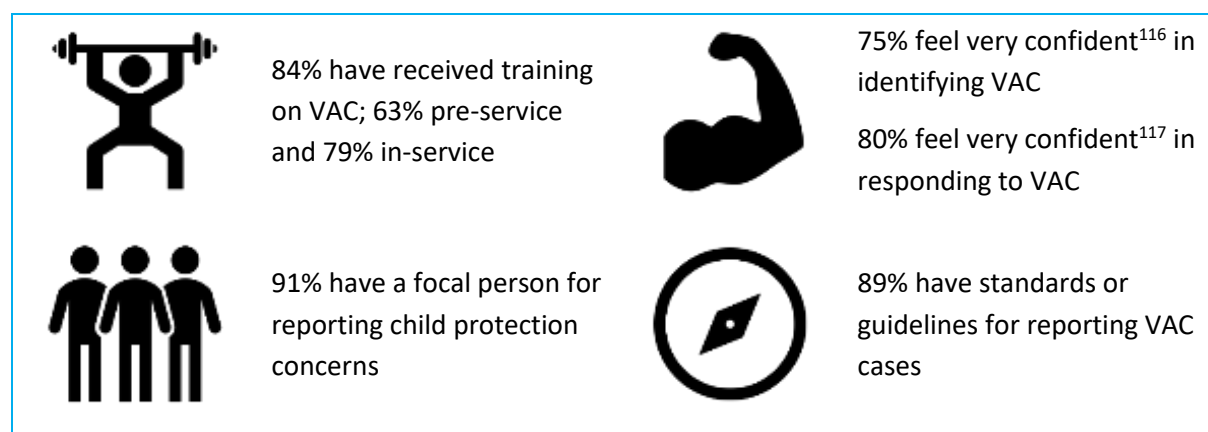
Social workers themselves expressed frustration and disillusion with the situation they face, with one social worker summing up their role: “There are nice moments but everything else is very difficult.”¹¹⁴ Issues with staffing are discussed further in the ‘Key barriers’ section below.

4.4 Training, guidance and institutional policies

Social workers

Around two-thirds of social workers (63 per cent) had received pre-service training on violence against children, child abuse or neglect, while 79 per cent had received in-service training on these issues. CPD and CSC social workers were more likely to have received these types of training than SAD social workers.¹¹⁵ Among those who had received in-service training (100 social workers), just over half (56 per cent) had been trained in the past year, including 30 per cent who had been trained in the past six months. The majority said the training lasted less than a week, with 61 per cent who had 1 to 2 days of training and 32 per cent who had 3 to 5 days. Training was generally delivered face-to-face (85 per cent). NGOs were the most common training provider (39 per cent), followed by the Ministry (29 per cent) and the social worker’s agency (19 per cent). Our data reflects the findings of the Child Protection System analysis, which found that training sessions for social workers are generally short and ad hoc rather than part of a formal system of training, and are mainly provided through EU-funded projects or by NGOs. **There is a need for a more consistent and sustainable approach to providing social worker training in order to ensure they have the competencies required.**

Figure 5 Summary of social workers’ responses to questions on training, guidance and institutional policies



¹¹³ Focus group discussion with NGOs, September 2019, Sofia, Bulgaria

¹¹⁴ Focus group discussion with social workers, February 2020, Sofia, Bulgaria

¹¹⁵ Pre-service training: Pearson $\chi^2(2) = 6.5118$, $p = 0.039$; In-service training: Pearson $\chi^2(2) = 7.01$, $p = 0.03$

¹¹⁶ ‘Strongly agree’ with the statement ‘Today, I am confident about my knowledge of how to identify a child at risk of or suffering violence, child abuse or neglect’

¹¹⁷ ‘Strongly agree’ with the statement ‘Today, I am confident about what to do if suspecting that a child is at risk of or suffering violence, child abuse or neglect’

	<p>94% have a child protection policy</p> <p>91% have a code of conduct for interacting with children</p>		<p>90% are aware of the law against physical punishment</p> <p>97% are aware of their obligation to report a suspected VAC case</p>
	<p>87% inform children about their rights</p> <p>43% seek the child's opinion in all cases, 47% in most cases</p>		<p>98% have a complaints mechanism for parents</p> <p>84% have one for children</p>

CSC social workers were much more likely to say they received supervision and/or mentoring than those at SADs and CPDs, with 65 per cent reporting that they always receive supervision compared to just 19 per cent of SAD social workers and 38 per cent of CPD social workers.¹¹⁸ Nearly a quarter (24 per cent) of CPD social workers said that they rarely or never receive supervision. This reflects findings from the qualitative interviews, in which social workers in municipal services highlighted the lack of supervision. For example, in Pernik social workers said that they haven't received any training or supervision from their agency. Where supervision is given, some social workers didn't see it as being very effective:

"Although I have had supervision from the Agency for Social Assistance three times so far, I have seen no effect."

– CPD social worker, Sofia¹¹⁹

Despite a lack of regular supervision, most social workers (87 per cent) report that they always or very often receive the advice and support they need when dealing with a difficult case, and there were no differences between social workers at different agencies. This suggests that while CPD social workers may not receive regular supervision, managers are able to prioritise giving support in challenging cases.

In interviews, many social workers commented that they would like more training:

"I believe that social workers need a lot of top-up trainings, support and care for the team, as well as supervision because otherwise people are overwhelmed and they are unable to work."

– CPD social worker, Sofia¹²⁰

The majority of survey respondents (91 per cent) also said they would like training to build their capacity. The area in which social workers most wanted capacity building was working with families and children (29 per cent), followed by early detection and recognition (23 per cent) and prevention of violence and abuse (16 per cent). These topics should already form part of social workers' basic training, further highlighting the need for a more comprehensive training programme with

¹¹⁸ Pearson $\chi^2(8) = 17.1022$, $p = 0.029$

¹¹⁹ Focus group discussion with CPD and CSC social workers, February 2020, Sofia

¹²⁰ Focus group discussion with CPD and CSC social workers, February 2020, Sofia, Bulgaria

opportunities for specialisation and more advanced training to enhance the skills of the social service workforce.

NGOs

NGOs provide a lot of the training on violence against children delivered to professionals, with 23 per cent of those who received in-service training having had this delivered by an NGO. Social workers working in NGO-run services also appear to receive better training and supervision than those working in municipally-run services. A social worker at a CSC run by Animus in Sofia commented:

"I must say Animus takes very good care of its team. We have weekly group supervision and we have the opportunity for individual supervision at any point of time."

– Social worker at Animus CSC, Sofia¹²¹

Staff at both Animus and Pulse described having regular trainings, weekly individual supervision and group supervisions to share best practice and offer methodological support.¹²² Both SAPI and Pulse described their minimum standards on training, with new Pulse staff members receiving six months of training in the psychodynamic paradigm used by their services, and SAPI staff completing at least 20 hours of training per year.¹²³

4.5 Cooperation within the social service sector

Social workers rated cooperation within the social welfare sector highly, with 62 per cent rating it 'very good' and 33 per cent rating it 'good'. They were also positive about cooperation with their line ministry, with 43 per cent rating it 'very good' and 43 per cent rating it 'good'. In terms of cooperation with other agencies, police authorities were rated the highest (46 per cent 'very good'), followed by educational authorities (38 per cent 'very good'). Generally, interviewees were also positive about cooperation at a local level, for example a CPD social worker in Pernik said:

"...we have established a style of cooperation with each other and we are working on the cases here in the town. This works well for us."

– CPD social worker, Pernik¹²⁴

"I believe that institutions in Vidin Region enjoy good cooperation and strive to find the best solution for each child. We do it all in the name of children."

– Representative from Regional Education Management Authority, Vidin¹²⁵

Other social workers were less positive about working with other agencies. In the survey, cooperation with the judiciary, NGOs and health authorities was rated less well, and the qualitative findings reflect this.

¹²¹ Focus group discussion with CPD and CSC social workers, February 2020, Sofia, Bulgaria

¹²² Focus group discussion with social workers, July 2020, Bregovo; Focus group discussion with social workers, October 2019, Pernik

¹²³ Focus group discussion with NGO representatives, September 2019, Sofia; Focus group discussion with SAPI representative, September 2019, Sofia

¹²⁴ Focus group discussion with social workers, October 2019, Pernik

¹²⁵ Focus group discussion with local government authorities, July 2020, Vidin and Bregovo

“...state institutions should be more flexible and operate more efficiently in cases of children who have suffered violence. At Ruse Municipality, coordination with state institutions is good but it can be improved.”

– Social worker, Ruse¹²⁶

Several social workers mentioned that it can be difficult to get police officers, judges and prosecutors to attend interviews¹²⁷ and cooperate meaningfully with social workers, with one social worker commenting that:

“...most of the difficult work on such cases is shouldered by the [CPD]. The police and the JDPU cooperate with us by providing information... but the bulk of the work is shouldered by us.”

– Social worker, Ruse¹²⁸

In interviews with social workers, cooperation with NGOs was generally said to be good, though this was not held out by the quantitative findings. Only 30 per cent of social workers said cooperation with NGOs was ‘very good’ and 12 per cent said it was ‘poor’. Among all professionals, NGOs were the least likely to receive a ‘very good’ rating. Interviews with NGO staff members suggest that some of the difficulties in cooperating run both ways:

“The challenge is that [government officials] act as if they are doing us a favour by cooperating with us. They do not act as if we are their partners and we have to continually ‘woo’ them.”

– Representative from the Institute for Social Activities and Practices, Sofia¹²⁹

NGO representatives commented that bringing together members of the judiciary, education and health authorities to work together in multidisciplinary teams could also be challenging as professionals sometimes did not have time to participate or did not see the value in participating.¹³⁰

¹²⁶ Focus group discussion with social workers, July 2020, Ruse

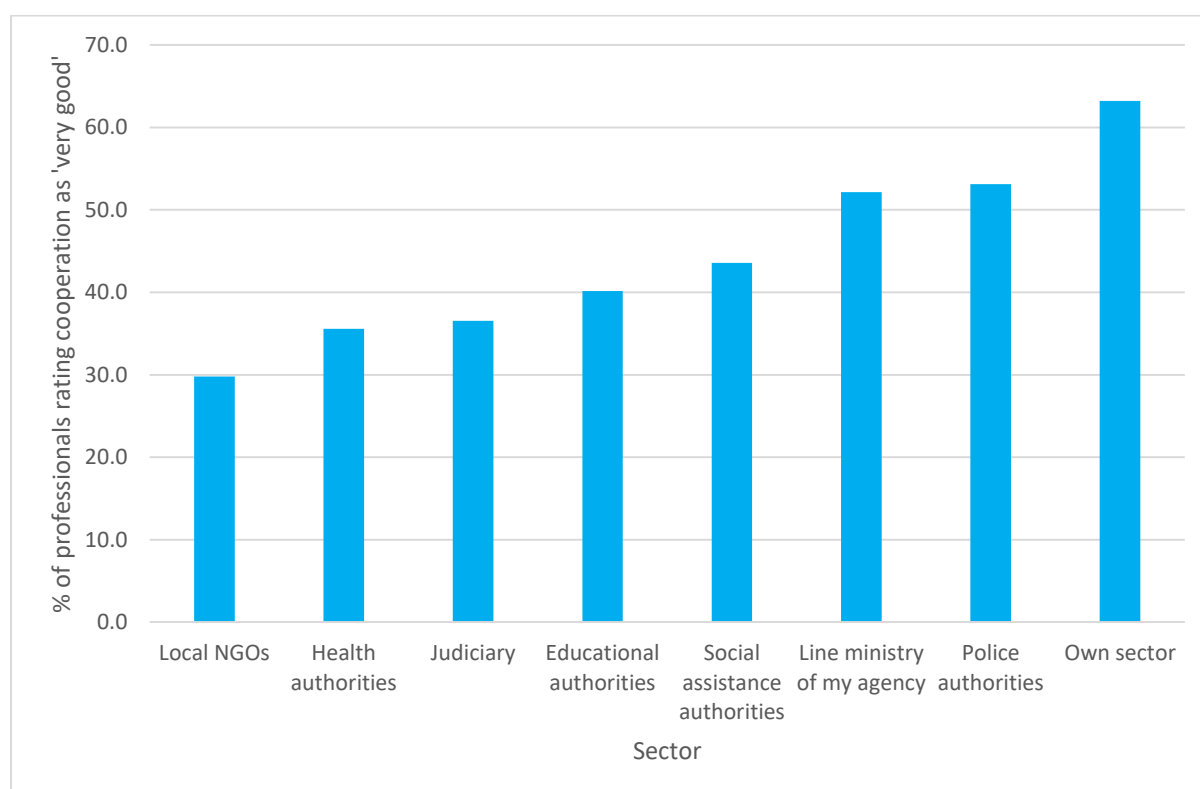
¹²⁷ Focus group discussion with social workers, February 2020, Sofia; Focus group discussion with social workers, July 2020, Dinamika, Ruse; Focus group discussion with social workers, Bregovo

¹²⁸ Focus group discussion with social workers, July 2020, Ruse

¹²⁹ Interview with representative from NGO Institute for Social Activities and Practices, September 2019, Sofia

¹³⁰ Focus group discussion with NGO staff members, September 2019, Sofia

Figure 6 Percentage of professionals who rate cooperation with different agencies as 'very good'



The findings appear to indicate that in smaller municipalities cooperation and coordination work better. This may, of course, be due to a more informal approach, and a greater level of personal relationship between the various professionals. One of the benefits of the multi-disciplinary teams is that professionals generally get to know and learn more about the child protection issues facing their municipality.

4.6 Services for vulnerable groups

When asked about services for vulnerable groups such as children with disabilities, refugee or migrant children and children from ethnic minorities, many professionals stated that they treat all children the same and do not discriminate:

“Social services are provided to all children at risk, they are not divided, for example, into services for children and services for migrant children.”

- Representative of the Agency of Social Assistance, Sofia¹³¹

“If a child approaches us and shares that they have a problem, we will work with them. We avoid labelling children as having a disability, being part of a minority group, being a migrant, etc.”

- Teacher, Vidin¹³²

¹³¹ Interview with representative from the Agency of Social Assistance, July 2019, Sofia

¹³² Focus group discussion with teachers, July 2020, Vidin

However, most professionals did recognise that these groups are at an increased risk of violence. Treating these children in the same manner as others may therefore not be the most effective practice. Indeed, a representative for the National Centre for Public Health and Analysis stated:

“It has been established that the development of specific programmes for vulnerable groups is more efficient than general programmes.”¹³³

Attitudes and approaches to working with specific vulnerable groups are discussed in more detail in the following sections.

Children with disabilities

Children with disabilities were seen to be more vulnerable because they are “less likely to be paid attention to and for someone to reach them”,¹³⁴ as well as being ‘less able to defend themselves’.¹³⁵ Opinion was divided on whether these children face discrimination or not. Many participants stressed the lack of stigma attached to disability, with the SACP representative stating:

“The increase in the number of alerts [of violence against children with disabilities] indicates better awareness and higher sensitivity in society to the problems of children who are in a more vulnerable position on account of disability.”¹³⁶

Others highlighted a lack of tolerance or understanding:

“In most classes the children are not tolerant and children with disabilities can become victims of violence.”

- *Social worker, Pernik*

“In Bulgaria we do not enable people and children with disabilities, we simply pity them.”

- *Journalist, Sofia*

There are some specialist services for children with disabilities or special educational needs. For example, social workers in Ruse referenced daycare centres for children with disabilities, though a social worker commented “Services for special needs children have developed a lot, but not sufficiently yet.”¹³⁷ Animus has a programme for children with mental disabilities and Pulse has a psychiatrist to work with children with disabilities, but otherwise no other services for children with disabilities were mentioned during interviews.¹³⁸

¹³³ Interview with representative from the National Centre for Public Health and Analyses, November 2019, Sofia

¹³⁴ Focus group discussion with social workers, October 2019, Pernik

¹³⁵ Focus group discussion with judges and prosecutors, July 2020, Vidin

¹³⁶ Interview with representative from the State Agency for Child Protection, August 2019, Sofia

¹³⁷ Focus group discussion with social workers, July 2020, Ruse

¹³⁸ Focus group discussion with social workers, February 2020, Sofia; Focus group discussion with NGO representatives, September 2019, Sofia

Roma children

Roma children were frequently cited as being at increased risk of violence, though this view was generally presented without explanation or evidence. Many professionals expressed negative views about parenting practices in Roma communities:

“We have parents from ethnic minorities whose attitude as regards the future of their children is irresponsible... Over the years, I have found the values, attitudes and commitments of these parents as regards their children to be the biggest stumbling block in my work.”

- Municipal education expert, Slivo Pole¹³⁹

Early marriages and sexual abuse were seen to be particular issues within Roma communities:

“We have not been able to convince the Roma community of the danger of early marriages... We talk to the community in an attempt to convince them, people reassure us that they understand our point, we buy children clothing and footwear so that they can attend school, and a few days later we are invited to a wedding.”

- Municipal education expert, Slivo Pole¹⁴⁰

“We are working with Roma children and families... The children witness sexual acts between their mom and dad and then they become sexual abusers – there are 10 people in 2 beds, that’s what the children see.”

- CSC social workers, Pernik¹⁴¹

More effective interventions against early marriage, as well as success with social and behaviour change interventions in the short to medium term are likely to require, in addition, some significant improvement to the economic and living situation of Roma communities.

In Slivo Pole, municipal government representatives did describe various projects aimed at working with the Roma community to address some of the root causes of violence. The municipality had set up an NGO called Roma Capital to celebrate Roma festivities and work to improve living conditions for Roma children, for example providing educational materials and waiving fees for state kindergartens. They also have social and school mediators to work with the community to improve access to social and education services. In other areas of Ruse Province they have health mediators who work to promote vaccination, cancer and TB screening within the Roma communities, though in Slivo Pole there was no longer funding for this initiative.¹⁴²

Migrant or refugee children

In 2019, a total of 731 refugee and migrant children arrived in Bulgaria, of which the majority (521 children) were unaccompanied or separated.¹⁴³ While the number of refugee children arriving in

¹³⁹ Focus group discussion with municipal government representatives, July 2020, Slivo Pole

¹⁴⁰ Focus group discussion with municipal government representatives, July 2020, Slivo Pole

¹⁴¹ Focus group discussion with social workers, October 2019, Pernik

¹⁴² Focus group discussion with municipal government representatives, July 2020, Slivo Pole

¹⁴³ UNHCR, UNICEF and IOM, [‘Refugee and Migrant Children in Europe: Overview of Trends January – December 2019’](#), 2020, accessed 26 October 2020

Bulgaria decreased between 2018 and 2019 (from 891 in 2018), the proportion who were unaccompanied or separated increased from 54 per cent to 72 per cent.¹⁴⁴ The majority of arrivals in Bulgaria were boys (85 per cent). Nearly 140 children, including 33 unaccompanied or separated children, were accommodated in reception facilities in Sofia and southern Bulgaria at the end of 2019. Most of these children originated from Afghanistan, Iraq and the Syrian Arab Republic.¹⁴⁵

The representative for the State Agency for Refugees detailed the procedures and services available for unaccompanied migrant children. There are two Safety Areas, one in the Voenna Rampa migrant accommodation centre and one at the Migrant Reception Centre in Sofia. When a child is brought to the centre a social worker conducts a needs assessment to assess what support the child needs and to develop an individual plan, for example providing medical treatment if needed and enrolling the child in school. A representative must be assigned to an unaccompanied child under Article 25 of the Asylum and Refugees Act and the CPD also assigns a social worker to work with the child. If a child has no relatives and a suitable guardian cannot be identified, the child is placed in residential care, with many children living there until they become adults. The Agency provides Bulgarian language courses and also arranges transport to and from school for all migrant children.

Children who migrate are at high risk of having experienced violence or abuse and the State Agency for Refugees representative described how they work with children to overcome these experiences and adapt to their new life safely:

“We work with them daily to ensure that no harm comes to them during their stay at the centre... We constantly remind them to be careful where they go, whom they communicate with... We try really hard to convince the children that safety is of the utmost importance and we do our best to ensure that they are safe, continually addressing their concerns.”

The representative also raised concerns over the capacity of other institutions to handle cases of refugees and migrants “because sometimes barriers seem to exist, people fear working with this group of people. This appears to be an institutional and social problem.”

While services exist for vulnerable groups of children, there does seem to be limited awareness among professionals of the underlying causes of their vulnerabilities and the best ways to work with these groups. Indeed, many of the professionals interviewed said that they rarely deal with cases involving migrant or refugee children and had little experience of working with migrant children.

4.7 ‘What works’ in the social service sector

Stakeholders were generally positive about the quality of social work with child victims of violence and their families and the work done under the Coordination Mechanism to respond to urgent cases, though some issues with cooperation were also highlighted, as discussed above. Other professionals commented on the commitment of social workers to getting the best outcomes for children and the quality of the psycho-social support given:

¹⁴⁴ UNHCR, UNICEF and IOM, ‘Refugee and Migrant Children in Europe: Overview of Trends January – December 2018’, 2019

¹⁴⁵ UNHCR, UNICEF and IOM, [‘Refugee and Migrant Children in Europe: Overview of Trends January – December 2019’](#), 2020, accessed 26 October 2020

"I have witnessed how invested in the matter all stakeholder institutions are. They always strive to take measures that are in the best interest of the child."

– Prosecutor, Sofia¹⁴⁶

"Social Assistance Directorates and the Animus Association have professionals that are successful at cultivating a bond with children and who try to do the best they can for them"

– Prosecutor, Sofia¹⁴⁷

Several respondents spoke of the importance of a multidisciplinary approach and of taking an individual, tailored approach to each case:

"The benefit [of a multidisciplinary team] comes from the fact that a case of domestic violence cannot be resolved unilaterally, i.e. if only legal or psychological assistance is provided. The overall favourable development of the case requires the coordinated efforts of all specialists – social worker, lawyer, teacher, child psychologist, i.e. they work in sync and in the best interests of the child."

– Animus representative, Sofia¹⁴⁸

Child Advocacy Centres ("Zona ZaKrila") were cited by several respondents as examples of best practice in social work, with hopes that the model could be rolled out across Bulgaria (there are currently three Protection Zones operating in Sofia, Montana and Shumen; see Box 1). NGO services more generally were also frequently said to "offer an excellent standard care",¹⁴⁹ and the expertise of Pulse and Animus in responding to violence against children was widely recognised.

Finally, the importance of working with families to address underlying issues was also highlighted, with most social workers saying that they always try to hold meetings with parents and involve them in discussions to reach a consensus and ensure that the child can remain in or return to the family environment:

"A prerequisite for working with children is to cover the family and the family environment. So, when we are working with a child, we are always working with the parent."

– Animus representative, Sofia

Working with parents was also one of the key challenges identified by social workers and the area in which social workers most wanted further training. Social workers often face a conflict where they are working to build a relationship with the parents, but at the same time have a duty to protect the child. The parent(s) may be in denial about the risk presented to the child by their behaviour or capacity to care for the child, or maybe doing their inadequate best to care for the child, leaving the child at future risk. Taking steps to protect the child may lead to a breakdown of trust in the relationship with the parent.

¹⁴⁶ Focus group discussion with police, prosecutors and judges, June 2020, Sofia

¹⁴⁷ Focus group discussion with police, prosecutors and judges, June 2020, Sofia

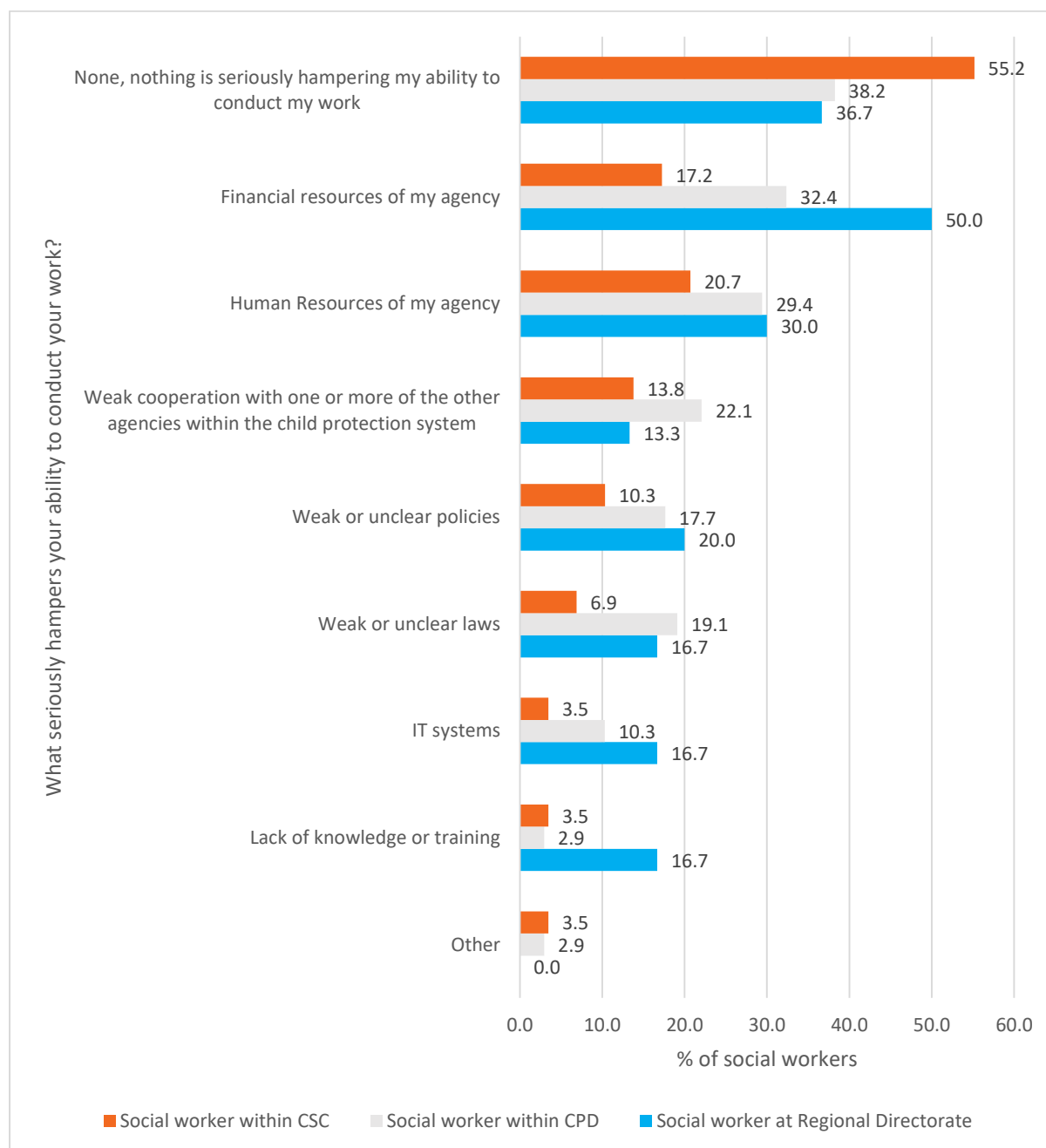
¹⁴⁸ Interview with representative from Animus, September 2019, Sofia

¹⁴⁹ Focus group discussion with UNICEF Country Office staff, August 2019, Sofia

4.8 Key barriers in the social service sector

A majority of social workers did not report any barriers to their ability to conduct their work, with 55 per cent of CSC, 38 per cent of CPD and 37 per cent of SAD social workers giving this response ([Figure 7](#)).

Figure 7 Issues that seriously hamper social workers' ability to conduct their work, by agency



Human resources and financial resources were the top two issues cited by social workers across all three agencies, though SAD social workers were more likely to raise financial issues than CSC or CPD social workers.¹⁵⁰ SAD social workers were also more likely to report lack of knowledge or training as

¹⁵⁰ Pearson $\chi^2(2)=7.1833$, $p=0.028$

a barrier, with 17 per cent raising this compared to only 3 per cent of CPD social workers and 4 per cent of CSC social workers.¹⁵¹

Financial capacity

Financial resources are clearly a challenge, and the lack of financial resources was an issue raised by many social workers, with CPDs having “insufficient funds for salaries, normal working premises and... essential office equipment – computers, photocopying machines, cars and fuel”.¹⁵² Many stakeholders spoke of the need to raise social worker salaries and improve their working conditions in order to address issues of high staff turnover. For example, one CPD social worker in Sofia Province spoke of how they have no toilet and no meeting space.¹⁵³

Human capacity

Some of the issues raised have already been discussed above, including weak cooperation with other agencies and social workers’ workload. It is clear from interviews that there are serious capacity issues in the social service sector, both in terms of there not being enough skilled professionals such as social workers, psychologists, and child psychiatrists, and in terms of the skills and qualifications of existing social workers.

While social workers themselves did not highlight training as a particular barrier in either the survey or interviews, **a lack of skills and qualifications among social service professionals was flagged as an issue by several NGO and government stakeholders. Some suggested the need to implement a minimum educational qualification for social workers and to develop professional standards:**

“...in terms of competence, there is no standard whatsoever for the work of psychologists, social workers, pedagogues in alternative care... Other problems include the lack of a standard and requirements for professional competence, even for a degree.”

- Representative from SAPI, Sofia¹⁵⁴

A further, important, issue was the turnover of social work staff:

“The main issue, in my opinion, is inadequate skills, high staff turnover and the insufficient number of employees of Child Protection Departments.”

- MOI representative, Sofia¹⁵⁵

“Our main findings concern the lack of professionals to work with children in both cases (i.e. psychologists and social workers). This has implications for the quality of the social service provided... The most serious problem in social service provision is the lack of skilled and properly qualified professionals.”

- Ombudsman representative, Sofia¹⁵⁶

¹⁵¹ Pearson $\chi^2(2)=7.1615$, $p=0.028$

¹⁵² Focus group discussion with NGO representatives, September 2019, Sofia

¹⁵³ Focus group discussion with social workers, February 2020, Sofia

¹⁵⁴ Interview with representative from SAPI, September 2019, Sofia

¹⁵⁵ Interview with representative from the Ministry of Interior, October 2019, Sofia

¹⁵⁶ Interview with representative from the Ombudsman, September 2019, Sofia

From social worker interviews, it would appear that there is a ‘vicious circle’. CPDs and other services are understaffed, which leads to individual staff having high workloads, which leads to staff leaving which, in turn, exacerbates the problem of understaffing. The number of staff and services is inadequate to meet demand. For example, one social worker in Sofia spoke of how they often have waiting lists:

“Our capacity is to serve 120 clients but we worked with 260 clients and another 50 are on the waiting list. In my opinion, there should be more CSCs and more crisis centres are needed. The crisis centre has a capacity of 8 people and the MBU has a capacity of 10 people for the entire capital city. This is hugely insufficient.”

- Social worker, Sofia¹⁵⁷

The issue of understaffing is a matter of considerable concern, but also raises a question of whether social workers and the multi-disciplinary teams are using effective targeting measures. With fewer staff than necessary, consideration needs to be given to the threshold of risk leading to a child protection intervention. These may change according to staffing, with a higher threshold of risk in place in some areas before a case is regarded as in need of a child protection intervention. Where there are geographical areas of high deprivation and a heavy case load, the threshold for intervention may need to rise, with social workers prioritising children most at risk for response services and referring prevention and less serious cases to NGOs and other service providers for assistance. **There was little evidence in interviews of effective targeting or consideration of prioritisation.**

Some social workers mentioned the burden of paperwork and bureaucracy as a barrier to providing quality services, and certainly as a contributor to feeling overloaded with work:

“What I find less than effective is paperwork... At times we find ourselves struggling to actually work on a case due to the enormous amount of paperwork associated with it. Such bureaucracy destroys one’s urge to help others.”

- Municipal government representative, Vidin¹⁵⁸

A large volume of paperwork results from the system of oversight which is focused on documentary evidence. Inspections carried out by the State Agency for Child Protection and the Agency for Social Assistance focus primarily on this evidence and administrative deadlines rather than the outcomes for children and families. This incentivises social workers to focus more on compliance with procedures rather than direct face to face time with clients.¹⁵⁹ This is an issue that clearly needs to be addressed. While record keeping is important, social workers need to be freed up to conduct social work rather than sitting in the office filing reports. Better use of innovative information management systems might assist in giving social workers more time for face to face work with clients.

While the understaffing of CPDs and SADs are an issue that can only be addressed by employing more social workers, some of the barriers facing social workers, and especially the issues of workplace stress and retention of social workers may be assisted by looking at management practices. It was noted above that the majority of social workers felt ‘supported’, but few received professional supervision.

¹⁵⁷ Focus group discussion with social workers, February 2020, Sofia

¹⁵⁸ Focus group discussion with municipal government representatives, July 2020, Vidin

¹⁵⁹ Child Protection System analysis

Supervision is important, both as a learning tool for social workers and for ensuring that their work is effective. It cannot be replaced by ‘oversight’. Further professionalisation of the workforce, with skilled, experienced social workers supervising newer, less experienced social workers, is likely to reduce loss of staff. It would also help social workers to prioritise and work more efficiently and effectively. Ensuring that there are adequate supervisors or ‘coaches’ for social workers will require further expenditure but is likely to result in better retention rates, and reduce the costs of training new staff.

Law and policy

In terms of laws and policies, some social workers wanted to make the referral of parents and perpetrators of violence to social services compulsory under the Protection Against Domestic Violence Act. Social workers noted that these services are currently offered on a voluntary basis, which makes it difficult for social workers to work with perpetrators. A number of the interviewees noted that there is no power to enforce coordination between agencies, and that there is a need to pass a new Social Services Act in order to strengthen the regulation of social services in Bulgaria and mandate an integrated and child-friendly approach.¹⁶⁰ Mandatory referral of domestic violence to child protection services (where there are children in the household) may not, however, be an effective use of social work or inter-disciplinary time, especially in light of the fact that child protection services report already facing a demand for services greater than they are able to meet.

It is worth bearing in mind, the more that demand is increased, the more supply there needs to be to meet that demand. At present the social work staff are under pressure of having too many cases. Increasing the number of referrals can only increase that pressure, especially if issues can be resolved by domestic violence services. It would, nevertheless, be in the interests of children for there to be close coordination between domestic violence agencies and child protection services, with referral of cases where children are thought to be at risk, either from having witnessed violence or from suffering violence themselves.

Finally, working with parents and families emerged as one of the biggest challenges facing social workers, particularly working with parents who have perpetrated violence and who do not accept responsibility. Parents may not trust social workers and then refuse to cooperate. Several NGO representatives commented on the negative public attitude towards social services and NGOs working on violence against children, which has led to parents being hostile towards these services. Some stakeholders recounted cases where parents had sued professionals who had reported violence against children for ‘meddling in family affairs’. Domestic violence cases were seen as particularly difficult, as women may be unwilling to press charges against their partner or to leave the family environment, which can put children at risk. These issues are faced by many countries and can be addressed through awareness raising programmes on the impact of violence against children, and a focus on the rights of the child rather than the rights of the parents.

¹⁶⁰ Haarr, R., ‘Evaluation of Child Advocacy Centres supported by UNICEF Bulgaria: Final Report’, May 2020

5 Capacity of the justice system

Key findings

- > Members of the judiciary had good awareness of VAC as an issue and could identify markers of violence, abuse or neglect, though there was a lack of knowledge about online abuse and its incidence.
- > Key messages around VAC prevention were not endorsed by all members of the judiciary, with around 1 in 10 agreeing that smacking or hitting children to discipline them is acceptable and around a quarter agreeing that shouting at them is acceptable.
- > There is a lack of formal procedures relating to child protection and VAC in judicial institutions, with less than half having a focal person for reporting child protection concerns.
- > Only two-thirds of judges and prosecutors reported having received training on VAC. Interviews demonstrate a need for targeted training that is relevant to the day-to-day work of judges and prosecutors and that provides evidence for the benefits of child-friendly justice procedures.
- > While cooperation with police authorities was viewed positively, cooperation with other agencies and through the Coordination Mechanism was more challenging. There is evidence that the use of 'blue rooms' and child-friendly interview techniques receive mixed reviews from members of the judiciary.
- > Overall, there is a need to introduce child friendly measures into the criminal justice process and provide more training for judges and prosecutors on child-friendly practices.

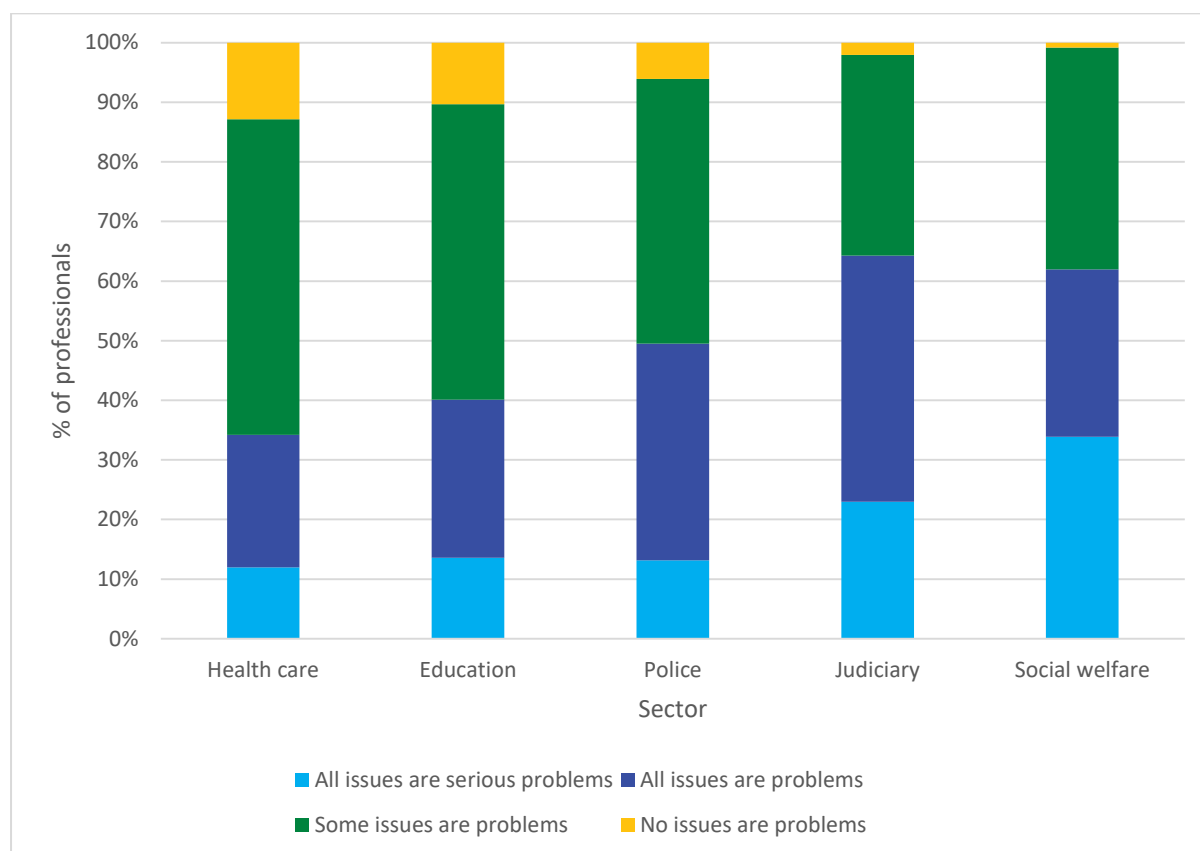
5.1 Awareness and identification of VAC

All but one member of the judiciary could name at least one marker that could be used to identify a child at risk of violence, abuse or neglect. Judges and prosecutors named 6.7 markers on average, the highest number among professionals other than social workers. The three most commonly mentioned markers were flinching or cowering at sudden movement (83 per cent), a change in the child's behaviour (83 per cent), and unexplained bruises, scratches or other marks (82 per cent). The least known markers were the same as for social workers, namely having inappropriate knowledge for their age (31 per cent), acquiring expensive items (28 per cent), and expressing concern about siblings (18 per cent), suggesting that knowledge of markers of less common forms of VAC such as sexual violence and exploitation may be lacking among the judiciary.

Figure 8 demonstrates professionals' views of violence against children as an issue in Bulgaria. Along with social workers, members of the judiciary were the most likely to view all types of VAC as serious problems (23 per cent of judges and prosecutors).¹⁶¹ 60 per cent of judges and prosecutors viewed physical violence as a serious problem, while around 50 per cent viewed online abuse between children, psychological violence, child neglect and bullying as serious. While 46 per cent did rate child sexual abuse as a serious problem, 21 per cent of judges and prosecutors considered it to be an insignificant problem. Online abuse of children by adults was also viewed as a less serious problem, with 13 per cent considering it to be an insignificant problem. This is likely to indicate a lack of knowledge about online abuse and the various platforms on which it is likely to take place.

¹⁶¹ Pearson $\chi^2(12)=74.9679$, $p<0.001$

Figure 8 Percentage of professionals who view different forms of VAC as a problem in Bulgaria, by sector

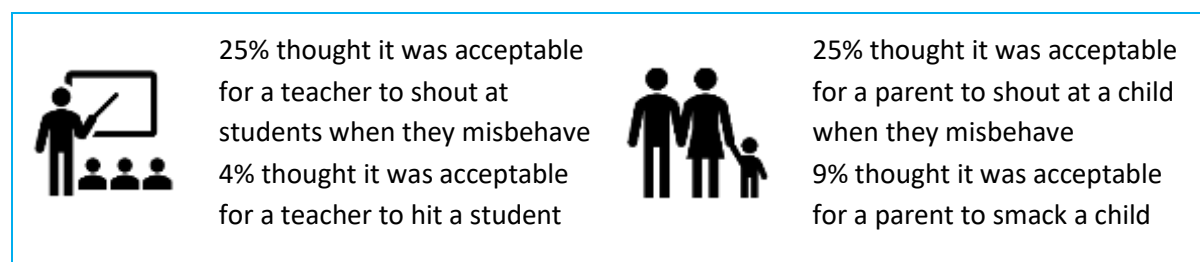


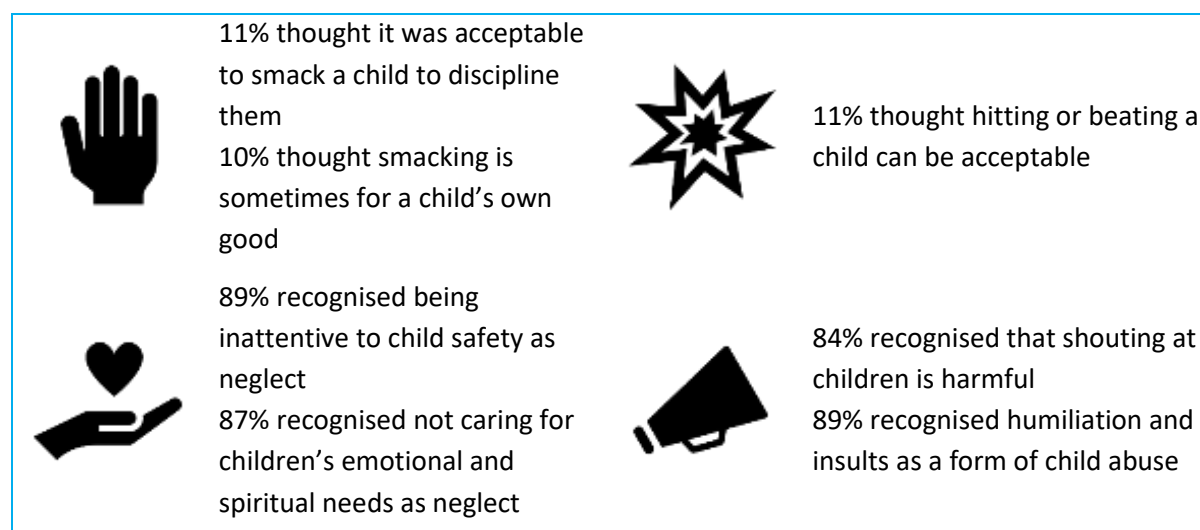
These ratings reflect the most common type of violence encountered by members of the judiciary. The most common was physical violence, which 80 per cent had identified, followed by neglect which had been identified by 66 per cent. Emotional abuse and sexual abuse had been identified by just over half of respondents (57 per cent and 54 per cent respectively) while online abuse was the least common form of violence encountered, with 39 per cent having identified a case.

Acceptability of VAC by judges and prosecutors

Around 1 in 10 members of the judiciary thought smacking or hitting children to discipline them is acceptable and around a quarter thought shouting at them is acceptable (Figure 9). Members of the judiciary were generally less accepting of physical punishment or shouting than health care professionals but more accepting than social workers. Awareness of different forms of neglect was higher among judges and prosecutors than other professionals, and most recognised that humiliation and insults could be a form of child abuse.

Figure 9 Summary of judges and prosecutors' attitudes towards VAC





5.2 Response to VAC cases

Cases involving violence against children are referred into the justice system either through a direct report to the District Prosecutor's Office or through reporting to the police authorities (who refer the case for prosecution). Cases are assigned to a prosecutor who gathers evidence and conducts key witness interviews. In cases referred from the police authorities, a request may be made for further investigation by an investigating officer. Depending on how the case was referred, police authorities and the local Social Assistance Directorate will be notified.¹⁶²

Cases are prosecuted under the Child Protection Act or the Prevention of Domestic Violence Act (PDVA). Under the PDVA, application deadlines are limited to one month following an act being perpetrated.¹⁶³ The Penal Procedure Code provides for some measures to protect child victims and witnesses, including the prevention of contact between the child and the perpetrator, special protection at the pre-trial stage, being interviewed in the presence of a pedagogue or psychologist, and provision for interviewing in a blue room (see Box 1).¹⁶⁴ Where it is judged that the best interests of the child are not in line with those of the parent, the Prosecutor's Office or court will assign a guardian *ad litem*.¹⁶⁵ While Bulgaria does not have specialised family courts, in larger courts and prosecutor's offices there are judges who specialise in hearing family cases and prosecutors who specialise in working on cases involving children.¹⁶⁶

Survey responses

While the majority of the judiciary said they would report different situations involving children at risk of violence, neglect or abuse, there were situations where reporting appears less likely. Bullying and physical violence appear to be taken seriously, with 81 per cent very likely to report bullying, 83 per cent very likely to report a parent who punched a child with their fist and 76 per cent very likely to

¹⁶² Focus group discussion with prosecutors and police officers, June 2020, Sofia; Focus group discussion with prosecutors, July 2020, Vidin; Focus group discussion with judges and prosecutors, July 2020, Vidin

¹⁶³ Focus group discussion with prosecutors and police officers, June 2020, Sofia

¹⁶⁴ Interview with representative from the Ministry of Interior, October 2019, Sofia; Penal Procedure Code, Articles 67, 75 and 140

¹⁶⁵ Focus group discussion with prosecutors and police officers, June 2020, Sofia

¹⁶⁶ Interview with representative from the Supreme Judicial Council, July 2019, Sofia

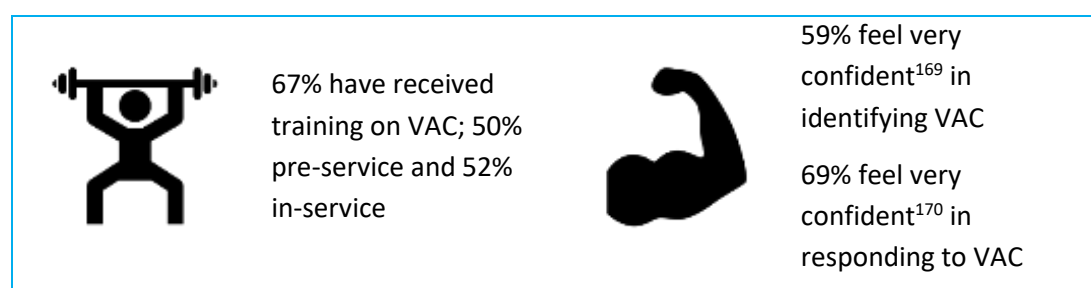
report a case of a child who frequently has large bruises on their body. There appears more uncertainty regarding neglect and self-harm. While overall the vast majority of respondents would report a child who looks skinny, dirty and improperly dressed or whose parent regularly appears drunk and smells of alcohol, around a third were only somewhat likely to report these situations (34 per cent and 35 per cent respectively). Similarly, 53 per cent were very likely to report a young person with cuts up their arm, but 40 per cent said they were only somewhat likely to report this. Smacking and emotional abuse appear even more controversial issues, with a significant minority saying they would not report these behaviours. Twelve per cent would not report a colleague who smacked a child, and 18 per cent would not report a parent. Nearly a fifth (19 per cent) would not report a parent who frequently calls their child stupid and small with an aggressive tone). This is concerning as it suggests that some types of violence and abuse may not be recognised as such by professionals working in the justice system, which could lead to children facing neglect, physical punishment and emotional abuse without any intervention.

During the previous six months, 30 per cent of the judiciary respondents had identified a suspected VAC case and among these respondents, 98 per cent had taken action to respond to the case. The most common action taken was reporting it to a person with responsibilities for the child (58 per cent) or reporting it to social services (44 per cent). Only a third spoke to the child or the parents, a much lower proportion than social workers, police or education professionals.¹⁶⁷

5.3 Training, guidance and institutional policies

While awareness of laws related to child protection is very high, members of the judiciary are less likely to receive training on VAC and judicial institutions are less likely to have appropriate child protection reporting standards and procedures ([Figure 10 Summary of survey responses related to training, guidance and institutional policies among members of the judiciary](#)Figure 10).¹⁶⁸ This appears to be reflected in their slightly lower confidence in identifying and responding to VAC cases. Among judges and prosecutors who had received in-service training, 64 per cent said this was a year or more ago. The majority of the trainings had lasted 1 to 2 days (64 per cent) and were delivered face to face (77 per cent). Training providers included NGOs (29 per cent), the Ministry (29 per cent), and the participants' own agency (25 per cent).

Figure 10 Summary of survey responses related to training, guidance and institutional policies among members of the judiciary

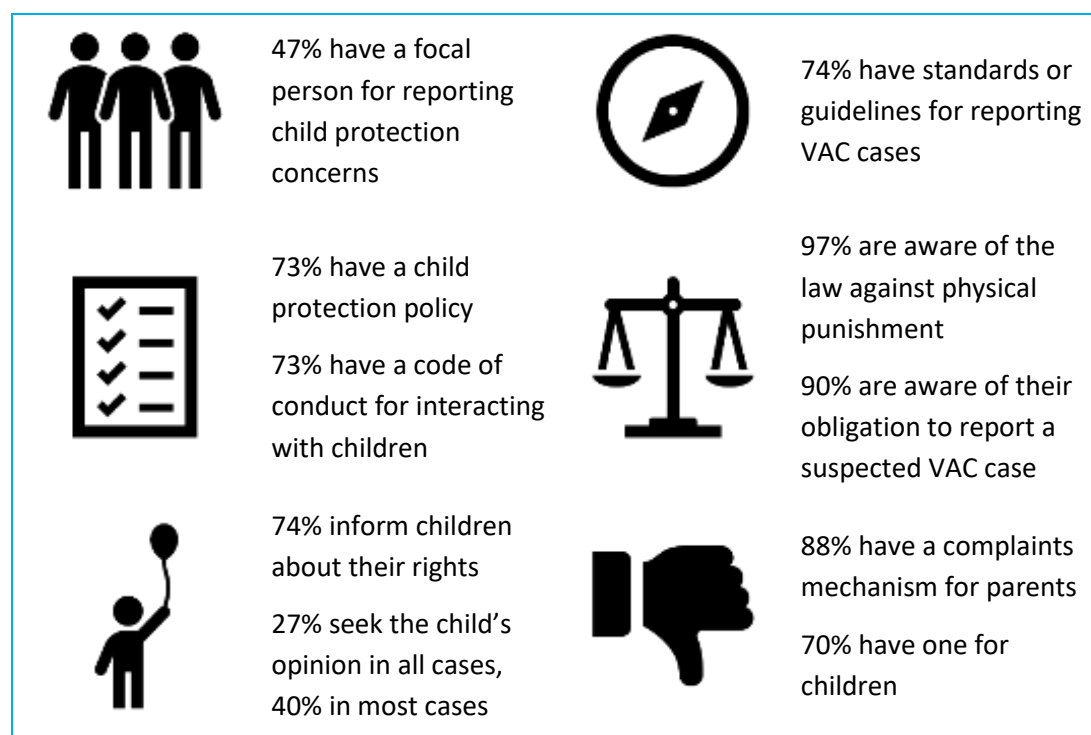


¹⁶⁷ Spoke to parents: Pearson $\chi^2(4)=27.5427$, $p<0.001$; Spoke to child: Pearson $\chi^2(4)=36.7165$, $p<0.001$

¹⁶⁸ Standards or guidelines: Pearson $\chi^2(4)=23.3671$, $p<0.001$; Focal person: Pearson $\chi^2(8)=204.8601$, $p<0.001$

¹⁶⁹ 'Strongly agree' with the statement 'Today, I am confident about my knowledge of how to identify a child at risk of or suffering violence, child abuse or neglect'

¹⁷⁰ 'Strongly agree' with the statement 'Today, I am confident about what to do if suspecting that a child is at risk of or suffering violence, child abuse or neglect'



Training for prosecutors is provided through the National Institute of Justice which delivers a separate module on working with child victims and witness and children in conflict with the law. Junior prosecutors receive training on the prevention of violence during their induction and prevention of violence also features in the ongoing training of judges and prosecutors.¹⁷¹ Prosecutors had mixed feelings about the training they had received. Some were positive about having attended workshops run by NGOs on working with children in conflict with the law, including the use of blue rooms and coordinating with other agencies.¹⁷² Others had not received any training on working with child victims of violence and abuse, or found that the training they had attended was not relevant to their work, with one reporting “My colleagues were outraged at the fact that subjects not relevant to our work were discussed at the workshop.”¹⁷³

5.4 Cooperation with other agencies

As for other professionals, members of the judiciary rated cooperation within their own sector and with their own line ministry highly, with 63 per cent and 53 per cent rating cooperation ‘very good’ respectively. Cooperation with police authorities was rated the highest among other agencies (60 per cent ‘very good’), and police officers rated cooperation with the judiciary very highly (60 per cent ‘very good’), pointing to a mutually productive relationship.

Other professionals do not view collaboration with the judiciary so favourably, with only 27 per cent of health professionals, 30 per cent of social workers and 35 per cent of education professionals rating

¹⁷¹ Interview with representative from Supreme Judicial Council, July 2019, Sofia

¹⁷² Focus group discussion with judges and prosecutors, July 2020, Vidin; Focus group discussion with prosecutors and police officers, June 2020, Sofia

¹⁷³ Focus group discussion with prosecutors, July 2020, Vidin

cooperation as ‘very good’.¹⁷⁴ This is reflected in interviews with social workers who cited difficulties in getting judges and prosecutors to use blue room interviews (see also section [4.53-3.8](#)). Blue rooms appear to be a controversial subject among prosecutors. Some were very positive about cooperation with social services and praised the psychologists who conduct the blue rooms interviews, for example “this sort of interview works very well because psychologists are very well trained”¹⁷⁵ and “a psychologist is always there to rephrase questions, which is of help to us... Blue rooms provide children with an accommodating environment.”¹⁷⁶ Another prosecutor however related a blue room interview they had participated in which they felt the psychologist rephrased their questions unnecessarily:

“...the procedure is very slow and rather tedious because professionals in the social service system try to boast with their knowledge...The lady working in the social service system was trying to rephrase what I wanted to say...and changed my questions quite radically...[This] does not make my colleagues more willing to actively participate in such practices.”¹⁷⁷

- Prosecutor, Vidin

5.5 ‘What works’ in the justice system

As discussed above, generally members of the judiciary recognised the benefits of child-friendly practices such as the use of the blue rooms and the use of less formal proceedings. Stakeholders also emphasised the importance of recognising that children in conflict with the law are often victims as well:

“We perceive child victims of violence, child perpetrators of violence and children in conflict with the law as children at risk who need protection and correction of their behaviour...the child is not to blame for being in any of these categories, the reasons are external to the child”

– MOJ representative, Sofia¹⁷⁸

As with social workers, the need to take an individual approach to each child, gather evidence from multiple perspectives, and tailor the measures to the case were also emphasised. Involving the family was also recognised as important in order to prevent re-offending and to protect child victims from further violence.

5.6 Key barriers in the justice system

While many justice professionals recognised the benefits of child-friendly approaches, the lack of child-friendly courts and procedures remain a barrier. The practice of interviewing a child numerous times during the pre-trial and trial process is seen as a negative process, and one that makes parents reluctant to involve their child in criminal proceedings. Repeated interviewing, especially where the child is a victim of violence or of sexual abuse, forces the child to relive their trauma and may have a

¹⁷⁴ Pearson $\chi^2(12)=36.3531$, $p<0.001$

¹⁷⁵ Focus group discussion with judges and prosecutors, July 2020, Vidin

¹⁷⁶ Focus group discussion with prosecutors and police officers, June 2020, Sofia

¹⁷⁷ Focus group discussion with prosecutors, July 2020, Vidin

¹⁷⁸ Interview with representative from Ministry of Justice, July 2020, Sofia

negative effect on their recovery. One NGO representative shared the experience of a child victim of incest: “I had to repeat this so many times that now I don’t feel like a child anymore.”¹⁷⁹

Consideration should be given to introducing a limit on the number of interviews that may be conducted with children who are the victims or witnesses of crime. Current good practice usually limits an interview to one, or at most two, video recorded interviews, conducted very soon after reporting of the offence. Interviews should, ideally, be conducted in the blue rooms and be video recorded to remove the need for repeated interviewing. Cross examination or questioning by the defence lawyer and judge should, if possible, be conducted soon after the initial interview (after the defendant is charged but before the trial), with the recorded evidence made available at the trial. This allows the child to provide evidence and then to move on with their life, rather than being involved in criminal proceedings for, often, over a year.

Overall, there is a need to introduce child friendly measures into the criminal justice process and provide more training for judges and prosecutors on child-friendly practices.

A further issue cited by several prosecutors and social workers was the negative impact of divorce proceedings on children, and the growing trend of parents making false claims of domestic violence against the other to strengthen their case. Prosecutors highlighted a gap in the PDVA which allows a parent to submit an application to the Court to issue a protection order, which is subsequently used as part of a divorce proceeding. These cases must be taken seriously in case the allegation of violence is true but take up resources for CPDs and prosecutors and can have negative effects on the child involved.

¹⁷⁹ Interview with Animus representative, September 2019, Sofia

6 Capacity of police authorities

Key findings

- > Police officers were the most likely to encounter physical violence, sexual abuse and online abuse compared to other professionals. The majority viewed VAC as a serious issue and had good awareness of the markers of VAC.
- > While awareness of verbal and emotional abuse was very high among police officers, there is evidence that some still view physical punishment as acceptable and may therefore not fully support aims to eliminate VAC.
- > Police authorities have good policies regarding VAC and child protection and 86 per cent of police officers receive training on VAC.
- > Police authorities received good endorsement from other professions for their cooperation and the work of the Children's Pedagogical Room in preventing violence was viewed as effective.

6.1 Awareness and identification of VAC

All police officers could name at least one marker that would indicate a child at risk of violence, abuse or neglect and, on average, police officers mentioned 6.3 markers. The most commonly and least commonly known markers were the same as for social workers and members of the judiciary. Around half of the police officers knew other markers such as seeming hungry, dishevelled or improperly clothed (54 per cent), having problems in relationships with parents (53 per cent), persistent absence from school (51 per cent), deteriorating school performance (49 per cent), and struggling with friendships and socialising (48 per cent).

Police officers generally saw violence against children as a serious issue, with only 6 per cent saying it is not a problem in Bulgaria. Forty-four per cent saw some types of violence as problematic, 36 per cent saw all types of violence as problematic, and 13 per cent saw all types of violence as serious issues. Police officers rated physical violence, neglect and psychological violence as the most serious issues (54 per cent, 50 per cent and 47 per cent respectively rated as serious problems). As with social workers and the judiciary, opinions were more mixed about child sexual abuse, with 35 per cent rating it a serious problem and 25 per cent rating it an insignificant problem. Online abuse of children by adults was rated the least serious problem, with 35 per cent seeing this as an insignificant problem.

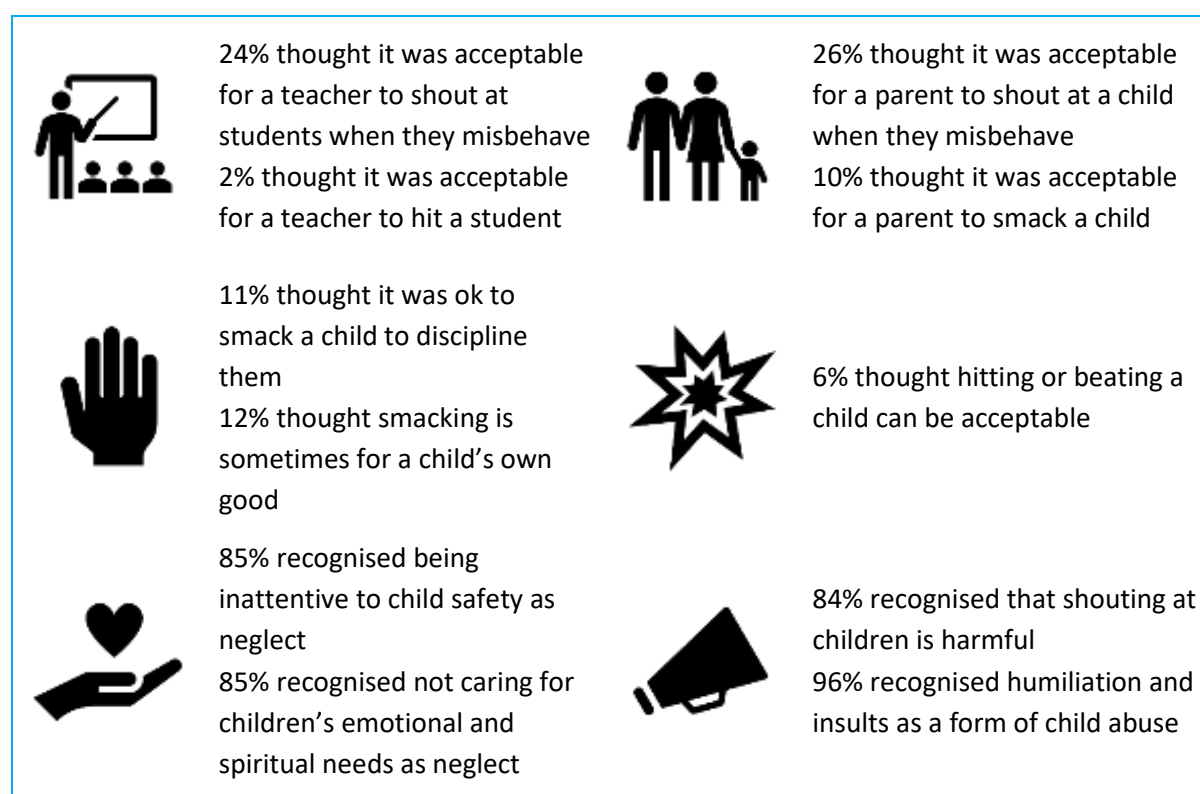
Police officers' perceptions of the severity of issues appears to be shaped by their experiences. Physical violence was very commonly encountered by police officers, identified by 89 per cent of respondents. Emotional and sexual abuse were the second most common types encountered, with 66 per cent and 65 per cent of officers respectively having identified cases. Finally, 62 per cent had identified cases of neglect and 56 per cent had identified online abuse. Compared to other professionals, police officers were the most likely to encounter physical violence, sexual abuse and online abuse.¹⁸⁰

¹⁸⁰ Physical violence: 89% compared to 65% on average, Pearson $\chi^2(4)=102.9845$, $p<0.001$; Sexual abuse: 66% compared to 30% on average, Pearson $\chi^2(4)=248.3144$, $p<0.001$; Online abuse: 56% compared to 31% on average, Pearson $\chi^2(4)=76.4121$, $p<0.001$

6.1.1 Acceptability of VAC by police officers

Smacking was acceptable to around 10 per cent of police officers while shouting at children was acceptable to around 25 per cent (Figure 11). The majority of police officers recognised different forms of neglect and a very high proportion recognised that child abuse can include verbal and emotional abuse, with awareness among police officers being higher than among health or education professionals

Figure 11 Summary of police officers' attitudes towards VAC



6.2 Response to VAC cases

There are a number of police agencies that might be involved in responding to cases of violence against children. In cases where a child is the perpetrator of violence, the Children's Pedagogical Room might be involved to work with the child to address the offending behaviour. The Local Commissions for Combatting Juvenile Delinquency (LCCJD) are also tasked with organising prevention activities targeted at children needing help and they work with the Children's Pedagogical Room and the Social Assistance Directorate to organise these.¹⁸¹ Cases of sexual violence are under the jurisdiction of the criminal police and the Children's Pedagogical Room while domestic violence cases are handled by the patrol units of the security police and by inspectors working at local police stations and inspectors working at Children's Pedagogical Rooms.

All municipalities are covered by inspectors working in Children's Pedagogical Rooms, with the aim of preventing anti-social behaviour and crimes committed by minors and working with those who have committed offences to avoid re-offending. With regards to VAC, Child Pedagogical Officers identify

¹⁸¹ Focus group discussion with municipal government representatives, July 2020, Bregovo

young people who are at risk of neglect or abuse and refer them to services that can provide support and treatment if necessary, as well as notifying the prosecution, court or other relevant authorities when they find evidence of neglect or abuse in the cases of children in conflict with the law.¹⁸² Child Pedagogical Officers must sit on multidisciplinary teams under the Coordination Mechanism.

Survey responses

Police officers stated that they were very likely to report various situations involving children at risk of violence, abuse or neglect, though as with members of the judiciary, they were less sure of situations involving neglect, self-harm, smacking, and emotional abuse. Over 80 per cent were very likely to report a parent punching a child, a child with large bruises on their body, a child who is being bullied, and a colleague who smacks a child, indicating these situations are generally taken very seriously. Around two-thirds are very likely to report a parent smacking their child, a child who looks neglected, a parent who regularly appears drunk, and a young person who appears to be self-harming, with a further third who are somewhat likely. These situations therefore appear to be viewed as serious but may not always be reported. Very few police officers said they would not report any of these situations, with the exceptions being a parent smacking their child (8 per cent would not report) and a parent being verbally abusive towards their child (13 per cent would not report). In the case of emotional abuse, only 41 per cent said they were very likely to report this, suggesting that emotional abuse is not viewed as seriously as other forms of violence.

Just over half (52 per cent) of police officers surveyed had identified a child at risk of violence, abuse or neglect in the past six months. This varied by police officer role, with district investigative officers being the least likely to have identified a VAC case (32 per cent) and district pedagogical officers being the most likely (76 per cent).¹⁸³ All police officers who identified a case of VAC had taken action, with 75 per cent having spoken to the child, 73 per cent having spoken to the parents, 71 per cent having spoken to someone with responsibilities for the child, 60 per cent having reported the case to social services, 23 per cent having reported it to health services, and 17 per cent to other police services. Police officers were among the professionals most likely to speak to those involved in the case, including the child.¹⁸⁴

6.3 Training, guidance and institutional policies

Police officers showed high confidence in identifying and responding to VAC and police institutions appear to have good policies around reporting VAC, protecting children and promoting their rights (Figure 12).

Police officers were among the professionals most likely to have received training on violence against children, child abuse or neglect.¹⁸⁵ Just over two-thirds (71 per cent) of police officers had received pre-service training in violence against children, child abuse or neglect and around three-quarters (78 per cent) of police officers had undertaken in-service training. Among these officers, 47 per cent had been trained within the past year. Trainings had generally lasted either 1 to 2 days (42 per cent) or 3 to 5 days (33 per cent) and were mainly delivered face to face (85 per cent). The majority of trainings

¹⁸² Personal communication, UNICEF Bulgaria Country Office, September 2020, Sofia, Bulgaria

¹⁸³ Pearson $\chi^2(3)=17.5410$, $p=0.001$

¹⁸⁴ Spoke to the child: 75% compared to 53% on average, Pearson $\chi^2(4)=36.7165$, $p<0.001$; Spoke to the parents: 73% compared to 56% on average, Pearson $\chi^2(4)=27.5427$, $p<0.001$; Spoke to someone with responsibilities for the child: 71% compared to 56% on average, Pearson $\chi^2(4)=19.4086$, $p=0.001$

¹⁸⁵ Pearson $\chi^2(4)=70.6997$, $p<0.001$

were provided by the Ministry (56 per cent) or their own agency, which could include trainings by the Regional Directorates of the MOI (18 per cent).

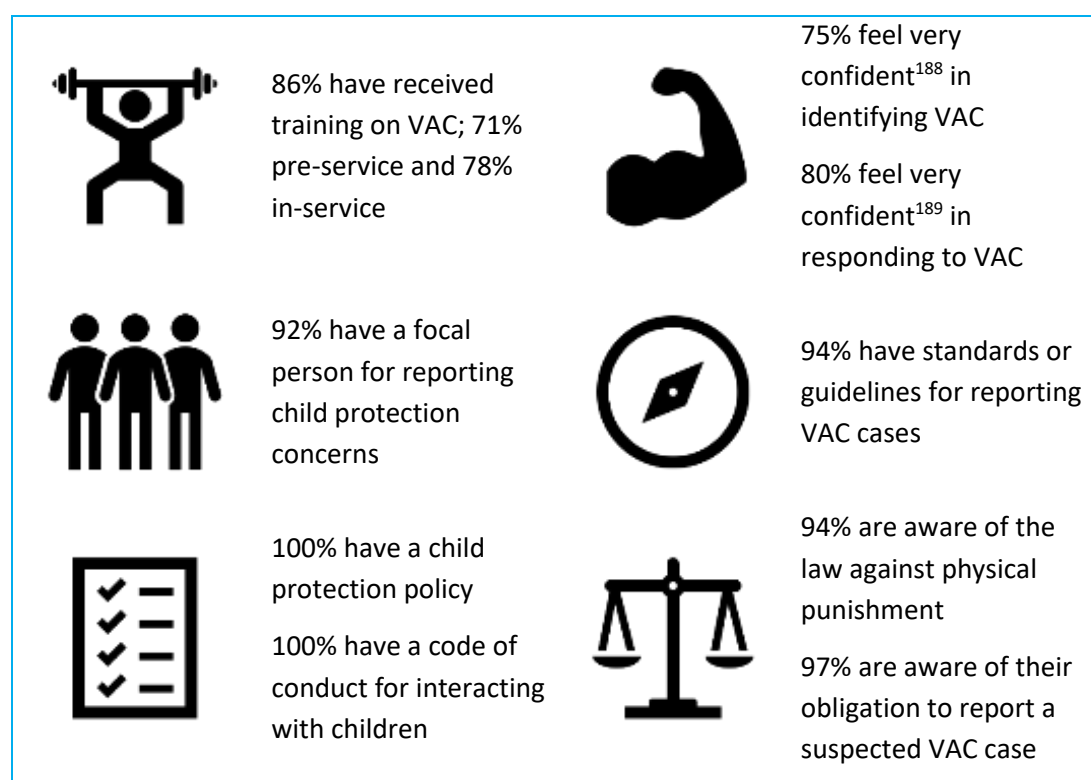
The representative from the MOI elaborated on police officer training in VAC:

“There is a specialist training course, which newly appointed officers must attend prior to taking their regular duties. Subsequently, at the Academy of the Ministry of Interior, they receive continuous training on working with child victims of violence and the legal framework in this area. The training courses are intended for both inspectors from the children’s pedagogical rooms but also for investigators working with children.”

- Representative from the MOI, Sofia¹⁸⁶

Both the MOI and the Central Commission for Combatting Juvenile Delinquency also organise workshops and training events to discuss new practices in dealing with aggression and violence in order to build capacity in the police force.¹⁸⁷

Figure 12 Summary of police officers' survey responses around training, guidance and institutional policies

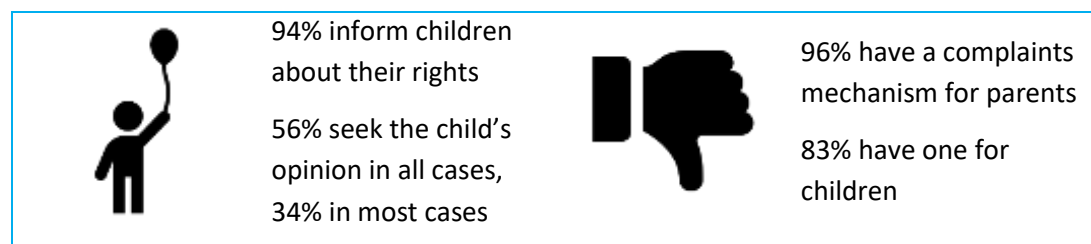


¹⁸⁶ Interview with representative from the Ministry of Interior, October 2019, Sofia

¹⁸⁷ Interview with representative from the Ministry of Interior, October 2019, Sofia; Interview with municipal government representatives, July 2020, Bregovo

¹⁸⁸ ‘Strongly agree’ with the statement ‘Today, I am confident about my knowledge of how to identify a child at risk of or suffering violence, child abuse or neglect’

¹⁸⁹ ‘Strongly agree’ with the statement ‘Today, I am confident about what to do if suspecting that a child is at risk of or suffering violence, child abuse or neglect’



6.4 Cooperation with other agencies

Police officers rated cooperation with their line ministry and within their own sector very highly (71 per cent and 65 per cent respectively 'very good'). Police officers also rated cooperation with other agencies fairly highly, with 60 per cent saying cooperation with the judiciary, 57 per cent saying cooperation with social assistance authorities and 55 per cent saying cooperation with education authorities was 'very good'. Cooperation with health authorities and NGOs was seen as less good, with 26 per cent saying it was only fair or poor.

Cooperation with police authorities was rated very highly by all other professionals, with only 9 per cent rating it fair or poor, and 53 per cent rating it very good. In qualitative interviews professionals were also generally positive about cooperation with police authorities. The only criticism made was by an NGO representative, who said it is difficult to coordinate with the police because of the handling of different cases by separate units.¹⁹⁰

6.5 Prevention activities

Police authorities undertake a variety of activities aimed at preventing juvenile crime and violence. Programmes to raise awareness of the work of the police service and particularly the children's police department are run in schools throughout the year culminating in competitions for schoolchildren to showcase their knowledge. The Ministry of Interior also runs a website on child safety which has parenting guidance and tips and materials for working with children.¹⁹¹ The Central and Local Commissions on Combatting Juvenile Delinquency also run prevention activities, consulting children at risk and their parents, providing support to child victims of crime and organising talks in schools.¹⁹²

¹⁹⁰ Interview with representative from Animus, September 2019, Sofia

¹⁹¹ Interview with representative from Ministry of Interior, October 2019, Sofia

¹⁹² Interview with representative from the Bulgarian Prosecution Service, October 2019, Sofia

7 Capacity of the education sector

Key findings

- > Education professionals were least able to identify markers of VAC and generally viewed VAC, particularly sexual abuse of children, as a less serious issue than other professionals.
- > Emotional abuse and bullying were the most common forms of violence encountered by teachers, with cyberbullying also highlighted as a growing issue.
- > While the majority of educational professionals viewed physical punishment as unacceptable, around one in six thought smacking children is an acceptable form of discipline, indicating a need for greater awareness of the negative consequences of physical punishment and greater support for teachers to model positive discipline measures and to communicate these to parents.
- > The majority of education institutions have policies and procedures regarding child protection and VAC reporting, but reporting of VAC cases by educational professionals is low, possibly due to teachers' reluctance to 'interfere' in family matters.
- > The implementation of Mechanism for Counteracting Bullying and Violence in Schools appears to vary from school to school, with some teachers not being aware of their school's policies regarding bullying. All schools should involve students in developing their guidelines and should empower them to report bullying and ensure that reports are acted upon.

7.1 Awareness and identification of VAC

All education professionals were able to name at least one way to identify a child at risk of violence, abuse or neglect. In interviews, education professionals were also positive about teachers' ability to identify violence: "99% of teachers can do this. I can only think of one teacher who is not capable of identifying a child suffering violence. He is male and is a peculiar bloke."

– School counsellor, Vidin, July 2020

Education professionals mentioned the fewest markers on average (4.6) suggesting that their ability to identify VAC may be lower than that of other professionals. Education professionals most commonly mentioned a change in the child's behaviour (78 per cent), unexplained bruises, scratches or other marks (51 per cent), struggling with peer friendships and socialising (44 per cent), and school performance deteriorating (41 per cent). Only around a third mentioned markers such as reluctance to go home (30 per cent), problems in relationships with parents or adults (32 per cent), and persistent absence from school (34 per cent), despite these being markers that would be encountered in a school setting.

Education professionals were among the least likely (with the exception of health professionals) to view VAC as a serious problem in Bulgaria.¹⁹³ Neglect was seen as the most problematic issue, with 42 per cent seeing it as a serious problem. Perhaps reflecting the types of violence that teachers encounter, bullying and online abuse between children were also seen as serious problems by 41 per cent and 37 per cent respectively. Physical and emotional violence were seen as problems but not as

¹⁹³ Pearson $\chi^2(12)=74.9679$, $p<0.001$

serious as other types of violence. Education professionals also had lower awareness of child sexual abuse as an issue, with only half seeing child sexual abuse as problematic, compared to around three-quarters of social workers, police officers, and members of the judiciary.



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In interviews, professionals stated that verbal and emotional abuse or bullying were the most commonly seen at their schools, with physical violence being much less common. Cyberbullying was also reported to be an issue.¹⁹⁴ The survey results broadly supported these findings, though neglect was the most common form of VAC that education professionals had encountered, with 59 per cent having ever identified a case. Emotional abuse was the second most common form encountered (56 per cent) and around half of education professionals had identified incidents of physical violence or bullying, while 28 per cent had identified a case of online abuse. Education professionals were much less likely than other professionals (with the exception of health professionals) to have identified a case of sexual abuse, with only 5 per cent having encountered a case during their career.¹⁹⁵

Education professionals' lower awareness of VAC and the markers of VAC may be linked to the relative infrequency with which they encounter the more serious forms of VAC. Identifying and responding to VAC also does not form a key part of their role as it may do for professionals, such as social workers and police officers. However, education professionals have an important role in the early identification of VAC and it is thus vital that they have good awareness of and confidence in, identifying and responding to suspected VAC cases.

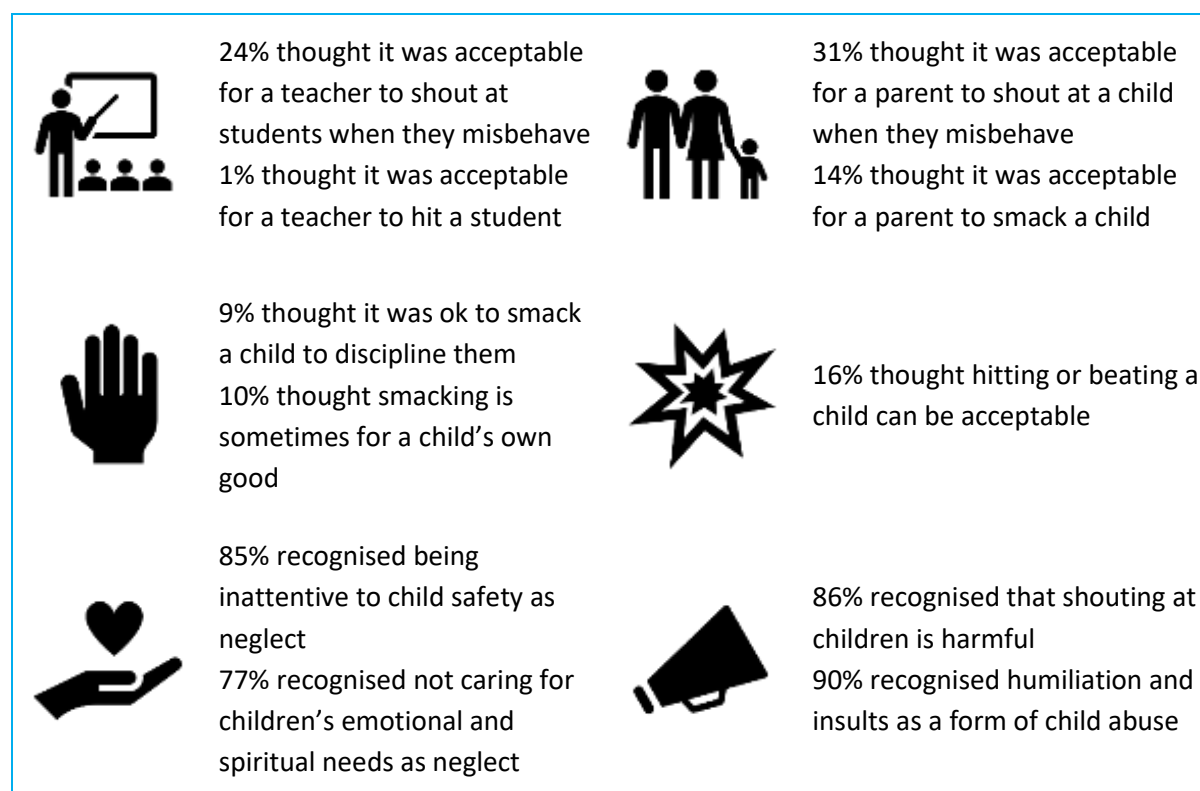
¹⁹⁴ Focus group discussion with school counsellors, July 2020, Vidin; Focus group discussion with teachers, July 2020, Vidin

¹⁹⁵ 5% compared to 30% on average, Pearson $\chi^2(4)=248.3144$, $p<0.001$

7.1.1 Acceptability of VAC by education professionals

While still a minority view, there were quite a few education professionals who saw smacking children and shouting at children as acceptable forms of punishment, particularly by parents (Figure 13). Education professionals' views were similar to those of other professionals, being generally less accepting of physical punishment than health professionals but more accepting than social workers and police officers. Awareness of different forms of neglect and child abuse was high, though 17 per cent did not consider that not caring for children's emotional and spiritual needs was neglect.

Figure 13 Summary of education professionals' attitudes towards VAC



7.2 Response to VAC

At a regional level, the Regional Education Management Authority receives reports from schools, kindergartens and parents on alleged violence and coordinates a response and may provide specific assistance such as child psychologists. The Regional Education Management Authority will forward cases to the Ministry of Education and Science, notify the police and the Social Assistance Directorate, and will follow up with the school to ensure that the case is investigated.¹⁹⁶ The Regional Education Management Authority also conducts inspections of schools,¹⁹⁷ identifies children who might be at risk of violence, abuse or neglect and monitors them to ensure that they don't drop out of school or kindergarten. The Regional Education Management Authority may also provide guidance to schools and kindergartens on dealing with cases of VAC.¹⁹⁸

¹⁹⁶ Focus group discussion with municipal government representatives, July 2020, Bregovo

¹⁹⁷ Focus group discussion with municipal government and NGO representatives, October 2019, Pernik

¹⁹⁸ Focus group discussion with municipal government representatives, July 2020, Bregovo

At a school level, schools have an obligation to report cases of violence, abuse or neglect to the Child Protection Department (CPD). Schools send a referral to the CPD in writing and also have a discussion with the parents, the principal and the school counsellor.¹⁹⁹ The Mechanism for Counteracting Bullying and Violence in Schools sets out recommended actions in response to different levels of violence and bullying. At the first level (one-off incidents or less serious violence), teachers should gather information about the incident, notify the parents, consult with the students concerned and mediate to find a mutually agreeable solution. At the second level (repeated incidents amounting to bullying and more serious violence), the teacher should report the case to the Coordination Council who may send a report to the CPD (teachers can also report incidents directly to the CPD). At the third and most serious level (systematic severe abuse with possible threat to life or health), the CPD and/or police should be notified and the Coordination Council should notify and coordinate with any other services or organisations involved in working with the child or children in question.²⁰⁰

Some schools have school counsellors whose main role is to work with children with behavioural problems or special educational needs, and who also work with children and parents in cases of violence.²⁰¹ Students can also come to the school counsellor for advice or support, and school counsellors may work with a whole class or grade group if there are wider behavioural problems or bullying. Some schools may also have a pedagogical counsellor whose role is more focused on liaison with social services. Counsellors play an instrumental role in early identification of problems either at school or at home and can therefore help to prevent more serious cases of violence, abuse or neglect from developing.²⁰² They may also act as mediators in cases of conflict between students.²⁰³

Survey responses

Education professionals are generally less likely than other professionals (with the exception of health professionals) to say that they would definitely report situations involving children at risk of violence, abuse or neglect. This may reflect their lower levels of awareness of VAC and may indicate a lack of confidence in identifying and responding to VAC cases. As with other professionals, bullying and physical violence are the most likely situations to be reported, with 81 per cent being very likely to report a child who frequently has large bruises, 77 per cent to report a child being bullied, and 77 per cent to report a parent who punches their child. Around 60 per cent would report a parent or colleague who smacked a child, suggesting greater tolerance of physical punishment. Around two-thirds say they are very likely to report a young person who appears to be self-harming. Education professionals appear less certain about the reporting of neglect and emotional abuse. Less than half would be very likely to report a child who appears to be neglected, while only 39 per cent would be very likely to report a parent who is regularly verbally abusive towards their child.

Only 17 per cent of education professionals had identified a child at risk of violence, abuse or neglect during the past six months. Principals (23 per cent) and school psychologists (23 per cent) were slightly more likely to have identified a VAC case than teachers, with just 7 per cent of kindergarten teachers having identified a VAC case in recent months. Most education professionals had spoken to the parents (72 per cent), the child (71 per cent) or someone else with responsibility for the child (66 per

¹⁹⁹ Focus group discussion with teachers, July 2020, Slivo Pole

²⁰⁰ Ministry of Education and Science, 'Mechanism for Counteracting Bullying and Violence in the Institutions of the Preschool and School Education System: Annex 1', 2012, last amended 2017, pp.18 – 21

²⁰¹ Interview with representative from MOES, October 2019, Sofia

²⁰² Focus group discussion with teachers, July 2020, Slivo Pole

²⁰³ Focus group discussion with teachers, July 2020, Vidin

cent). Just under half (43 per cent) had reported the case to social services, but very few had made a referral to the police (16 per cent) or health services (2 per cent).

Prevention of and response to bullying

Several teachers reported that bullying is an issue in their school, and in the survey 49 per cent of teachers said they had dealt with a case of bullying. Bullying is reported to primarily involve verbal abuse or 'stonewalling' (ignoring another student):

"Children have come forward and reported cases of verbal abuse related to their appearance and figure or having to do with expensive clothes, shoes and perfumes. This is registered on an almost daily basis."

– Teacher, Slivo Pole²⁰⁴

Incidents of violence and bullying were reported to take place in areas where teachers are not on duty and where there aren't security cameras, such as bathrooms, locker rooms and canteens.²⁰⁵

Under the Mechanism for Counteracting Bullying and Violence in Schools, schools should develop their own policy and an annual action plan on the prevention of and response to bullying and violence.²⁰⁶ However this appears to be interpreted in different ways by different schools, with some teachers interviewed being unaware of the Mechanism or of their school's own policies around bullying and violence. Teachers and school counsellors in Vidin and Slivo Pole did describe how their policy outlines a 'code of conduct' for students which is signed at the beginning of the school year by teachers, students and parents, as well as guidelines on how to report a case of bullying. Teachers refer cases of bullying to the school counsellor who can provide support to the child. In serious cases, the school counsellor will inform the principal and the child's parents.²⁰⁷

However, teachers in Sofia were sceptical about the Mechanism for Counteracting Bullying and Violence in Schools, saying that while most schools have these policies, they may not necessarily be used or useful:

"Each school has a mechanism to counter bullying and violence against children but such mechanisms merely exist without being applied. We have reported cases but institutions have not been cooperative, which has resulted in our motivation plummeting."

– Teacher, Sofia²⁰⁸

"Here is where a practical question comes in, namely is this tool [Mechanism for Counteracting Bullying and Violence in Schools] used? Indeed, are fellow professionals familiar with the procedure outlined here? Each school has a procedure of this sort but is it actually used?"

– Teacher, Sofia²⁰⁹

²⁰⁴ Focus group discussion with teachers, July 2020, Slivo Pole

²⁰⁵ Focus group discussion with teachers, July 2020, Slivo Pole

²⁰⁶ Ministry of Education and Science, 'Mechanism for Counteracting Bullying and Violence in the Institutions of the Preschool and School Education System', 2012, last amended 2017

²⁰⁷ Focus group discussion with school counsellors, July 2020, Vidin; Focus group discussion with teachers, July 2020, Slivo Pole

²⁰⁸ Focus group discussion with teachers, June 2020, Sofia

²⁰⁹ Focus group discussion with teachers, June 2020, Sofia

“They all sound good on paper but in practice do nothing to help children.”

– Teacher, Sofia²¹⁰

In terms of reporting bullying, some barriers were mentioned by education professionals. Children often prefer to confide in their friends and so may not report bullying, so a challenge for school counsellors is to encourage them to come forward if there are issues:

“Friends are the first port of call... We try to educate children, explaining that they should report cases to their teachers, the teacher on duty or to us so that we may inform parents if necessary and that they are free to confide in their parents when they are at home. We try to show them that we should be their port of call.”

– School counsellor, Vidin [emphasis in original]

Many respondents emphasised the importance of responding to cases of violence or bullying, with children being unlikely to report bullying if they think no action will be taken:

“Teacher 1: Sometimes bullying will be left unreported.

Teacher 2: Children do not report bullying because they know that there is nothing their teachers can do.

Teacher 3: Trust is paramount here, i.e. a child will only confide in their teacher if they trust them”

- Teachers, Sofia

School counsellors felt that children were more likely to confide in younger teachers or school counsellors, because they trust them more and know that their report will remain confidential.²¹¹ A teacher in Slivo Pole spoke of how they create a welcoming environment in their office for children to help them feel more confident, and how they use drawing to allow them to express their emotions rather than requiring them to voice their concerns.²¹² Another teacher in Sofia said they set up a ‘feedback box’ for some grades to allow students to share reports of violence anonymously, and that this had highlighted an issue with a particular year group.²¹³ This approach can identify groups of students where prevention activities could be targeted.

Some schools also have activities aimed at preventing bullying. In Slivo Pole and Vidin, school counsellors run dedicated civic education classes dealing with topics such as bullying, violence, drugs and safe behaviour.²¹⁴ In addition, NGOs such as Animus run programmes on mental health promotion and bullying prevention, training teachers to apply the approach in their own classes, and Child Advocacy Centres (“Zona ZaKrila”) run outreach activities with local schools aimed at reducing bullying and violence.²¹⁵ Some counsellors also spoke of the benefits of creating a positive school culture in

²¹⁰ Focus group discussion with teachers, June 2020, Sofia

²¹¹ Focus group discussion with school counsellors, July 2020, Vidin

²¹² Focus group discussion with teachers, July 2020, Slivo Pole

²¹³ Focus group discussion with teachers and doctors, June 2020, Sofia

²¹⁴ Focus group discussion with school counsellors, July 2020, Vidin; Focus group discussion with teachers, July 2020, Slivo Pole

²¹⁵ Interview with representative from Animus, September 2019, Sofia; see also Box 1 on Protection Zones

which students feel a sense of belonging and community. A promising approach to reducing bullying at a whole-school level is Zippy's Friends, described in further detail in Box 2.

Box 2: Case study of Zippy's Friends

Zippy's Friends is a whole-school bullying prevention programme with separate activities for different age groups. It has been piloted in three schools, two in Sofia and one in Aitos. The pilot began in 2016/17.

Beneficiaries: 1st, 2nd, 5th, 8th and 10th grade students

Programme: Zippy's Friends (ages 5 to 7) and Apple's Friends (ages 7 to 9) focus on building resilience, helping children to verbalise their feelings, and supporting them to identify, reflect on and improve their coping strategies in difficult situations. Through better self-control, understanding and recognition of emotions, and effective coping and conflict-resolution strategies, the programme aims to reduce behavioural problems, aggression and bullying. The overall goal is to build a school environment that is tolerant, supportive and inclusive and which fosters positive staff and student wellbeing.²¹⁶ Both Zippy's Friends and Apple's Friends are delivered through 24 sessions lasting 45 minutes each. Sessions are delivered by teachers who have received training in programme delivery. There are six modules in both of the programmes, covering feelings, communication, friendship, conflict, change and loss, and moving forward. Children develop their own positive strategies to deal with problems through engaging activities: listening to stories, discussion, games, role-play and drawing. There are also Home Activities to reinforce learning at home with parents or carers.²¹⁷ The Fear-Free Class programme (ages 10 to 17) is a communication programme for older children focusing on gender roles, non-violent relationships and mental health promotion.²¹⁸

Evaluation: Zippy's Friends and Apple's Friends have been robustly evaluated in several countries and endorsed by several organisations including the World Health Organisation, the Early Intervention Foundation, the European Portal for Investing in Children, and the European Commission for Good Practices in Mental Health and Wellbeing. The Early Intervention Foundation rates Zippy's Friends as providing preliminary evidence of positive outcomes for children. The highest-quality research studies demonstrate positive effects on children's emotional literacy, self-regulated learning, and academic skills, and a reduction in bullying at the class level based on teacher reports.²¹⁹

The pilot study in Bulgaria has had two evaluation reports so far, one on Zippy's Friends²²⁰ and one on Apple's Friends.²²¹ The evaluations use subjective measures and have a limited comparison group, meaning the results from these evaluations should be interpreted cautiously. However, the studies did find that children and teachers were enthusiastic about the programmes and enjoyed the lessons, and that teachers were positive about delivering the lessons and found them to be effective. The

²¹⁶ Animus Foundation, 'Key to a Fear Free School', Grant Application Form, 2013

²¹⁷ <https://www.partnershipforchildren.org.uk/what-we-do/programmes-for-schools/zippys-friends.html>

²¹⁸ Animus Foundation, 'Key to a Fear Free School', Grant Application Form, 2013

²¹⁹ <https://guidebook.eif.org.uk/programme/zippys-friends>

²²⁰ Bojinova, R., Stefanova-Bakracheva, M., Totkova, Z. & Alexandrova-Karamanova, A., 'Evaluation Report on Zippy's Friends Program in Bulgaria', Institute for Population and Human Studies, Bulgarian Academy of Sciences, Sofia, Bulgaria, 2017

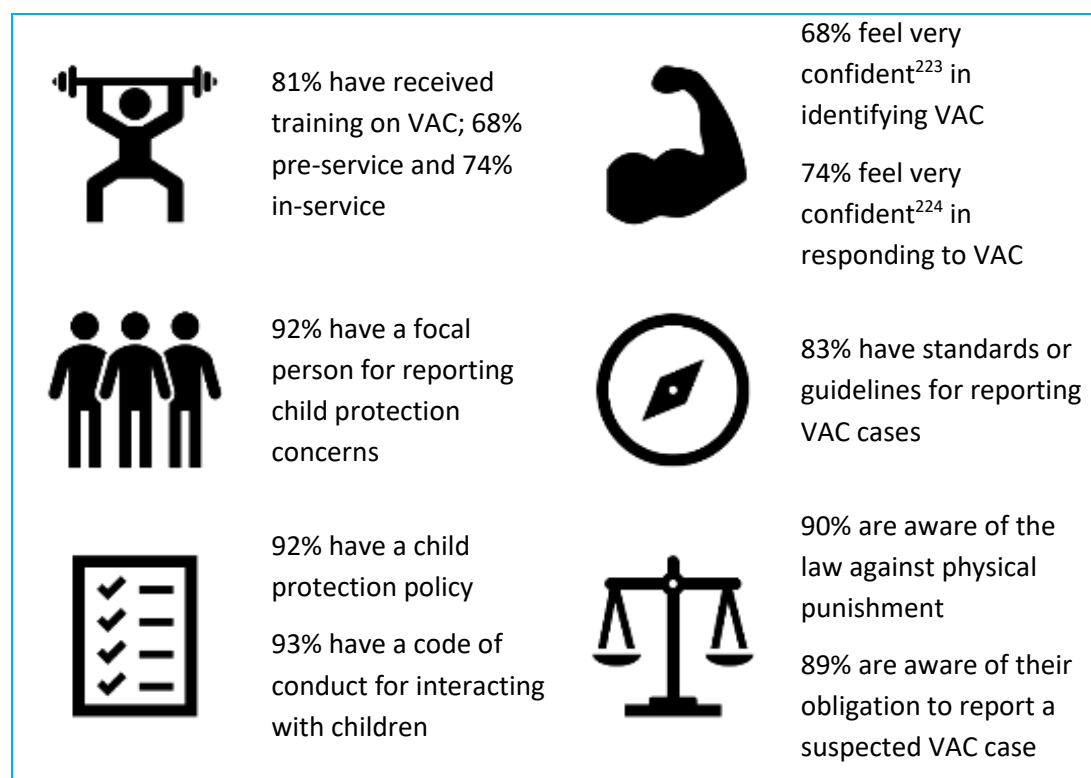
²²¹ Bojinova, R., Bakracheva, M. & Popova, K., 'Evaluation Report on Apple's Friends Program in Bulgaria', Institute for Population and Human Studies, Bulgarian Academy of Sciences, Sofia, Bulgaria, 2018

evaluations suggest improvements in children's communication skills, ability to empathise with others, and ability to recognise and reflect on different emotions. Psychologists and school principals commented on the improvement in children's communication skills and perceived the class environment to be calmer and more positive as a result of the programmes. Parents reported that children were more positive at the end of the year and that they reported fewer fights and more joyful events at school.

7.3 Training, guidance and institutional policies

Schools generally had good procedures with regards to child protection and responding to VAC (Figure 14). Classroom teachers appear to be less aware of guidelines on reporting than principals or school psychologists, which reflects the discussion above that the Mechanism for Counteracting Bullying and Violence in Schools may not be well-known or implemented.²²²

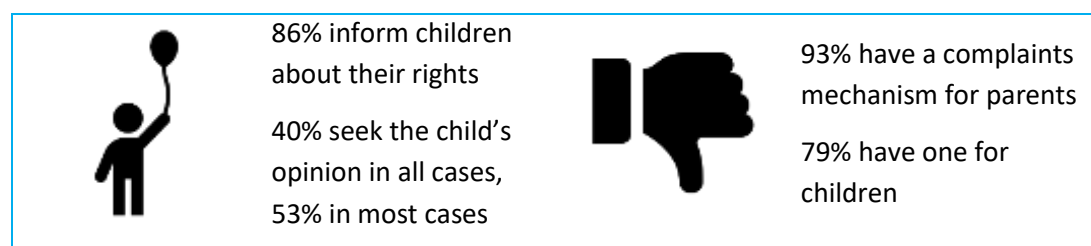
Figure 14 Summary of education professionals' survey responses on training, guidance and institutional policies



²²² 76% of primary school teachers and 73% of secondary school teachers compared to 95% of principals and 90% of school psychologists; Pearson $\chi^2(4)=18.8913$, $p=0.001$

²²³ 'Strongly agree' with the statement 'Today, I am confident about my knowledge of how to identify a child at risk of or suffering violence, child abuse or neglect'

²²⁴ 'Strongly agree' with the statement 'Today, I am confident about what to do if suspecting that a child is at risk of or suffering violence, child abuse or neglect'



Kindergarten and secondary school teachers appear slightly less likely to have received in-service training.²²⁵ Just under half of those who had received training had been trained in the past year. Trainings were generally quite short, either less than a day (31 per cent) or 1 to 2 days (49 per cent) and were primarily delivered face to face (82 per cent). The majority were provided either by the Ministry (36 per cent) or by the school (33 per cent). A Regional Education Management Authority representative said that the MOES provided training on school aggression for all teachers in Bulgaria three or four years ago.²²⁶

Two-thirds of education professionals had received training on positive disciplining techniques to keep order in the classroom or at kindergarten. The majority of education professionals agreed that they are able to use a range of methods to deal with disruptive behaviours. Training in positive discipline techniques does appear to be associated with greater confidence in dealing with disruptive behaviour, with 65 per cent of those who received training strongly agreeing compared to 39 per cent of those who did not receive training.²²⁷ A school counsellor in Vidin said that teachers in their school attend ongoing training focused on in-class discipline management.²²⁸ The MES does not yet provide specific training on corporal punishment however but rather covers this within the general framework of teacher training.²²⁹

7.4 Cooperation with other agencies

Education professionals rated cooperation within their own sector highly, with 63 per cent rating it 'very good' and 54 per cent rating cooperation with their line ministry 'very good'. As with other professionals, they rated cooperation with police authorities highest among other sectors. Education professionals were generally positive about cooperation with health authorities and social assistance authorities, with 42 per cent rating it very good. Teachers in Sofia were critical of their experience of coordinating with other institutions:

"We have experienced a great many difficulties in our work within the framework of the [coordination mechanism] since institutions do not coordinate but rather say the ball is in somebody else's court."

- Teacher, Sofia²³⁰

This lack of cooperation was felt to negatively affect teachers' motivation to deal with cases of bullying and violence.

²²⁵ 67% of kindergarten and 64% of secondary school teachers; Pearson $\chi^2(4)=10.6395$, $p=0.031$

²²⁶ Focus group discussion with municipal government representatives, July 2020, Vidin

²²⁷ Pearson $\chi^2(4)=33.5867$, $p<0.001$

²²⁸ Focus group discussion with school counsellors, July 2020, Vidin

²²⁹ Interview with MOES representative, October 2019, Sofia

²³⁰ Focus group discussion with teachers, June 2020, Sofia

7.5 Key barriers in the education system

The main barrier highlighted by teachers was the lack of training and guidance for teachers and counsellors. While a mechanism to report bullying and violence does exist, many teachers expressed concern that this is not used in practice and so is not effective in preventing and responding to bullying.

Other professionals also highlighted barriers in the education system. Some social workers and NGO representatives expressed concern that schools do not report more serious cases of violence, including domestic violence:

“Interaction with schools is also fraught with difficulties. Schools tend to turn a blind eye to cases of violence, unless they involve brute force. They also tend not to report cases in which there are indications of domestic violence.”

– Animus representative, Sofia²³¹

This ‘fear’ may be linked to the challenge of working with parents. As with social workers, education professionals spoke of the difficulties involved in cases where parents refuse to cooperate. Teachers also highlighted a general mistrust between parents and schools, with the perception being that parents believe they know what is best for their children and not wanting schools to ‘interfere’, hence refusing to allow counsellors to work with their children. In the survey, some teachers felt their colleagues might not report cases of violence and the most common reasons for this was that they would be worried to come into conflict with the child’s parents or that they would not be comfortable getting involved in family matters. It is difficult to know the extent to which there are grounds for these concerns without interviewing parents themselves. While teachers report that they are reluctant to engage with parents due to concerns that parents will be unreceptive or hostile, reluctance to report may also arise from teachers’ own lack of confidence and knowledge in addressing issues of violence.

A final issue highlighted by teachers was the lack of extracurricular activities and safe spaces for children and young people:

“Out-of-class activities are also very useful since they allow aggression to be channelled into other activities: sports, folklore groups and cooking clubs. These prevent children from focusing too much on aggression and cooking up mischief.”

– Teacher, Slivo Pole²³²

Teachers wanted more investment in gyms and sports activities to enable children to expend their energy and to spend their time in a productive way.

²³¹ Interview with representative from Animus, September 2019, Sofia

²³² Focus group discussion with teachers, July 2020, Slivo Pole

8 Capacity of health services

Key findings

- > Overall, health professionals' ability to recognise markers of VAC and awareness of the problem of VAC is lower than that of other professionals and they were the least likely to have identified cases of online abuse, emotional abuse and physical violence.
- > Health professionals were the least likely to say they would report different situations involving children at risk of violence, abuse or neglect, and a high proportion said they would not report these situations at all, suggesting that health professionals may not be aware of their responsibilities.
- > Doctors had the lowest rates of training on VAC of all professionals, with only 52 per cent having received any training. In interviews doctors spoke of the need for VAC to be included in medical training and for guidelines on identifying and responding to VAC to be developed and distributed to all medical professionals.
- > Many health institutions lacked appropriate policies and procedures with regards to child protection and reporting VAC. This lack of guidance appears to disenfranchise health professionals within the child protection system, resulting in them being less willing to cooperate with other agencies.

8.1 Awareness and identification of VAC

All doctors but one, were able to name a marker that could be used to identify a child at risk of violence, abuse or neglect. Along with education professionals, health professionals were able to name fewer markers than other professionals, mentioning 4.8 markers on average.²³³ The pattern of markers mentioned was also very similar to other professionals. The most common markers known by healthcare professionals were unexplained bruises, scratches or other marks (83 per cent), a change in the child's behaviour (78 per cent), and seeming hungry, dishevelled or improperly clothed (51 per cent).

Health professionals were the least likely to see violence against children as a serious issue, with 13 per cent saying it is not a problem in Bulgaria (compared to 7 per cent of all professionals).²³⁴ Across all issues, doctors were less likely to say that these were serious problems (**Error! Reference source not found.**Figure 15). The issue seen as most serious was neglect (38 per cent), followed by psychological violence (27 per cent). Child sexual abuse was seen as the least serious issue, with 57 per cent saying it is an insignificant problem or that it is not a problem at all.

Overall, health professionals' ability to recognise markers of VAC and awareness of the problem of VAC is lower than that of other professionals and they were the least likely to have identified cases of online abuse, emotional abuse and physical violence.²³⁵ Very few had identified cases of sexual abuse (12 per cent) or online abuse (3 per cent). Not unexpectedly, healthcare professionals most commonly identified cases of neglect (64 per cent), followed by physical violence (47 per cent) and emotional abuse (44 per cent). Healthcare professionals are less aware and less involved in child protection than other professionals, even when it comes to something that might be regarded as particularly relevant

²³³ $F=27.39$, $p<0.0001$

²³⁴ Pearson $\chi^2(12)=74.9679$, $p<0.001$

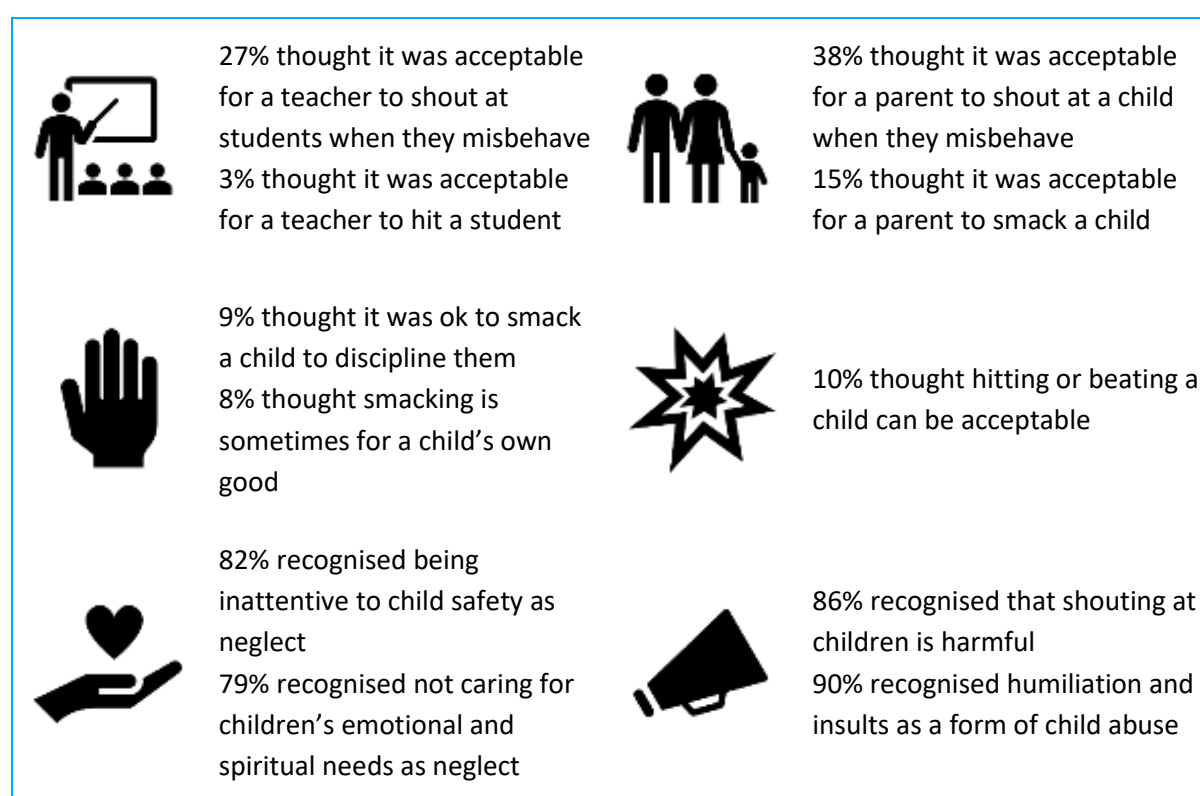
²³⁵ Online abuse: Pearson $\chi^2(4)=76.4121$, $p<0.001$; Emotional abuse: Pearson $\chi^2(4)=23.6072$, $p<0.001$, Physical violence: Pearson $\chi^2(4)=102.9845$, $p<0.001$

to them: physical abuse and neglect. It may be that parents take care not to present children who are being neglected or abused to doctors, but it is nevertheless a surprising outcome as doctors are a frontline professional when it comes to child protection, with an expectation that they would be more alert to signs of neglect and the various forms of abuse than other professionals.

Acceptability of VAC by health professionals

Though most health professionals recognised that shouting at children is harmful, a lot of them also saw shouting as an appropriate form of discipline for teachers and parents (Figure 15). One in six also thought it was acceptable for a parent to smack their child. Health professionals' awareness of different forms of neglect and child abuse was not as good as other professionals, with around a fifth of doctors lacking awareness.

Figure 15 Summary of health professionals' attitudes towards VAC



8.2 Response to VAC

Under the Child Protection Act, doctors and nurses have an obligation to notify cases of violence. Doctors are also involved in the response to VAC, sitting on multidisciplinary teams under the Coordination Mechanism and providing forensic medical examinations in cases of sexual abuse. Doctors reported that they have no procedures to follow on responding to VAC cases²³⁶ and have not received training on identifying or responding to VAC cases. They requested that the Bulgarian Medical Association and the Bulgarian Paediatrician Association develop clear procedures for referring VAC cases to be shared with doctors across Bulgaria:

²³⁶ Interview with representative from National Centre for Public Health and Analyses, November 2019, Sofia

“I have not worked with children who have suffered violence. Information on violence-related issues is lacking and there is no procedure to follow. Physicians exercise a lot of discretion and there is no clarity on how one should proceed if one identifies a case of violence.”

– Doctor, Sofia²³⁷

“In Bulgaria, there is no procedure that one may follow. We, physicians, are not clear on our rights or how and when we should intervene in order to put an end to a case of domestic violence or aggression... We, physicians, should draft criteria for children at risk, be able to recognise signs of child abuse and develop a mechanism enabling GPs and paediatricians to report cases.”

– Paediatrician, Sofia²³⁸

Doctors are also involved in prevention and health promotion activities, working with at-risk groups on issues such as vaccination and teenage pregnancy. However, there does not appear to be any outreach work specifically related to violence against children or domestic violence. Prevention work is seen to be difficult, due to many Roma children not being registered with a general practitioner.²³⁹

Survey responses

Perhaps reflecting their lack of guidance, health professionals were the least likely to say they would report different situations involving children at risk of violence, abuse or neglect, and a high proportion say they would not report these situations at all, suggesting that health professionals may not be aware of their responsibilities. As with the other professionals, bullying and evidence of physical violence were the most likely situations to be reported, while around half were very likely to report situations indicative of neglect. However there appears to be a reluctance among health professionals to directly report a parent or colleague. Around a fifth would not report a parent who punches their child or a colleague who smacks a child. Around a quarter would not report a parent who frequently appears to be drunk, or a parent who smacks their child, while 39 per cent would not report a parent who is regularly emotionally abusive towards their child. This points to an unwillingness to be seen to ‘meddle’ in family affairs, which may be a significant barrier to the reporting of VAC.

Very few healthcare professionals had identified a case of VAC in the past six months, with only 8 per cent (9 professionals) reporting this. All of these professionals had taken action; two-thirds had reported the case to social services, a third had spoken to a parent or a person with responsibility for the child and a fifth had reported the case to the police. None had spoken to the child involved however.

²³⁷ Focus group discussion with teachers and doctors, June 2020, Sofia

²³⁸ Focus group discussion with teachers and doctors, June 2020, Sofia

²³⁹ Interview with representative from the National Centre for Public Health and Analysis, November 2019, Sofia

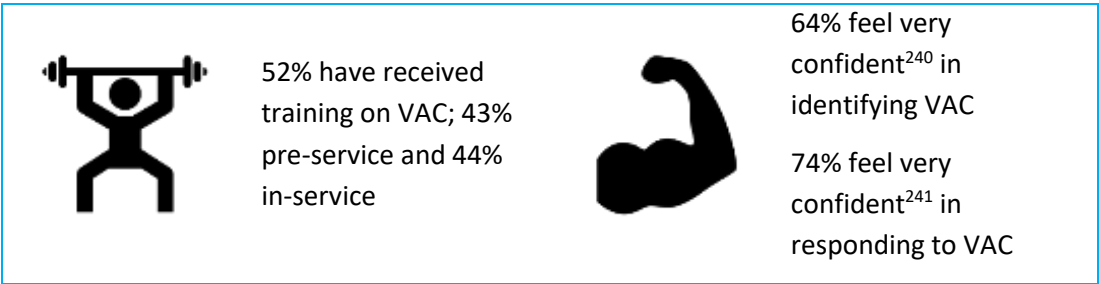


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8.2.2 Training, guidance and institutional policies

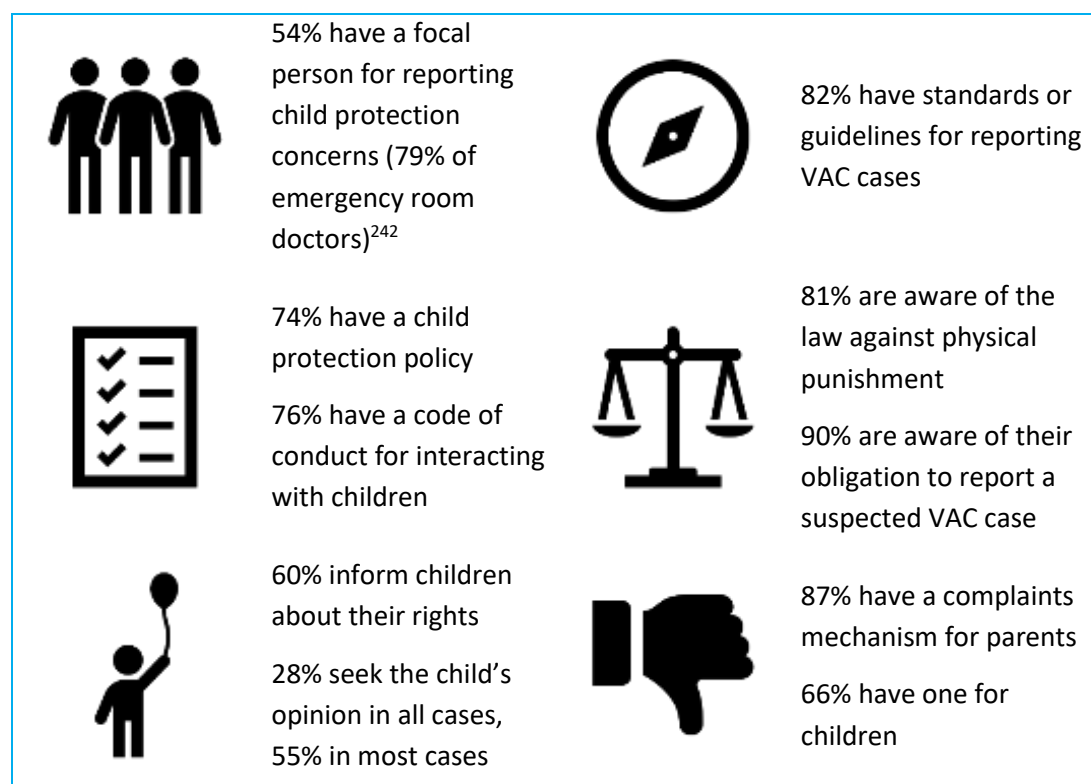
As is clear from the qualitative interviews, there is significant room for improvement in relation to health professionals’ approach to child protection, and particularly in relation to reporting VAC and promoting children’s rights (Figure 16). Health professionals have fairly high levels of confidence despite their lack of training or guidance however, though this may reflect a lack of awareness of appropriate identification and response.

Figure 16 Summary of health professionals' responses on training, guidance and institutional policies



²⁴⁰ 'Strongly agree' with the statement 'Today, I am confident about my knowledge of how to identify a child at risk of or suffering violence, child abuse or neglect'

²⁴¹ 'Strongly agree' with the statement 'Today, I am confident about what to do if suspecting that a child is at risk of or suffering violence, child abuse or neglect'



Doctors had the lowest rates of training on VAC of all professionals, with only 52 per cent having received any training.²⁴³ Of those who had received in-service training, 75 per cent had been trained a year or more ago. Trainings were generally short, with 31 per cent receiving less than a day and 49 per cent receiving 1 to 2 days. Around a quarter had received computer-based training, 57 per cent had received face-to-face training and 20 per cent had received a mix. The most common training providers were the Ministry (49 per cent) and NGOs (26 per cent).

As with guidelines for responding to VAC, healthcare professionals interviewed spoke of the need for specialist training to be introduced across the country:

“Bulgaria has an enormous problem as regards training in medicine in general and paediatrics specifically. All foreign textbooks in paediatrics feature sections dedicated to neglect, at-risk children, social assistance and the like. In Bulgaria, we are not trained to look for signs of violence, respond to cases or report these.”
- Doctor, Sofia²⁴⁴

This is clearly an issue that needs to be addressed to ensure that doctors are trained and empowered to identify and report abuse.

²⁴² Pearson $\chi^2(4)=14.1017$, $p=0.007$

²⁴³ Compared to 75 per cent overall: Pearson $\chi^2(4)=59.1541$, $p<0.001$

²⁴⁴ Focus group discussion with teachers and doctors, June 2020, Sofia

8.3 Cooperation with other agencies

Healthcare professionals rated cooperation within their own agency as the best, with 56 per cent saying it is very good. They were less positive about cooperation with their line ministry than other professionals, with only 39 per cent rating this as very good.²⁴⁵ Health professionals generally rated cooperation with other agencies lower than other professionals, for example only 31 per cent rated cooperation with education or social assistance authorities as very good, 27 per cent rated cooperation with the judiciary as very good, and 26 per cent rated cooperation with NGOs as very good. This lack of cooperation is reflected in other agencies' ratings of cooperation with health authorities. Just 36 per cent of professionals rated cooperation with health authorities very good, while 20 per cent rated it only fair or poor. In interviews, many professionals highlighted problems with getting health professionals, particularly GPs, to participate in multidisciplinary teams.

8.4 Key barriers in the health system

As highlighted above, **a lack of training and guidance for health professionals on identifying and responding to VAC cases is a key barrier and appears to be associated with lower awareness of VAC issues and a lower willingness to report cases:**

"Reporting over the years has revealed that the lowest number of cases of violence against children are reported by general practitioners. This is a cause for concern because GPs are often best placed to notice the first signs of violence."

– SACP representative²⁴⁶

The lack of guidance also appears to disenfranchise health professionals within the child protection system, resulting in them being less willing to cooperate with other agencies.



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²⁴⁵ Compared to 52 per cent overall: Pearson $\chi^2(16) = 41.2160$, $p = 0.001$

²⁴⁶ Interview with State Agency for Child Protection representative, August 2019, Sofia

9 Overarching barriers and bottlenecks in the child protection system

Key findings

- > It is hoped that passing the new Social Services Act and relevant by-laws will improve access to and the quality of social services in Bulgaria, promoting an integrated, multi-disciplinary approach.
- > There is a need to improve the Integrated Information System to make it more effective as a tool for monitoring, reporting and evaluation and to improve linkages both between different CPDs and between different sectors.
- > Professionals across all sectors noted that working with parents can be challenging, with this challenge exacerbated by negative attitudes towards children's rights. This therefore appears to be an important area for training and capacity building.
- > The lack of capacity within the social service sector constrains the provision of prevention activities resulting in a reactive system that does not address the underlying causes of VAC.
- > Sexual abuse and exploitation, online abuse and cyberbullying are overlooked forms of violence. There is a need to raise awareness of these issues to improve professionals' ability to recognise and respond to these types of violence.

9.1 Policy and legislation

A new Social Services Act has been passed by Parliament and entered into force on 1st July 2020 but has faced a number of barriers. In July the Constitutional Court declared three articles of the Act unconstitutional following a challenge by 54 MPs representing the Bulgarian Socialist Party.²⁴⁷ The objectives of the new Social Services Act are to ensure equal access to social services tailored to the individual needs of each person; to ensure the quality and effectiveness of social services; to ensure every person's right to receive support for a life at home and in the community; to promote an integrated approach to providing support to people; and to promote and develop the public-private partnership in the provision of social services. The Act is important because it formalises the State regulation of integrated services such as the Child Advocacy Centres ("Zona ZaKila"), including providing funding for integrated services, which would improve their provision and sustainability and create national ownership of integrated services.²⁴⁸ The evaluation of the Child Advocacy Centres found that the delay in passing the Act was a considerable barrier to providing quality, integrated social services recognised as best practice.²⁴⁹

9.2 Data and case management

While stakeholder bodies collect data on violence against children, there is no overarching system for collating data and agencies do not disaggregate data by protected characteristics to allow for analysis. Some stakeholders commented that the data collected is not detailed enough. For example, under the Coordination Mechanism CPDs have to submit annual information cards, but only one type of violence can be selected for each case, meaning that certain types of violence may be underestimated,

²⁴⁷ <https://bnr.bg/en/post/101310108/bulgarias-constitutional-court-rejects-parts-of-social-services-act>

²⁴⁸ At time of writing there is still a need to develop secondary legislation to ensure that social services and integrated services are fully regulated and the Act effectively implemented.

²⁴⁹ Haarr, R., 'Evaluation of Child Advocacy Centres supported by UNICEF Bulgaria: Final Report', May 2020, p.73

and that the level of co-occurrence of violence is not known.²⁵⁰ This is a concerning approach as it is common for children to suffer from more than one form of abuse.

The Agency of Social Assistance has an Integrated Information System that has been in place since 2016, but the system requires improvement to be more user-friendly and to allow the data to be used for more detailed and disaggregated monitoring, reporting and evaluation. A further limitation to the system is that it is not linked to other databases, such as criminal records, school records or benefits records, which could provide important contextual information in child protection cases. There is also no linkage between different CPDs.²⁵¹ This means that when a child transfers from one CPD to another, information on the child is not provided to the new and is not available to the new CPD. For cases involving multiple CPDs (for example, where a child is in an institution in one town while their parent remains in another town) the information cannot be linked. One social worker described how for one case they had to convene a meeting of the four CPDs involved in order to share the data, which creates huge inefficiencies.²⁵²

9.3 Public attitudes to VAC and children's rights

The tolerance of violence and acceptability of physical punishment in Bulgarian society was cited by many professionals as a barrier to effective prevention and response. Many professionals spoke of how parents viewed physical punishment as 'educational' and necessary in raising children. In the survey, 54 per cent of professionals agreed that the parents that they work with think that they have the right to decide whether to use physical punishment against their children. Among professionals themselves, there were some who viewed smacking children and shouting at them as acceptable. This widespread tolerance of violence leads to the under-reporting of violence:

"Our greatest challenge has been... the tolerance for violence in society. Sometimes, the fact that professionals in the system fail to recognise violence and tend to neglect and underestimate it."

- MLSP representative

Many professionals spoke of an unwillingness to report violence among members of the public, partly because some types of violence such as emotional abuse or hitting a misbehaving child might not be seen as problematic, and partly due to fears of retaliation from the child's family.

Many professionals also brought up the negative public attitudes to children's rights and the widespread public opposition to banning corporal punishment. In the survey, 27 per cent of professionals thought that the general public does not have a good understanding of children's rights and 39 per cent thought that the parents they work with think that children's rights conflict with parental rights. These attitudes are reflected in the backlash against the National Strategy for the Child in 2018 with public protests by parent groups, right-wing organisations and the Orthodox Church. The 'anti-rights' movements have also criticised the work of NGOs, such as the national child helpline. This tide of public opinion has culminated in the non-ratification of the Istanbul Convention and the delay of the new Social Services Act, blocking attempts to advance children's and women's rights in Bulgaria and to improve the quality of the child protection system.

²⁵⁰ Focus group discussion with NGOs and social workers, October 2019, Pernik

²⁵¹ Child Protection System analysis

²⁵² Focus group discussion with NGOs and social workers, October 2019, Pernik

Professionals across all sectors noted that working with parents can be challenging, with this challenge exacerbated by negative attitudes towards children's rights. However, a UNICEF representative did note that these problems may stem from problems in communicating and from a failure to include parents adequately in discussions. **This therefore appears to be an important area for training and capacity building, and was indeed the most common area in which social workers requested training in the survey.**

9.4 Coordination between agencies

Cooperation was another issue that came up across all sectors. A representative from the National Centre for Public Health and Analysis summarised it:

*"There is a very weak inter-institutional link, everyone is pulling the rug in their direction, making it impossible to achieve a common goal."*²⁵³

While many professionals recognised the importance of multidisciplinary work and an integrated approach to child protection, this was hard to achieve in practice. The analysis of the child protection system found that the quality of inter-institutional cooperation has actually decreased over the past two years, with fewer multidisciplinary teams created, a lack of reporting from health and education services, and limited participation from health and education agencies and social service providers.²⁵⁴ Again, it is hoped that the new Social Services Act will help to promote and enforce coordination between agencies. This report also highlights the need for better training for education and health professionals to improve the identification and reporting of violence and to encourage their participation in multidisciplinary teams.

9.5 Lack of prevention

Very few professionals aside from NGOs described prevention activities, though most acknowledged that prevention is important, and several expressed their desire to carry out more prevention work. However, they are constrained by a lack of capacity within the social service sector, with no time or resources available to work on primary prevention. This results in a reactive system that responds to cases of violence but does not address the underlying causes.

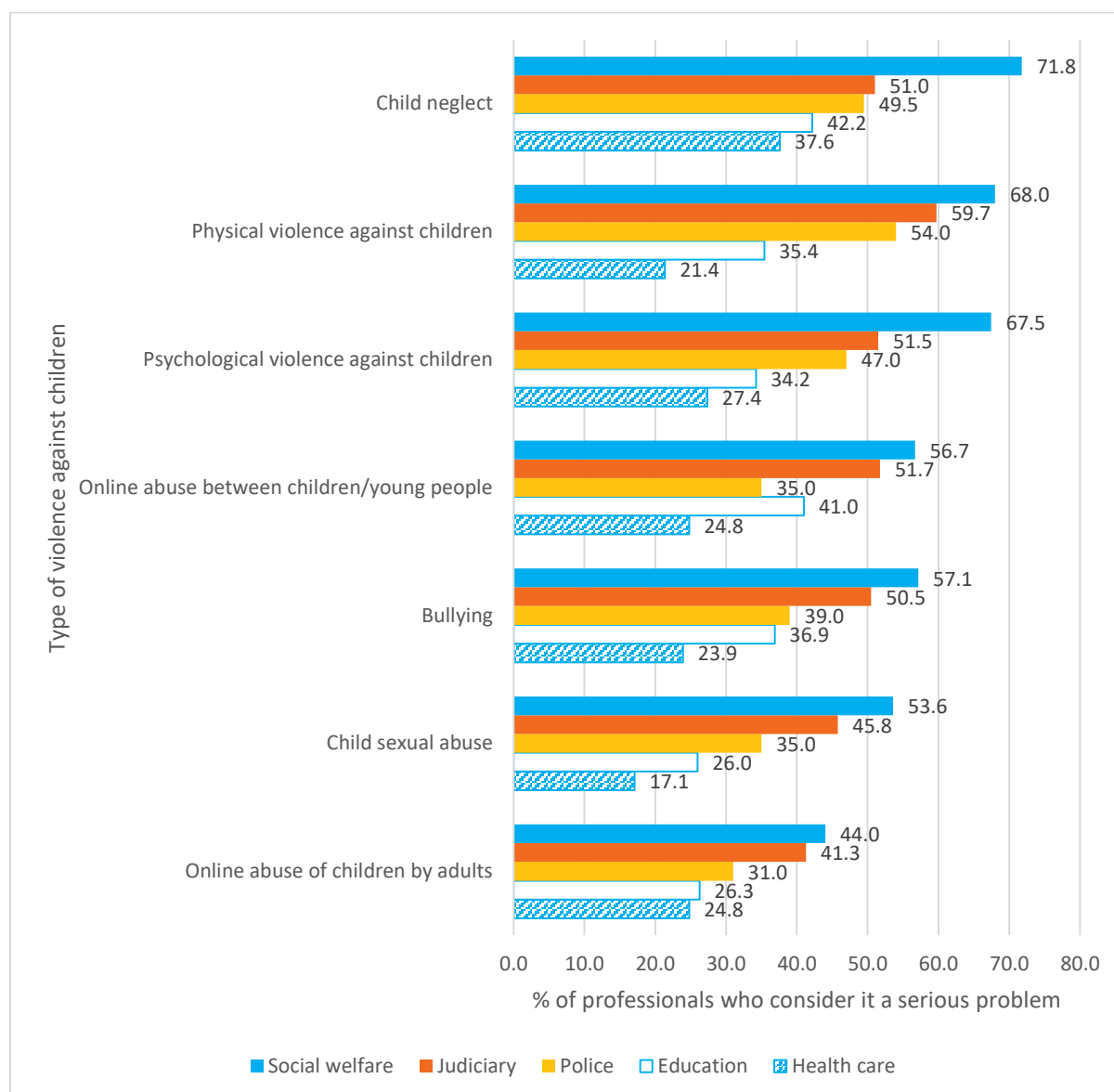
9.6 Overlooked forms of violence

Particular forms of violence appear to be less recognised or understood, with particular challenges associated with their recognition and response.

²⁵³ Interview with representative from the National Centre for Public Health and Analysis, November 2019, Sofia

²⁵⁴ Child protection system analysis

Figure 1715 Percentage of professionals who view different types of violence against children as serious problems in Bulgaria, by sector



9.6.1 Sexual abuse and exploitation

Survey responses demonstrate that many professionals do not consider sexual violence to be a particular problem in Bulgaria, and that many may not recognise the markers of sexual abuse or exploitation. There is also a stigma attached to sexual abuse that may result in underreporting relative to other forms of violence:

“We have all kinds of violence, but physical and emotional abuse prevail. Sexual abuse is less common: 1-2 cases a year go through CPD, but not all cases reach us. Sexual abuse is a delicate topic and not everything reaches us.”

- Local government representative, Pernik²⁵⁵

²⁵⁵ Focus group discussion with local government authorities, October 2019, Pernik

Some stakeholders also highlighted the difficulties of responding to and investigating cases of sexual abuse:

"In cases of sexual abuse, it is usually only the victim and the abuser and there are no witnesses, so it is difficult to provide the act of violence. Moreover, it is difficult to believe the words of the child."

- CPD social worker, Pernik²⁵⁶

"Children are not capable of verbalising everything they have experienced reliably... In the child molesting scenario, it is very difficult to tell whether an act does in fact involve arousal and satisfaction of sexual urges... Children do not have the life experience or the capacity to take in and interpret facts in order to accurately retell what transpired."

- District Prosecutor, Sofia²⁵⁷

This reveals a lack of trust in child victims' testimonies which may act as a barrier to the prosecution of these cases. There may therefore be a need for training for professionals on interviewing child victims of sexual abuse, and more generally on the identification of sexual abuse and exploitation.

9.6.2 Cyberbullying and online abuse

Many stakeholders identified cyberbullying and online abuse as emerging issues in Bulgaria. There does not appear to be good awareness among children or their parents of the risks of social media and Internet use or of cyberbullying:

"Parents allow their children to set up Facebook accounts so children are in a position to communicate with perfect strangers, which breeds danger... parents lack skills relevant to using the Internet and do not mind their children uploading pictures there, which may pose a risk."

- School counsellor, Vidin

Teachers also reported bullying through social media becoming more common. There was concern about the more dangerous forms of online abuse, for example the use of social media by paedophiles to groom children. A school counsellor requested:

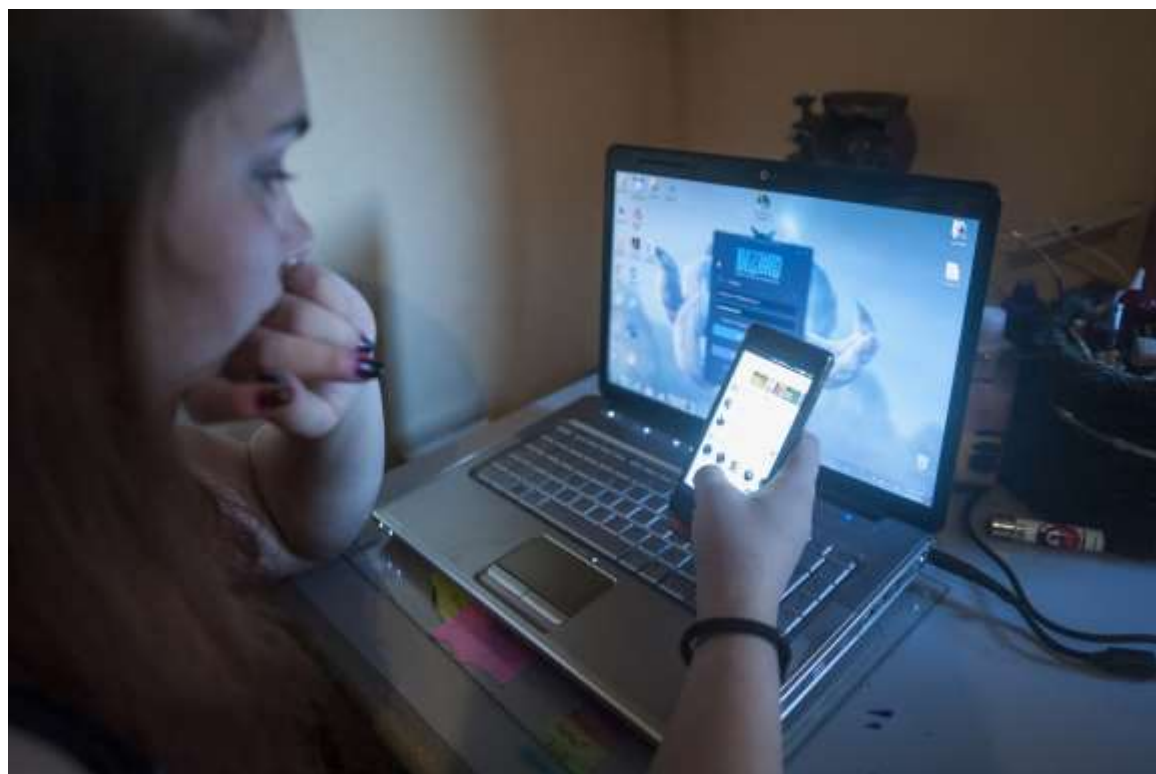
"..guides and other material on responding in cases of cyberbullying that UNICEF might draft. These might cover the stance staff have to adopt and what activities counsellors might offer children. Perhaps a guide in the form of a workbook for each age group would be of help to everyone. It could cover response, management, providing assistance and resistance to peer pressure."

- School counsellor, Vidin

One approach that appears to be effective in combatting cyberbullying and raising awareness of online risks is the Cyberscout programme, described in more detail in Box 3.

²⁵⁶ Focus group discussion with NGOs and social workers, October 2019, Pernik

²⁵⁷ Focus group discussion with prosecutors and police officers, June 2020, Sofia



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Box 3: Case study of Cyberscout programme

The Cyberscout programme has been implemented in 57 municipalities in 25 regions across Bulgaria since 2015, in schools in rural areas, small towns, and large cities.²⁵⁸

Beneficiaries: Children in 5th grade (ages 11 to 12) in secondary schools in Bulgaria. While any school can participate in the programme free of charge, priority is given to schools with students from marginalised social groups.

Programme: The Cyberscout programme trains children as 'Cyberscouts', who serve as a role model of safe and responsible online behaviour, advise their peers on problems encountered on the Internet, and organise and conduct activities aimed at educating their peers about online risks. The programme is funded by the Bulgarian Safer Internet Centre and supported by Telenor Bulgaria.

The training is delivered over two days. The approach taken emphasises the participants' autonomy and right to self-expression, and trainers aim to create a supportive educational environment and to use interactive methods. Learning occurs through games, fun and challenges. On the first day, children participate in a series of challenges related to online risks and the ways to combat them, including verifying online friends and identifying fake identities, how to react to cyberbullying, and where and how to report concerns. On the second day, the participants are given different scenarios and use role-play to practice giving advice and organising events for their peers, with a focus on teamwork and critical thinking. After participating in the training, Cyberscouts receive a certificate and form Cyberscout 'squads'. The squads have the opportunity to participate in a national competition to organise and conduct a public event about online risks and how to deal with them. On Safer Internet

²⁵⁸ Bulgarian Safer Internet Centre, '[The Cyberscout Training Programme](#)', May 2017, accessed 27 November 2020

Day in February the three best projects are given an award. The squads also participate in monthly challenges that develop their Cyberscout skills.

Evaluation: Cyberscout training was ranked 9th in the European Crime Prevention Award competition in December 2017.

The programme is evaluated through pre/post questionnaires administered to participants before and after the training. These questionnaires demonstrate that children increase their knowledge of online safety issues. Additionally, trainers reflect on each session and what could be improved. An external evaluation of the impact or effectiveness of the training, including measuring any effects on cyberbullying in the schools in which the trainings have been delivered, would be useful to better understand the potential of the programme to contribute to combatting cyberbullying in Bulgaria.

10 Lessons learned and recommendations

The findings indicate that Bulgaria has a complex and sophisticated child protection system. Like many developed child protection systems, it consists of a range of actors and many moving pieces, and from time to time these need review and adjustment. The professional survey indicates that while much of the system is functioning well, there is still room for improvement. This section makes a number of recommendations arising from the findings of the survey, but does not seek to repeat recommendations made in the Evaluation of Child Advocacy Centres or the UNICEF Analysis of the Child Protection System in Bulgaria.²⁵⁹

10.1 Knowledge and attitudes towards VAC

10.1.1 Key findings and lessons learned

Professionals in the child protection system were most aware of and most likely to encounter physical violence against children and neglect. The exception to this was in schools where physical violence was much less common and bullying and emotional abuse more commonly encountered. All professionals showed lower awareness of sexual abuse and lower recognition of markers of sexual exploitation, with a substantial minority viewing sexual violence against children as an insignificant problem in Bulgaria. Online abuse, both between children in the form of cyberbullying and the grooming and exploitation of children online by adults, was recognised as an increasingly prevalent form of violence against children but professionals were not confident in recognising and responding to it. Awareness raising and training on sexual and online abuse, and their intersection, is therefore required across all sectors.

A number of professionals still express support for physical punishment of children in the home, indicating that the core messages for addressing VAC are not universally accepted. There remains a need to raise awareness of the negative consequences of physical punishment and to enable professionals to support parents in using alternative forms of positive discipline.

10.1.2 Recommendations

It is recommended that:

- **Ministries, agencies and professional bodies who deal with issues relating to children engage further in awareness-raising programmes to ensure that State policies on VAC are internalised and acted on by the professionals;**
- **Awareness raising and training should focus particularly on lesser known and more hidden forms of VAC, including all forms of sexual violence, and online abuse.**
- **Pre-service and in-service training should be offered to all professionals on identification of children subjected to violence and abuse and referral procedures, with regular professional development courses relevant to their different professions;**

²⁵⁹ Haarr, J., Evaluation of Child Advocacy Centres supported by UNICEF Bulgaria, 2020, UNICEF, Analysis of the Child Protection System in Bulgaria 2019.

10.2 Professionalising social work

10.2.1 Key findings and lessons learned

The survey shows that, overall, social workers are aware of violence against children as a serious issue in Bulgaria and show good awareness of the markers of violence or abuse. Social workers are less likely to identify or handle sexual abuse cases. This may be due to less experience with sexual abuse and a limited ability to recognise such cases.

Social workers highlighted working with hostile or unreceptive parents as a particular challenge. The relationship between parents and social services appears to have become particularly strained in the context of recent public debate around children's rights and child protection.

There is evidence that social workers, particularly those working in Child Protection Departments, face a high workload and a lack of resources, leading to high levels of stress and staff turnover. The qualification level of social workers is quite low and there is a lack of basic training and a lack of professional supervision and coaching enabling social workers to improve their skills. There is no clear prioritisation of cases which may contribute to social workers' high workload. While many study participants were positive about cooperation between agencies and the use of the Coordination Mechanism, there is evidence that the mechanism is not working as intended, with participation from justice, education and health professionals being difficult to secure.

The survey indicated that many social workers face stress in dealing with their daily workload and that this, together with low salaries, has led to social workers leaving the profession. There is an urgent need to raise the status of social work; to encourage further professionalisation of social work; to address management of social workers and to increase retention of existing staff and those who join in the future. On a more practical level social workers need a greater level of support in their day-to-day work from managers and, if social workers are to be retained a review and increase in salary, tied to skill and experience is likely to be needed. A multi-faceted approach is needed to achieve these goals.

10.2.2 Recommendations

It is recommended that:

- When advertising for new social workers, all applicants should be required to have a degree or vocational qualification in social work or relevant work experience.
- The government should work with universities to increase the quality and attractiveness of the available university programmes in social work.
- Consideration should be given to offering financial or other incentives to students who take a social work course (at university or a vocational course) and who are willing to commit to working in a government social work role for at least three years following completion of the course.
- All social workers who are intending to take on a role involving child protection should have attended specialised training on the subject, either pre-service or in-service before taking on child protection cases.
- Introduce a clear career structure for government social workers.
- Review the management structure to ensure that all social workers with clients are adequately supported and are provided with regular professional supervision.

- Introduce opportunities for further training and further qualification.

10.3 Education and health professionals

10.3.1 Key findings and lessons learned

There is a concerning lack of capacity to identify and respond to VAC among education and health professionals, with low levels of reporting and a lack of cooperation in multi-disciplinary teams. Teachers and doctors are well-placed to identify early signs of violence, abuse and neglect and are also crucial in delivering prevention programmes, meaning that building capacity among these professionals has the potential to reduce the number of serious cases of violence. Health professionals particularly demonstrate low awareness of the markers of VAC, and health institutions do not have guidelines and procedures in place to support health professionals to identify and report VAC cases. There appears to be a reluctance, particularly in the case of health professionals but also education officials, to ‘meddle in family affairs’, and a lack of training in how to deal with uncooperative parents. While mechanisms to prevent bullying do exist in schools, there is evidence that these are not utilised in all schools and that teachers lack confidence in responding to and reporting cases of VAC. Both health and education professionals expressed their need for more training and guidance on responding to VAC.

The Ministry of Health should develop procedures for referral of VAC cases by health professionals and should raise awareness amongst staff of the statutory duty to report suspected child abuse and neglect cases.

10.3.2 Recommendations

- The Ministry of Health should:
 - (a) raise awareness amongst health staff on recognition of abuse and the statutory duty to report and refer suspected child abuse and neglect cases.
 - (b) develop regulations on referral of child protection cases for health professionals, together with implementing guidelines;
 - (c) develop and deliver training on the two documents.
- The Ministry of Education should ensure that each school appoints a child protection focal point who should be responsible for referrals to the SAD and able to provide support to teachers who are concerned that a child is being subject to violence or abuse. This will require an on-going programme of training for child protection focal points.

10.4 Judiciary

10.4.1 Key findings and lessons learned

Members of the judiciary had good awareness of VAC overall, but key messages around VAC prevention were not endorsed by all members of the judiciary. It is important that awareness raising and training on the key messages is offered to all judges at the start of their career and subsequently on a regular basis as new issues come to light and social norms and attitudes change. Judges, perhaps more than other professionals, have a major impact on the lives of children and families appearing before them. Interviews demonstrated a particular need for targeted training that is relevant to the day-to-day work of judges, both in the family and the criminal jurisdictions.

10.4.2 Recommendations

- It is recommended that pre-service and in-service training modules for judges are reviewed to ensure that they are both relevant and up to date, and should at least include training on family dynamics, child development and child-friendly justice practices and procedures, especially in the criminal courts when child victims and witnesses give evidence.

10.5 Cooperation between different professionals

10.5.1 Key findings and lessons learned

Cooperation between different government sectors poses a problem in nearly all States. In the survey the degree of cooperation between the different bodies varied between the different professions and in the different geographical areas. One particular issue that arose was the need for improvement in cooperation between the justice system and staff of the CPD. Much of this related to the use of the 'blue rooms' and the implementation of child friendly justice measures. Many of the justice professionals (i.e. prosecutors and judges) have not received training on child protection or violence against children and, at present, there are no specialist courts or units for processing cases involving children.

10.5.2 Recommendations

- 'Blue rooms' should be made available across the country;
- All child victims and witnesses involved in violence and abuse cases should be interviewed in blue rooms using of child-friendly interviewing techniques;
- Standard Operating Procedures should be developed for the blue rooms and police officers or social workers should receive specialised training on interviewing children before undertaking interviews with child victims and witnesses to violence and abuse.

10.6 Disadvantaged children

10.6.1 Key findings and lessons learned

The survey revealed that professionals face challenges in ensuring effective child protection interventions for minority populations and particularly disadvantaged children, and clearly need further support and training in working with such children. Pilot programmes which engage and work with minorities and disadvantaged groups, such as the Roma Capital programme, demonstrate good practice. However, most such programmes are provided by NGOs and are unsustainable without government funding, meaning that gains made in addressing violence against children are often lost once the programme ceases to exist.

10.6.2 Recommendations

It is recommended that child protection authorities review and evaluate NGO programmes with minority communities and explore ways to continue funding those which show good outcomes for children.

10.7 The coordination mechanism

10.7.1 Key findings and lessons learned

The survey indicated that there were mixed views as to the effectiveness of the coordination mechanism and the engagement of the various disciplines. The mechanism appeared to work better in smaller, less urban areas where the various professionals already had an informal relationship and were known to each other. In other instances, there was dissatisfaction with the coordination mechanism and complaints that some professionals did not show up to meetings or really engage in meetings (particularly professionals engaged in law enforcement). The reasons given by professionals included not having time to participate or not seeing the value in participating.²⁶⁰

It was also unclear to some social workers how much responsibility should be taken by the different professionals and the extent to which responsibility for child protection rests with the SAD. These are issues that should be clarified.

10.7.2 Recommendations

It is recommended that:

- The current model for delivery of child protection services should be reviewed to determine its effectiveness and whether any changes need to be made. In particular,
 - (a) consideration should be given to whether further investigation should be undertaken by social workers before the case is brought before the multi-disciplinary team;
 - (b) whether the period for investigation should be lengthened; and
 - (c) whether cases should have to reach a particular threshold before they are brought before the multi-disciplinary team.
- Following review of the current model for delivery of child protection services, the State Agency for Child Protection should develop regulations or clear guidance on the roles of each of the various members of the multi-disciplinary team.
- Joint training programmes should be held for all members of the multi-disciplinary team in each CPD regularly to encourage greater knowledge of the role of each member.
- The coordination mechanism should review the source and nature of referrals no less than twice a year to assist them to determine trends and the effectiveness of procedures.

10.8 Data collection

10.8.1 Key findings and lessons learned

This study revealed some limitations to the current information management systems. There is no overarching system for collating data and agencies do not disaggregate data by protected characteristics to allow for analysis. The ASA data is not linked to other, important data systems and data cannot be shared between different CPDs. The lack of a central database where information is held about children at risk or who are receiving child protection interventions is a serious concern as parents or known abusers move from one area to another and become 'lost' to the system.

²⁶⁰ Focus group discussion with NGO staff members, September 2019, Sofia

It is recommended that national authorities establish an inter-agency committee/working group to develop an action plan for strengthening administrative data collection and data disaggregation related to key indicators on VAC. Any effort to strengthen administrative data collection should begin with a proper multi-sectoral assessment of existing administrative data sources and data on VACs so that strengthening efforts can be aligned with and build upon existing systems, and ground in international evidence-based best practices for administrative data collection on VAC.

10.8.2 Recommendations

It is recommended that the existing mechanisms and protocols for information sharing between the different agencies and stakeholders be reviewed in order to optimise multidisciplinary cooperation and information sharing. In particular, concerned professionals should be able to discover whether a child has been the subject of a child protection referral either in their own or another area.

Annex A: Detailed methodology

Quantitative data collection

A quantitative survey of professionals involved in the child protection system was carried out to explore their attitudes and knowledge of VAC in Bulgaria as well as their capacity to identify and respond to VAC. Data from initial qualitative interviews with professionals in Sofia was used to inform the questions and answer options for the survey to ensure the content was relevant and covered the key themes identified.

Sampling strategy

A multi-stage sampling approach was used to draw a nationally representative sample of professionals working in the child protection system. A total sample of 800 was required, with greater weight given to teachers. During the preparation for the professionals survey, the COVID-19 outbreak occurred and a state of emergency was declared in Bulgaria, meaning enumerators could no longer travel throughout Bulgaria. It was therefore decided to adapt the sampling approach during the state of emergency, with enumerators using their existing networks of contacts and snowball sampling to recruit participants, following the original sampling approach as closely as possible in terms of sample size and site selection.

Social workers

At least one social worker was sampled from each of the 28 Regional Social Assistance Directorates, with a total sample of 30 achieved. Within each region, at least one social worker was sampled from the Child Protection Department of the regional town and one other small town, giving a total sample of 68. One Community Support Centre was also selected per region with at least one social worker sampled from each, with a total sample of 29 achieved.

Members of the judiciary

Judges were selected from six district courts in regional towns, 12 district courts in small towns, and six regional courts. In total 36 regional court judges and 66 district court judges were included in the sample, or 102 judges in total.

Prosecutors were selected in the same way as judges, from six district offices in regional towns, 12 district offices in small towns, and six regional offices. In total 36 regional office prosecutors and 66 district office prosecutors were included in the sample, or 102 prosecutors in total.

Police officers

Police officers were sampled at both the district and regional level to represent Children's Pedagogical Rooms and investigative police officers. Six investigative and six pedagogical officers were sampled at a regional level. At a district level, one investigative and one pedagogical officer were sampled from each regional town, and a further 10 pedagogical officers and 22 investigative officers were sampled from small towns, giving a total sample of 44 pedagogical officers and 56 investigative officers, or 100 officers in total.

Education professionals

Within each of the 28 regions, one kindergarten was selected and at least one teacher was randomly sampled from each kindergarten, giving a total of 30 kindergarten teachers. Principals, primary school

teachers, secondary school teachers and school counsellors or psychologists were selected from each regional town and one or more small towns within each region, with more teachers being sampled from the five largest regions to reflect their greater population size. A total of 79 counsellors, 50 primary school teachers, 107 secondary school teachers and 73 principals were included in the final sample.

Healthcare professionals

In Sofia City, 11 GPs, 10 paediatricians and 10 emergency doctors were sampled. In the other 27 regions, in 13 regions at least one paediatrician was sampled in the regional town, while in 14 regions an emergency doctor was sampled. Within each region, a small town and a village were selected, and a GP was randomly sampled from each. This gives a total of 27 paediatricians, 24 emergency doctors and 66 GPs, or 117 doctors overall.

Fieldwork

Piloting and training

Enumerators from the national research agency carried out a pilot survey in Sofia with 41 professionals from all five sectors, in order to test the tools. After the pilot phase, the tools were finalised and the national research agency rolled out the training to all enumerators involved in the study and then began the fieldwork.

Data collection

The surveys were administered either face-to-face or via a telephone interview, using tablets to record the data. The majority of interviews were carried out via telephone due to the COVID-19 situation in Bulgaria. Fieldwork took place between May and July 2020.

The national research agency was responsible for overseeing fieldwork, maintaining quality controls and initial cleaning of the data. The national research agency shared the data with Coram International in .csv format.

Qualitative data collection

Key informant interviews and focus group discussions were carried out with stakeholders involved in child protection from different sectors and at national, regional and municipality level.

Sampling strategy

A purposive sampling approach was used to select participants for qualitative interviews. At a national-level, key stakeholders were identified during the inception phase, including representatives from relevant Government ministries and agencies, key child protection NGOs, and the UNICEF Bulgaria office.

At a regional and municipality level, stakeholders were selected to represent key professions involved in identifying and responding to violence against children, including teachers, school counsellors, doctors, police officers, social workers from Social Assistance Directorates, Community Support Centres and Child Protection Departments, judges, prosecutors, representatives from municipal authorities, and professionals providing psychosocial support to child victims of violence.

The sampling approach for the qualitative data collection was informed by results from the quantitative data collection. The sampling sought to include areas with high and low prevalence of violence against children, as reported in the children's survey, as well as urban and rural areas.

Sofia, an urban area with high prevalence, was used for the piloting and initial interviews. This left a rural high prevalence area, an urban low prevalence area and a rural low prevalence area to be sampled. It was decided to sample the urban and rural low prevalence municipalities from within the same region to save on travel time and costs, and to assist in the arrangement of interviews.

Using the data from the child survey, regions were ranked according to the prevalence of a combination of different child outcomes:

- Experience of physical violence at home, in school or in the community
- Experience of emotional violence at home, in school or in the community
- Experience of stalking
- Experience of cyberbullying
- Experience of neglect in 3 areas – food, education, illness
- Experience of sexual harassment, unwanted sexual touching, rape, and sexual harassment online

The region with the highest prevalence was Ruse and Slivo Pole was randomly selected from among the seven rural municipalities of Ruse region. The region with the lowest prevalence was Vidin. Vidin town was therefore selected as the urban area, and Bregovo was randomly selected as the rural area.

The final municipalities selected were therefore:

	Low prevalence	High prevalence
Rural	Bregovo	Slivo Pole
Urban	Vidin	Sofia

A full list of qualitative interviews carried out is given in the table below.

Region	Municipality	Date	Participant(s)	# participants
Sofia city		Jul-19	Agency of Social Assistance	1
		Jul-19	Ministry of Justice	1
		Jul-19	Supreme Judicial Council	1
		Aug-19	Ministry of Labour and Social Policy	1
		Aug-19	State Child Protection Agency	1
		Aug-19	UNICEF	1
		Sep-19	Animus staff	1
		Sep-19	National Ombudsman	1
		Sep-19	SAPI staff	1
		Sep-19	Journalist	1
		Sep-19	Animus staff Pulse staff	4
		Oct-19	Ministry of Interior	1

		Oct-19	State Agency for Refugees	1
		Oct-19	Ministry of Education, Health and Science	1
		Oct-19	Bulgaria Prosecution Service	1
		Nov-19	National Centre for Public Health and Analysis	1
Sofia	Various	Feb-20	CPD social workers CSC social workers (one Animus, one SAPI) MBU psychologist (Animus)	8
	Various	Jun-20	Doctors Teachers	5
	Various	Jun-20	District prosecutors Police officer	4
Pernik	Pernik	Oct-19	RDE CPD Pulse Foundation	4
	Pernik	Oct-19	Pulse Foundation social worker CSC psychologist CSC social worker SRIC psychologist	4
Ruse	Ruse	Jul-20	NGO Social worker NGO psychologist	2
	Ruse	Jul-20	SRIC psychologist	1
	Ruse	Jul-20	CPD social worker	1
	Slivo Pole	Jul-20	Education expert Regional Health Inspection Service representative	2
	Slivo Pole	Jul-20	Secondary school teachers Primary school teacher	3
Vidin	Bregovo	Jul-20	Municipal government REMA LCCJD secretaries	5
	Bregovo	Jul-20	CPD social workers	2
	Vidin	Jul-20	RSAD SAD Psychologist	3
	Vidin	Jul-20	School counsellors	2
	Vidin	Jul-20	Regional prosecutors	2

Vidin	Jul-20	Judge District prosecutor Regional prosecutors	4
Total number of participants:			71
Total number of interviews:			32

Fieldwork

Qualitative interviews were carried out by the national researcher. Interviews in Sofia city took place in summer and autumn 2019, while interviews in Ruse and Vidin regions took place in summer 2020. Due to the COVID-19 situation, interviews in summer 2020 took place via Zoom video conferencing.

Case studies

Three programmes have been used as ‘case studies’ of good practice or promising approaches to preventing and responding to violence against children in Bulgaria. Programmes were selected in collaboration with UNICEF and the Advisory Group to cover different types of violence against children. The programmes selected were:

- “Zona ZaKmila” Child and Youth Advocacy Centres
- Cyberscout
- Zippy’s Friends

Researchers reviewed existing documentation and evaluations (where available) of the selected programmes. The main questions that were addressed during the document review were:

- Who are the beneficiaries of the programme?
- How does the programme seek to prevent/respond to violence against children?
- What is the evidence for the programme’s effectiveness and impact?
- How do programme beneficiaries/implementers view the impact of the programme?
- What factors can explain the success of the programme and what factors could improve it?
- Could the programme be replicated in other settings?

Data analysis

Quantitative data were uploaded into Stata version 15. The data were cleaned and checked for item non-response. Checks were performed to investigate as far as possible whether data were missing at random. Cross-tabulations and comparisons of means were used to explore the data and to produce a descriptive analysis of the relationships between predictors such as sector of employment, age, gender and years of experience, and outcome variables.

Transcripts of qualitative interviews were uploaded into Nvivo version 11 and coded for key themes. The quantitative and qualitative analysis were triangulated in order to explore issues from multiple perspectives. Quantitative survey data provide an objective measure of professionals’ experience, knowledge and capacity to respond to VAC, allowing comparison between sectors, while qualitative data allowed us to explore the process and barriers to identifying and responding to VAC cases, providing greater depth to the issues identified in the survey.

Limitations and challenges

The study methodology is limited in several respects. Participation in the survey was voluntary and so participants may not be truly representative of the diversity of experience and opinion among professionals working on child protection in Bulgaria. For example, participants may be more aware of VAC as an issue and therefore more likely to want to participate. Professionals' answers are also likely to be affected by a type of response bias (social desirability bias). Professionals might want to give the perceived "correct" answer and therefore state that they are, for example, less accepting of violence against children or more confident in their knowledge than they actually are. To limit such behaviour, enumerators were specifically trained to remain neutral during the interview, to ensure that they do not signal to respondents. Some of the survey data is also likely to be missing in a way that is not random. During fieldwork, enumerators found that some social workers were suspicious of questions about their workload as they were concerned that they were being audited, despite reassurances to the contrary. This led to missing data for certain items.

As with all qualitative data, the information collected through interviews and focus groups is not necessarily generalisable or representative of the views and experiences of groups of stakeholders in Bulgaria. To ensure that qualitative interviews are as representative as possible, a purposive sampling approach was adopted.

The constraints posed by the COVID-19 pandemic meant that the planned sampling approach for the professionals' survey had to be adapted, with participants being recruited through enumerators' networks and snowball sampling methods. This introduces the possibility of bias as enumerators may be more likely to know professionals in urban areas or who have been in their profession longer. Additionally, the professionals they know may be more likely to participate in research and so may be more motivated or knowledgeable. However, this issue of respondent bias is also present even when random sampling is used, as the person recruited must be willing to participate.

Lastly, this study provides a "snapshot" of professionals' capacity to identify and respond to violence against children in Bulgaria at a specific point in time and cannot comment on how prevalence and attitudes change over time. Regular surveys or the use of monitoring data would enable a longer-term view on the child protection system's capacity to prevent and respond to VAC and how this may change in response to policies and programmes.

11 Annex B: Legal and policy review

11.1 International legal framework

11.1.1 UN Convention on the Rights of the Child

Under the UN Convention on the Rights of the Child (CRC), all States have an obligation to promote, protect and provide for the rights of child. There are four underpinning general principles to the CRC that must be applied to all actions concerning children. These are:

- Article 3(1): That the best interests of the child shall be a primary consideration;
- Article 2: That children should not be the subject of discrimination;
- Article 6: That children have the right to survival and development; and
- Article 12: That children have the right to express their views and have those views taken into account in all decisions affecting them.

As these are considered essential to the realisation of all of children's rights, it is a critical component of a State's compliance with the CRC that the laws, policies and practices relating to violence against children uphold these underpinning principles.

There are also articles within the CRC that outline a State's obligations to protect children from violence:

- Article 19: Requires States to protect children 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 20: Provides additional rights in relation to the treatment of children who are deprived of family care;
- Articles 32 to 36: Require prevention of and response to all other forms of violence, exploitation, abuse and neglect;
- Article 39: Provides for the physical and psychological recovery and social reintegration of child victims in an environment which fosters their health, self-respect and dignity;
- Articles 19 and 28(2): Protection from all forms of corporal punishment; and
- Articles 19 and 37: Protection from other cruel or degrading forms of punishment.

These articles are supplemented by Article 16 of the Convention on the Rights of People with Disabilities (CRPD) on the prevention of violence against children with disabilities.

The CRC sets out a framework in which parents have the primary responsibility for raising and caring for their children²⁶¹ but under which States must support parents, guardians and carers to meet this responsibility.²⁶² The CRC specifically requires States to support families through social security, insurance and financial support in order to enable them to care for the needs and interests of their

²⁶¹Article 18 UNCRC. Art. 27 UNCRC provides that it is the parents who have the primary responsibility for securing conditions of living necessary for the child's development.

²⁶² As set out with the Preamble to the UNCRC, which states 'the family, as the fundamental group of society and the natural environment for the growth and well being of all its members and particularly children, should be afforded the necessary protection and assistance'.

children and as a way to ensure family preservation.²⁶³ The UN's Guidelines for the Alternative Care of Children (2010) further emphasise the importance of family preservation, and require States to take measures to support parents and families, including by addressing root causes of 'child abandonment, relinquishment and separation of the child from his/her family'²⁶⁴ through a series of primary, secondary and tertiary services including birth registration, housing, health, education and social welfare.

The CRC and the UN Guidelines on Alternative Care recognise that there will be situations in which parents do not meet their children's needs, in which cases the State may need to intervene in family life in order to protect the child. The international legal framework requires judicial review of any decision to remove a child from his or her family (see Articles 9 and 20 CRC). When children are removed from family care, they are entitled to special protection and assistance, including placement in a form of alternative care.²⁶⁵ The UN Guidelines on Alternative Care encourage a clear preference for placing children with family members or other forms of alternative care that do not involve institutionalisation. Institutionalisation is considered a last resort, notwithstanding that the best interests of the child should always be a primary consideration in relation to placement of children. When children are taken into alternative care settings, their rights are protected by Article 3(3) of the UNCRC.²⁶⁶

11.1.2 Optional protocols to the Convention on the Rights of the Child

There are three Optional Protocols to the Convention on the Rights of the Child:

- Optional Protocol on the sale of children, child prostitution and child pornography (OPSC);
- Optional Protocol on the involvement of children in armed conflict (OPAC); and
- Optional Protocol on a communications procedure (OPIC)

Bulgaria signed OPSC and OPAC on the 8th June 2001 and ratified them on the 12th February 2002. It had not ratified OPIC, which allows children to bring complaints about violations of their rights directly to the CRC Committee, at the time of writing.²⁶⁷

11.1.3 General comments of the CRC Committee

The Committee on the Rights of the Child has issued two General Comments relating to violence against children: General Comment No 8 (2006) on the right of the child to protection from corporal

²⁶³ Articles 26 and 27. UN Convention on the Rights of the Child. 1989. p.8-9. Available at: <https://www.unicef.org.uk/what-we-do/un-convention-child-rights/> [6-12-18]; As echoed within Article 10 of the International Covenant on Economic, Social and Cultural Rights (1996), G.A. res. 2200A (XXI), 21 U.N. GAOR Supp. (No. 16) at 49, U.N. Doc. A/6316 (1966), 993 U.N.T.S. 3, entered into force Jan. 3, 1976.

²⁶⁴ UN. General Assembly. Guidelines for the Alternative Care of Children. 2010. p.7. Available at: https://www.unicef.org/protection/alternative_care_Guidelines-English.pdf [6-12-18].

²⁶⁵ Article 20(2) UNCRC.

²⁶⁶ When children are taken into alternative care settings, their rights are protected by Article 3(3) of the UNCRC.

²⁶⁷ OHCHR. Ratification Status for Bulgaria. https://tbinternet.ohchr.org/_layouts/15/TreatyBodyExternal/Treaty.aspx?CountryID=99&Lang=EN [06-12-18].

punishment and other cruel or degrading forms of punishment;²⁶⁸ and General Comment No 13 (2011) on the right of the child to freedom from all forms of violence.²⁶⁹ In General Comment No 13, the CRC Committee expresses concern over the extent to which violence against children persists within States Parties, and the importance of States Parties acting to prevent and address violence against children.²⁷⁰

11.1.4 Other international legal instruments and documents

Bulgaria has ratified a number of other international legal instruments that also protect children from violence. It ratified the International Covenant on Civil and Political Rights (ICCPR) on the 21st September 1970.²⁷¹ The ICCPR provides the international legal framework to protect and preserve the most basic civil and political rights, including the civil and political rights of children. Although the ICCPR is applicable generally, Article 24 applies specifically to children and stipulates that ‘every child shall have [...] the right to such measures of protection as are required by his status as a minor.’²⁷²

Bulgaria ratified the International Covenant on Economic, Social and Cultural Rights (ICESCR) at the same time as the ICCPR.²⁷³ The ICESCR includes provisions seeking to protect children’s economic and social rights, meaning that it protects children from economic and social exploitation, much of which is considered a form of violence against children. For example, under Article 10(3), the ICESCR encourages States to set lower age limits for paid employment of children and to ensure that employment of children below this age labour are prohibited and punishable by law.²⁷⁴

The international legal framework recognises that women and girls are particularly vulnerable to violence and grants them special protection in several ways. Bulgaria ratified the Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW) on the 8th Feb 2002 and accepted individual complaints procedures under CEDAW in 2006.²⁷⁵ Although it is important to recognise that violence against women and girls is not included as a rights violation under CEDAW, General Recommendation No.19 (1992) of the CEDAW Committee recognises gender-based violence as a form of discrimination, and therefore a violation of Article 1 of CEDAW.²⁷⁶ General Recommendation No.35 (2017) of the CEDAW Committee, which updated General Recommendation No.19, states that ‘the

²⁶⁸ CRC Committee, General Comment No. 8, on the right of the child to protection from corporal punishment and other cruel or degrading forms of punishment (Forty-second session, 2006), U.N. Doc. CRC/C/GC/8 (2006). https://tbinternet.ohchr.org/_layouts/treatybodyexternal/Download.aspx?symbolno=CRC%2F8%2F8&Lang=en [6-12-18].

²⁶⁹ CRC Committee, General Comment No. 13, on the right of the child to protection from all forms of violence (2011), U.N. Doc. CRC/C/GC/13 (2011). https://www2.ohchr.org/english/bodies/crc/docs/CRC.C.GC.13_en.pdf. [06-12-18].

²⁷⁰ CRC Committee, General Comment No. 13, on the right of the child to protection from all forms of violence (2011), U.N. Doc. CRC/C/GC/13 (2011), para 2. https://www2.ohchr.org/english/bodies/crc/docs/CRC.C.GC.13_en.pdf. [06-12-18].

²⁷¹ OHCHR. Ratification Status for Bulgaria. http://tbinternet.ohchr.org/_layouts/TreatyBodyExternal/Treaty.aspx?CountryID=99&Lang=EN[06-12-18].

²⁷² ICCPR, Article 24(1).

²⁷³ OHCHR. Ratification Status for Bulgaria. http://tbinternet.ohchr.org/_layouts/TreatyBodyExternal/Treaty.aspx?CountryID=99&Lang=EN[06-12-18].

²⁷⁴ ICESCR, Article 10(3).

²⁷⁵ OHCHR. Ratification Status for Bulgaria. http://tbinternet.ohchr.org/_layouts/TreatyBodyExternal/Treaty.aspx?CountryID=99&Lang=EN[06-12-18].

²⁷⁶ CEDAW General Recommendation No. 19: Violence against women, para.6

opinio juris and State practice suggest that the prohibition of gender-based violence against women has evolved into a principle of customary international law.²⁷⁷

The international framework supporting the rights of children who are victims and witnesses also includes the Guidelines on Justice in Matters involving Child Victims and Witnesses of Crime [Vienna Guidelines]²⁷⁸ and the Guidelines for Action on Children in the Criminal Justice System.²⁷⁹ These provide that children who are victims or witnesses have the right to:

- Be treated with dignity and compassion,²⁸⁰
- Be protected from discrimination,²⁸¹
- Be informed,²⁸²
- Be heard and to express views and concerns,²⁸³
- Effective assistance,²⁸⁴
- Privacy,²⁸⁵
- Be protected from hardship during the justice process,²⁸⁶
- Safety,²⁸⁷
- Reparation;²⁸⁸ and
- Special measures to prevent re-victimisation.²⁸⁹

11.1.5 The Sustainable Development Goals

In addition to the UNCRC, the Sustainable Development Goals contribute to the framework for understanding child protection by addressing violence against women and girls (5.2), harmful traditional practices (5.3), child labour (8.7), provision of safe spaces (11.7), violence and violent deaths (16.1), abuse, exploitation, trafficking and all forms of violence against and torture of children (16.2) and birth registration (16.9). The SDGs also promote strengthened national institutions for violence prevention (16.a).

SDGs	Targets
5.2	End all forms of violence against women and girls in public and private spheres, including trafficking and sexual and other types of exploitation

²⁷⁷ CEDAW/C/GC/35 (2017), para.2

²⁷⁸ ECOSOC Resolution 2005/20 of 22 July 2005.

²⁷⁹ ECOSOC Resolution 1997/30 of 21 July 1997. UN Declaration of Basic Principles of Justice for Victims of Crime and Abuse of Power. General Assembly Resolution 40/34 of 29 November 1985. Other guidance, including, for example, the International Association of Prosecutors (IAP) Model Guidelines for the Effective Prosecution of Crimes against Children also instructs those within the justice system on how to work in a child-friendly manner with children who are in contact with the criminal law system as victims and/or witnesses. Available at http://www.icclr.law.ubc.ca/Site%20Map/Programs/Model_Guidelines.htm

²⁸⁰ Section V Guidelines on Justice in Matters involving Child Victims and Witnesses of Crime.

²⁸¹ Section VI Guidelines on Justice in Matters involving Child Victims and Witnesses of Crime.

²⁸² Section VII Guidelines on Justice in Matters involving Child Victims and Witnesses of Crime.

²⁸³ Section VIII Guidelines on Justice in Matters involving Child Victims and Witnesses of Crime.

²⁸⁴ Section IX Guidelines on Justice in Matters involving Child Victims and Witnesses of Crime.

²⁸⁵ Section X Guidelines on Justice in Matters involving Child Victims and Witnesses of Crime.

²⁸⁶ Section XI Guidelines on Justice in Matters involving Child Victims and Witnesses of Crime.

²⁸⁷ Section XII Guidelines on Justice in Matters involving Child Victims and Witnesses of Crime.

²⁸⁸ Section XIII Guidelines on Justice in Matters involving Child Victims and Witnesses of Crime.

²⁸⁹ Section XIV Guidelines on Justice in Matters involving Child Victims and Witnesses of Crime.

5.3	Eliminate all harmful practices, such as child, early and forced marriage and female genital mutilations
8.7	Take immediate and effective measures to secure the prohibition and elimination of the worst forms of child labour, eradicate forced labour, and by 2025 end child labour in all its forms including recruitment and use of child soldiers
11.7	By 2030, provide universal access to safe, inclusive and accessible, green and public spaces, particularly for women and children, older persons and persons with disabilities
16.1	By 2030, significantly reduce all forms of violence and related deaths everywhere
16.2	End abuse, exploitation, trafficking and all forms of violence and torture against children
16.3	Promote the rule of law at the national and international levels and ensure equal access to justice for all.
16.9	By 2030, provide legal identity for all, including birth registration
16.A	Strengthen relevant national institutions, including through international cooperation, for building capacity at all levels, in particular in developing countries, to prevent violence and combat terrorism and crime

11.2 Regional legal framework

As a Member State of the European Union, Bulgaria is also legally obligated to follow a number of regional instruments relating to the prevention of and response to violence against children. The Charter of Fundamental Rights of the European Union covers human rights within the European Union in general, providing for a full range of rights that are also applicable to children. These include the right to life (Article 2) and the prohibition of torture (Article 4). Article 24 of the EU Charter of Fundamental Rights covers the rights of the child specifically and states:

- ‘1. Children shall have the right to such protection and care as is necessary for their well-being. They may express their views freely. Such views shall be taken into consideration on matters which concern them in accordance with their age and maturity.
2. In all actions relating to children, whether taken by public authorities or private institutions, the child’s best interests must be a primary consideration.
3. Every child shall have the right to maintain on a regular basis a personal relationship and direct contact with both his or her parents, unless that is contrary to his or her interests.’²⁹⁰

In 2011, the European Union (EU) launched a communication entitled ‘the EU Agenda for the Rights of the Child’, which was an action plan for the realisation of children’s rights across Europe.²⁹¹ The Agenda set out a series of actions to be taken across the EU in order to make child justice systems within the EU more child-friendly. These actions focused on the protection of the rights of vulnerable victims and safeguarding the rights of vulnerable children who are in contact with the law.²⁹²

²⁹⁰ Article 24 EU Charter of Fundamental Rights 2000.

²⁹¹ An EU Agenda for the Rights of the Child, <https://eur-lex.europa.eu/legal-content/en/ALL/?uri=CELEX:52011DC0060> [06-12-18].

²⁹² For a summary, see CRIN, European Union, <https://www.crin.org/en/guides/un-international-system/regional-mechanisms/european-union> [06-12-18].

The EU has also issued Directives relating to children's rights:

- Directive 2011/92/EU of the European Parliament and of the Council of 13 December 2011 on combating the sexual abuse and sexual exploitation of children and child pornography;²⁹³
- Directive 2011/36/EU on preventing and combating trafficking in human beings and protecting its victims;²⁹⁴
- Directive 2012/29/EU of the European Parliament and the Council establishing minimum standards on the rights, support and protection of victims of crime;²⁹⁵ and
- Directive 2016/800/EU of the European Parliament and of the Council on procedural safeguards for children who are suspects or accused persons in criminal proceedings.²⁹⁶

In addition to these, as a member of the Council of Europe, which is a separate body to the European Union, Bulgaria is legally bound by the European Charter on Human Rights and Fundamental Freedoms, an important human rights instrument that again contains a multitude of rights that apply to all persons, including children. Bulgaria has signed and ratified the Council of Europe Convention on Protection of Children against Sexual Exploitation and Sexual Abuse, also known as the 'the Lanzarote Convention'. This sets out that states in Europe and beyond shall adopt specific legislation and take measures to prevent sexual violence, to protection child victims and to prosecute perpetrators.²⁹⁷ Other relevant Council of Europe conventions that have been signed and ratified by Bulgaria are the Framework Convention for the Protection of National Minorities, which seeks to promote the full and effective equality of national minorities by creating appropriate conditions enabling them to preserve and develop their culture and to retain their identity;²⁹⁸ and the European Convention on Recognition and Enforcement of Decisions concerning Custody of Children and on Restoration of Custody of Children, which provides for free, prompt, non-bureaucratic assistance from central authorities to discover the whereabouts and restore custody of a child improperly removed.²⁹⁹

The Council of Europe has also promulgated the Convention on Preventing and Combating Violence against Women and Domestic Violence ('the Istanbul Convention'),³⁰⁰ which is considered one of the most important regional conventions relating to gender-based violence against women. Bulgaria has signed the Istanbul Convention but has yet to ratify it. The Convention was declared unconstitutional by the Bulgarian Constitutional Court, which ruled that the Convention blurs the differences between the two sexes, though this may be based on a mistranslation of the term 'gender'. The campaign against the ratification of the Istanbul Convention has led to a backlash against women's rights and attacks on women's organisations.³⁰¹

In 2016, as a means to supplement and strengthen the rights and protections enjoyed by children across Europe, the Council of Europe published its Strategy for the Rights of the Child (2016-2021) in which it identified key priority areas including: 1. Equal opportunities for all children, 2. Participation of all children, 3. A life free from violence for all children, 4. Child-friendly justice for all children, and 5. Rights of the child in the digital environment.

²⁹³ <https://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=OJ:L:2011:335:0001:0014:EN:PDF> [06-12-18].

²⁹⁴ <https://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=OJ:L:2011:101:0001:0011:EN:PDF> [06-12-18].

²⁹⁵ <https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX:32012L0029> [06-12-18].

²⁹⁶ <http://db.euocrim.org/db/en/doc/2500.pdf> [06-12-18].

²⁹⁷ <https://www.coe.int/en/web/children/lanzarote-convention>

²⁹⁸ <https://www.coe.int/en/web/conventions/search-on-states/-/conventions/treaty/157>

²⁹⁹ <https://www.coe.int/en/web/conventions/search-on-states/-/conventions/treaty/105>

³⁰⁰ <https://www.coe.int/fr/web/conventions/full-list/-/conventions/rms/090000168008482e> [06-12-18].

³⁰¹ <https://www.ohchr.org/en/NewsEvents/Pages/DisplayNews.aspx?NewsID=25178&LangID=E>

11.3 National legal, policy and institutional framework

Overall, the institutional landscape for protection of children against violence is positive in Bulgaria, and largely compliant with international standards. However, a concluding observation from the CRC Committee's assessment of Bulgaria's State Party Report to the Committee in 2016 suggests caution should be taken over implementation:

'While the Committee notes as positive the provisions in the Child Protection Act (art. 11 (2)) and the Family Code (art. 125 (2)) that prohibit violence in all settings, including the home, and in the implementing regulation of the Public Education Act (art. 129) that prohibits violence in schools, it is concerned that corporal punishment continues to be widely accepted in society as a means of disciplining children and is not explicitly prohibited or sanctioned in legislation.'³⁰²

11.3.1 Legal framework

Prohibition of violence against children

Children in Bulgaria are protected from violence by a legal framework that prohibits and criminalises acts of violence, defined as set out above, in different settings, including generally, in the home, in schools, in the community and within the justice system.

The Penal Code criminalises violent acts and so by extension violence against children. Chapter Two of the Penal Code covers offences against the person and criminalises, among other offences, bodily harm (Section II), for which an offence against a minor is an aggravating factor (Article 131(4)). Article 187 of the Penal Code also criminalises torture of a child by a person under whose care the child has been placed, or whose upbringing has been assigned to him, unless this is a more serious crime considered elsewhere within the Penal Code.

In addition to the explicit prohibition and criminalisation of violence, Article 11 of the Child Protection Act states that:

- '(1) Each child shall have right to protection from involving into activities unfavourable for his physical, psychic, moral and educational development.
- (2) Each child shall have right to protection from methods of tuition impeding his dignity, from physical, psychic or other violence and forms of influence contravening with his interests.
- (3) Each child shall have right to protection from using for begging, prostitution, distribution of pornographic materials and receiving unlawful material incomes as well as from sexual harassment.'

Violence against children in the home in Bulgaria is prohibited under the Family Code (Article 125(2)), PADVA and Penal Code ().³⁰³ Article 125(2) of the Family Code states: 'The parent shall not use force, as well as methods of education, which lower the child's dignity....'. Under Article 3 of PADVA, someone who has 'suffered domestic violence' is enabled to seek protection from the Courts. This includes children who have witnessed domestic violence committed in their presence (Article 2(2) PADVA) and children who have experienced domestic violence directly themselves as perpetrated by their parents, relatives, former relatives, or partners or cohabitants of their parents or the

³⁰² CRC Committee, Concluding Observations on the combined third to fifth period reports of Bulgaria, 21 November 2016, CRC/C/BGR/CO/3-5, para. 31.

³⁰³ Article 187 Penal Code (1968, last amended 2017).

partner/cohabitant's parents or children.³⁰⁴ As set out earlier, the Penal Code contains a provision criminalising the torture of a child by a person who has care over the child, which would include violence within a home setting.³⁰⁵

In schools and other educational settings, Articles 128 and 129 of the Regulation on the Implementation of the National Education Act state that a teacher 'may not violate the rights of children and students, degrade their personal dignity, or apply any forms of physical or mental violence against them.'³⁰⁶ The Pre-School and School Education Act 2016 (PSSEA) prohibits corporal punishment by teachers and staff, requires children 'not to apply physical and psychological violence' and mandates support for non-violence within schools, for example under Article 174(1) institutions are required to develop and apply policies for 'positive discipline'.³⁰⁷ The Mechanism for Prevention of School Bullying among Children and Students at School supports the legal framework for the protection of children from bullying as a form of violence in a school setting.

Violence against children within the community in general is criminalised under Chapter Two of the Penal Code (1968, last amended 2017), which covers offences against the person, and criminalises, among other offences, bodily harm (Section II), for which an offence against a minor is an aggravating factor (Article 131(4)).

Children in conflict with the law

The Minimum Age of Criminal Responsibility in Bulgaria is set at 14 under Article 32(1) Penal Code (1968, last amended 2017), but children below this age 'who have committed social dangerous acts' are subject to corrective measures',³⁰⁸ which could mean that even young children could be punished under administrative-style provisions. However, according to the Global Initiative to End All Corporal Punishment of Children's country report on Bulgaria from August 2017, corporal punishment is not available as a sentence for a crime.³⁰⁹ However, legislation does not currently confirm that corporal punishment is prohibited in detention and other institutional settings for children who are in conflict with the law. Clarification is required to ensure that children in conflict with the law receive the same realisation of their right to be protected from violence as children who are not deprived of their liberty. There is also a need to recognise children who are in conflict with the law but who become children at risk due to ill-treatment within their placement. A policy or procedure specifically relating to this situation would secure their rights to have their circumstances reported and referred and to be treated as children in need of protection.

Child victims and witnesses

Children who are victims or witnesses are afforded protections under the Penal Procedure Code (the Act Protecting Persons Threatened in Relation to a Criminal Procedure, and the Child Protection Act. The Penal Procedure Code sets out provisions in relation to interrogating children who are victims or witnesses, including that children below the age of criminal responsibility would not be subject to

³⁰⁴ Article 3, Prevention of Domestic Violence Act 2009.

³⁰⁵ Article 187 Penal Code (1968, last amended 2017).

³⁰⁶ Global Initiative to End All Corporal Punishment of Children, Country Report for Bulgaria, <https://endcorporalpunishment.org/reports-on-every-state-and-territory/bulgaria/> [6-12-18].

³⁰⁷ Section 1 Additional Provisions of Pre-School and School Education Act 2016.

³⁰⁸ Article 32(1) Penal Code (1968, last amended 2017).

³⁰⁹ Global Initiative to End All Corporal Punishment of Children, Country Report for Bulgaria, <https://endcorporalpunishment.org/reports-on-every-state-and-territory/bulgaria/> [6-12-18].

criminal liability for making a false statement, but that they must provide truthful testimony (Articles 140 Penal Procedure Code and 290 of the Penal Code 1968, last amended 2017). This means that children under the age of 14 do not testify under threat of criminal sanctions should they lie. An amendment to the legislation is required to specify that their testimony should be given equal weight as that given under threat of criminal sanctions, in line with the child's age and maturity.

Under Article 15(1) and (2) of the Child Protection Act, it is mandatory for a child over the age of 10 to participate in a hearing affecting the child, unless it would be in the child's best interests not to participate. Article 15(2) allows for the child to participate 'depending on the degree of his development'. Again, this legislation could be amended to clarify that any child should be given the right to participate according to child's best interests and that their testimony should be granted weight according to the child's age and maturity.

2017 Amendments to the Penal Procedure Code provide for a range of special protection measures, including the use of videoconferencing and avoidance of contact between child witnesses and the accused, but do not explicitly prohibit face-to-face contact between child witnesses and the accused.³¹⁰ The Amendments also do not require a full individual assessment of the appropriate special measures that should be provided to each child witnesses, as mandated under Articles 22, 23 and 24 of Directive 2012/29/EU. Although Article 144(3) of the Penal Procedure Code (2006, last amended 2017) provides for individual assessments in relation to witnesses, limited information on how these should be undertaken is set out in the law or regulations, meaning that it is not clear whether such assessments would meet this Regional standard.³¹¹

Finally, according to a UNICEF report, although the legal framework provides for child victims and witnesses to have access to legal aid during proceedings, it is not clear that this provision is met in practice, leaving children vulnerable to rights violations during investigation and trial.³¹²

Child labour

The Penal Code criminalises the employment of a person under 18 years of age without a 'proper permit' (Article 192a), with aggravating sentencing factors if the child is below the age of 16 (Article 192a (2)). A more detailed legislative framework is found within the Labour Code, which sets out minimum ages of employment and work under the section 'Special Protection of Minors'. Provisions relating to hazardous work are particularly relevant to the protection of children from violence. These include: an exception to the minimum age for employment (set at above 16) such that persons aged 15-16 may engage in light work that is not hazardous or harmful to their health or development or detrimental to attendance at school or in training (Article 301(2)), and the prohibition of hazardous labour for 16-18 year olds (Article 303(1)). Article 304 of the Labour Code sets out prohibitions of work based on the conditions and potential impact upon the child, including, with measures relating to, for example, harm, hazards, noise, and exertion. Article 305 of the Code requires employers to take special care of children by appropriate positive work conditions, including by informing children, parents, carers of risks, by limiting working hours and by ensuring annual leave.

³¹⁰ UNICEF Bulgaria, *Violence against Children in Bulgaria: Analysis and Assessment of Legislation*, 2017, p. 4.

³¹¹ For discussion of this, see, UNICEF Bulgaria, *Violence against Children in Bulgaria: Analysis and Assessment of Legislation*, 2017, p. 5.

³¹² UNICEF Bulgaria, *Violence against Children in Bulgaria: Analysis and Assessment of Legislation*, 2017, p. 5.

Child trafficking, exploitation and sexual offences

In Bulgaria, trafficking of children is prohibited under Section IX of the Penal Code), Article 159a – 159c) and by the Law on Countering Trafficking in Human Beings. Section IIIIX of the Penal Code criminalises sexual offences, including offences against children, as well as different aggravating factors and sentencing guidelines, with offences against children and those involving abuse of power attracting higher sentences.

Child marriage

The Bulgarian Family Code sets the minimum age for marriage at 18 unless parental permission is granted, in which case those above the age of 16 may marry (Article 6, Family Code). In terms of criminalisation, Articles 190 to 192 of the Penal Code cover the regulation of forced marriage and cohabitation. However, these only criminalise acts relation to marriage and cohabitation, including forced marriage and cohabitation, when committed against children who are below the age of 16 (with aggravated circumstances and additional punishment for those under the age of 14). There is therefore an apparent gap with regards to children aged 16 and 17, who may not be afforded the same protection as those under the age of 16 in cases of forced marriage.

Child protection

The Child Protection Act contains several ‘special protections’ of children in a range of different circumstances, with the provisions setting out responsibilities of different Ministries and agencies in relation to these special protections. Article 4 lists a range of different forms of protection for children who require special protection, setting these out along a hierarchy of protection/intervention, such as Article 4(1) assistance, support and services in family environment; accommodation in a family of relatives or close friends (Article 4(2)), adoption (Art 4(3)); and foster care (Art 4(4)).

The CPA sets out a comprehensive list of child protection measures, which include:

- Protection in family environment (Article 23)
- Conceding of Protection Measures in Family Environment (Article 24)
- Grounds for decision in favour of accommodation outside of the family – including in cases of violence (Article 25, 26)
- Temporary accommodation by administrative order (Article 27)
- Accommodation by court order (Article 28)
- Foster care (Art 31, 32)
- Adoptive care (Article 34a)
- Resident care (Article 35)
- Police protection (Article 37)

11.3.2 Policy framework

The National Programme for Prevention of Violence and Abuse Against Children 2017-2022 (NPPVAC) (until 202) was the main policy document in Bulgaria that set out the context for child protection and violence against children, as well as a concrete programme for action to protect children from violence. This included clear responsibilities, duties and actions to be held and undertaken by a full range of bodies at all levels.

The NPPVAC set out its vision ‘based on an approach focusing on the rights of the child and not on welfare. It is based on the notion that securing the dignity and physical and psychological integrity of

children as right holders, including the non-negotiable right to protection, instead of just regarding them as “victims”, is a top priority in the sphere of prevention and response policy on violence among children. The Programme provides for analysis, performance monitoring of activities planned and ex post evaluation of progress to be carried out.’

The basic principles of the NPPVAC were:

- Respect for the right of children to have their best interests be a primary consideration in all matters involving or affecting them, especially when they are victims of violence;
- Children’s rights to be heard and to have their views given due weight, which shall be respected systematically in all decision-making processes, and their participation shall be central to this Programme;
- Respect for the primary position of families in child caregiving and protection, as well as for prevention of violence; and
- Securing children’s fundamental rights to respect for their human dignity and physical and psychological integrity, through a focus on the general (primary) prevention of all forms of violence realised through the social service system, public health, education and other approaches.

The NPPVAC’s Strategic Objectives were:

1. Increasing efficiency of measures for child protection against violence
2. Establishment of an effective system for prevention of domestic violence against children
3. Prevention of sexual violence, sexual abuse and sexual exploitation of children
4. Prevention of any form of child abuse
5. Prevention of child abuse in the educational system
6. Creation and development of various services, models and tools for violence prevention and work with children who are victims or perpetrators of violence
7. Enhancement of the capacity of the professionals working with children and improvement of the interinstitutional cooperation and coordination
8. Raising the awareness and improving society’s sensitivity on questions related to violence against children

11.3.3 Institutional framework

According to Article 6 of the Child Protection Act, child protection in Bulgaria is implemented by the following agencies:

- The Chairman of the State Agency for Child Protection (Article 6(1));
- Municipal services for social support (also referred to as the ‘directorate “Social Support”’) (Article 6(2)); and
- Ministry of Labour and Social Policy, Ministry of Interior, Ministry of Education and Science, Ministry of Justice, Ministry of Interior, Ministry of Culture, Ministry of Health and the mayors of the municipalities (Article 6(3))

Article 6(a) of the Act sets out the ‘Liabilities of the Protection Bodies referred to in Article 6, item 3’ as follows:

- To develop and participate in the state policy on child protection. (Article 6(a)(1));

- To take part in the implementation and accounting of the National Strategy for Children and the National Child Protection Programme. (Article 6(a)(2)); and
- Jointly with the Chairman of the State Agency for Child Protection, to work out a coordination mechanism for interaction in accordance with their competences in the sphere of child protection in order to ensure an effective prevention and control system regarding children's rights. (Article 6(a)(3)).

Article 6(a)(4) then goes on to set out responsibilities for each agency. These are set out in more detail in the subsequent sub-sections of this report.

The new Social Services Act entered into force on 1st July 2020 with the objectives of formalising the State regulation and funding of integrated social services; improving the quality and effectiveness of social services (through the establishment of a new agency for quality assurance and the registration and licencing of social services), and promoting and developing new public-private partnerships in the provision of social services. The Social Services Act establishes a new agency, the Agency for the Quality of Social Services, described in more detail below.

National level child protection bodies

Under the Child Protection Act (CPA), the Ministry of Labour and Social Policy (MLSP) is responsible for managing, coordinating and controlling the implementation of the social policy of the state in relation to children and families generally. The MLSP's responsibilities also include working with civil society to support implementation of child protection policy, and to support implementation of policy surrounding children and families. The MLSP is also responsible for facilitating efforts to support responsible parenthood, and family cohesion, as well as for the development of laws, policies and action plans relating to children and families.³¹³

The State Agency for Child Protection (SACP) is responsible for developing, implementing and observation/ analysis of state policy for child protection, alongside other ministries/agencies and for guidance of child protection departments, directors for social support and for providing other guidance on child rights to relevant agencies.³¹⁴ It is also responsible for the inspection of children's rights in social service settings and for establishing and running a national helpline for children.³¹⁵

The State Agency sets out regulations for the structure, organisation and activity of the National Council for Child Protection (NCCP) and manages the activities of the NCCP.³¹⁶ According to Article 18 of the CPA, the NCCP has consultative and coordination functions in relation to child protection in Bulgaria.

The new Social Services Act establishes an Agency for the Quality of Social Services which takes over some of the responsibilities of the State Agency for Child Protection regarding the control and monitoring of social service provision and is responsible for setting criteria and standards for social services. The Agency for the Quality of Social Services exercises control and monitoring of the provision of social services, licenses the providers of social services, proposes standards and criteria for efficient, high-quality social services, gives methodological support for observing these standards

³¹³ Article 6a(4)1 Child Protection Act 2000, last amended 2017.

³¹⁴ Article 17a(1-3) Child Protection Act 2000, last amended 2017.

³¹⁵ Article 17a(14-17) Child Protection Act 2000, last amended 2017.

³¹⁶ Article 17a(12-13) Child Protection Act 2000, last amended 2017.

and criteria, and develops criteria to analyse good practices in the provision of high-quality social services, select such practices and propose their approval at national level.³¹⁷

The Ministry of the Interior (MOI) has a number of responsibilities in relation to violence against children and child protection, as set out under Article 6a(2) of the CPA. This includes the provision of police protection of children, specialised protection of children in public places and border control as it relates to child protection. Under Article 39 of the CPA, the MOI is responsible for Police Protection Measures, which include special, protective accommodation of children, including protective custody that secures their protection from parents, if necessary.

The Ministry of Justice supervises activities relating to international adoption and ensures that children who are deprived of their liberty are protected while in detention.³¹⁸ The Ministry of Justice also has oversight over the justice system, through which children in contact with the law as victims or witnesses would be processed.

The Ministry of Education and Science (MOES) is responsible for policy and practice surrounding violence against children in schools and educational institutions, including those set out within the Pre-School and School Education Act 2016. Under the CPA the MOES has the responsibility to ensure the safety of children in state schools and kindergartens in the system of pre-school and school education.³¹⁹

The Ministry of Health (MOH) is responsible for the care and protection of children, including medical care and protection.³²⁰ Under the 'Ordinance For The Conditions And The Order Of Implementing Measures For Prevention Of Abandoning Children And Their Accommodation In Institutions, As Well As Their Reintegration' (2003), health officials also have responsibilities with regards to children at risk of abandonment and children in specialised institutions.³²¹ The MOH's actions as part of the coordination of child protection bodies are set out in the coordination mechanisms and include the provision of free forensic medical examination to child victims, which includes the issuance of forensic medical certificates.³²²

The Ministry of Culture also has a role to place in the protection of children from violence and in relation to the child protection system, focusing on policy relating to culture as it relates to 'the mental, spiritual, moral and social development of children; and as it is linked to the safety of children in schools'. This would include, for example, regulations on media and art as it affects children.³²³

Local level child protection bodies

The Child Protection Act places a responsibility upon the mayors of municipalities to 'ensure the implementation of state policy on child protection in the municipality and coordinate the child protection activities on a regional level', to ensure that children within the municipalities are

³¹⁷ Article 22(3), Social Services Act, last amended August 2020

³¹⁸ Article 6a(4)(4) Child Protection Act 2000, last amended 2017.

³¹⁹ Article 6a(4)(3) Child Protection Act 2000, last amended 2017.

³²⁰ Article 6(a)(4)(7) Child Protection Act 2000, last amended 2017.

³²¹ Article 9 Ordinance For The Conditions And The Order Of Implementing Measures For Prevention Of Abandoning Children And Their Accommodation In Institutions, As Well As Their Reintegration (2003).

³²² Procedure for interaction upon notification of child abuse or child at risk of abuse, provided by UNICEF Bulgaria, 2017.

³²³ Article 6(a)(4)(6) Child Protection Act 2000, last amended 2017.

protected and are safe, including in school settings and other municipal institutions, and to work with civil society within the municipality to ensure that children are protected, and to help civil society organisations to develop and implement child protection policies for their work with children.³²⁴

The Social Assistance Directorates (SAD), also termed ‘Directorate “Social Support”’ in some legislative and policy documents, are specialised bodies tasked with the implementation of national (and local) policy relating to child protection at the municipal level. The Directorate “Social Support” receives child protection referrals, including from the SACP, and is responsible for handling such cases from the point of referral onwards. Under the ‘Ordinance For The Conditions And The Order Of Implementing Measures For Prevention Of Abandoning Children And Their Accommodation In Institutions, As Well As Their Reintegration’ (2003), the Directorate “Social Support” is required to follow up on children ‘for whom a risk exists of abandoning or accommodation in a specialised institution’.³²⁵

Child Protection Departments sit under the Agency for Social Assistance within each municipality (within the Social Assistance Directorates, as required by Article 20 of the CPA).³²⁶ According to reports, staff at the Child Protection Departments (CPD) include professional social workers, who are responsible for ‘all local social problems’, including child protection matters. Social workers are unlikely to have received child-specific training, and ‘are considerably burdened by their various activities’.³²⁷

Finally, Child Support Commissions are provided for under Article 20a of the CPA and are intended to function as a consultative and coordination body that links ‘the municipal administration, the district directorate of the Ministry of Interior, the regional education administration, the health inspectorates, directorate “Social support”, the local commissions for fighting the antisocial acts of minors and underage, as well as of non-profit legal persons and others’ in order to conduct and coordinate activities related to child protection.

Service providers

Specialised institutions have an obligation to protect children from violence, as set out under Article 8a of the CPA, a provision that was added in 2009 to govern the ‘duties and obligations of the managing bodies of specialized institutions in the sphere of resident social services and social services within the Community’. This Article also contains provisions relating to competency and safeguarding in relation to employees, as well as notification requirements in relation to educational assessments and disciplinary action towards staff.

Providers of child social services must also take action, as part of their presumed service delivery and as part of the coordination of child protection bodies to provide ‘necessary professionals to render psychological and/or social support to the abused child’ and to provide services to children ‘in due time’, including a residential-type service in case of removal from the family as a protection measure.

³²⁴ Article 6(a)(4)(8) Child Protection Act 2000, last amended 2017.

³²⁵ Article 8(1) Ordinance For The Conditions And The Order Of Implementing Measures For Prevention Of Abandoning Children And Their Accommodation In Institutions, As Well As Their Reintegration (2003).

³²⁶ Institut International Des Droits De L’Enfant, Gap Analysis of the Bulgarian Juvenile Justice System, 2014, p 41.

³²⁷ Institut International Des Droits De L’Enfant, Gap Analysis of the Bulgarian Juvenile Justice System, 2014, p 41.

These obligations are set out within the child protection coordination mechanism, though it is not clear from where funding for such services would be drawn.³²⁸

Cooperation, coordination and procedures

Cooperation and coordination among the above-mentioned agencies are essential to the protection of children from violence, including through protection and response to violence against children. Article 7 of the CPA sets out an 'obligation for cooperation', which is essentially a list of the duties for cooperation among agencies and professionals in relation to reporting, referral and handling child protection concerns. Crucially, this also establishes a mandatory reporting requirement that places an obligation on any person who 'knows' that a child is in need of protection to report this to the appropriate authorities:

- (1) A person who knows that a child needs protection shall be obliged immediately to inform the directorate "Social support", the State Agency for Child Protection or the Ministry of Interior;
- (2) The same obligation applies even if the person is bound by professional confidentiality;
- (3) Upon receipt of notification in the State Agency for Child Protection that a child needs protection, the chairman shall immediately forward it to the Child Protection Department of the Directorate "Social Support" at the current address of the child;
- (4) Upon receipt of notification which concerns the activity of another institution, the case shall be forwarded to the relevant institution;
- (5) The central and territorial bodies of the executive authority and the specialised institutions for children shall be obliged to render timely assistance and to submit information to the State Agency for Child Protection and to Directorates "Social support" in fulfilment of their official duties under conditions and by an order determined by the Protection of Personal Data Act.³²⁹

A complete set of child protection procedures is set out in the document 'Responsibilities of the child protection authorities at central and local level and the rest of the parties involved under the Coordination mechanism for interaction in addressing cases of child abuse or children at risk of abuse and for interaction in crisis intervention'. The latest amendments to the Child Protection Act legislate for the Coordination Mechanism in Case of Violence, stipulating that a multidisciplinary team should be created to provide protection for a child at risk of or victim of violence or exploitation.³³⁰ The procedure is as follows:

Step/ Action	Agencies/staff involved
1. Notification of abuse	SAD/Child Protection Departments; SACP; MOI
2. Other authorities informed within an hour	
3. Notification sent to the child's current address	

³²⁸ Procedure for interaction upon notification of child abuse or child at risk of abuse, provided by UNICEF Bulgaria, 2017.

³²⁹ Article 7 Child Protection Act, 2000 last amended 2017.

³³⁰ Article 36(d) and Article 36(e) Child Protection Act 2000, last amended 2020

4. Caseworker designated	The Head of SAD/ Child Protection Departments (CPD)
5. Investigation conducted within 24 of receipt of notification	CPD Caseworker
6. Following investigation, if risk is identified and a case opened, a report is sent to the multidisciplinary team	Mayor of the municipality, the district or locality; Regional Police Department (MOI); Regional Healthcare Centre and other healthcare professionals; Regional Education Inspectorate and other education professionals; Local Committee for Combating Anti-social Behaviour of Minors and Underage Children; district judge, district prosecutor, managing body of a resident-type and other social services, as deemed appropriate by SAD/CPD.
7. Convene by phone as soon as possible, within 24 hours, a working meeting of the multidisciplinary team	CPD Caseworker
8. Goals set and action plan drawn up	Multi-disciplinary team
9. Each team member proposes (and accepts) a task to be carried out by them	Multi-disciplinary team

In the case of a critical event or situation such as a terrorist act or a life-threatening natural disaster, a crisis intervention group should be convened by the SACP to secure the provision of urgent psychological support to children affected by the situation.³³¹

11.4 Conclusions

The legislative and policy framework around the prevention of and response to violence against children in Bulgaria is largely compliant with international and regional standards and best practices. It is clear that concerted efforts have been made with recent legislative and policy developments to close gaps and bring the framework into line with Bulgaria's legal obligations as a State Party to a number of international instruments and as a Member State of the European Union. Nonetheless, some small concerns remain, both in terms of the legislative and policy framework, and in relation to implementation of this. Some legislative gaps remain around the prohibition of corporal punishment in detention and other institutional settings for children who are in conflict with the law, the rights of children who are in conflict with the law but become children at risk due to ill-treatment in their placement, child victims and witnesses' right to be heard, and the forced marriage of 16 and 17-year-olds.

Despite general compliance with international and regional standards and best practices, it is important to note that the implementation of this legislative framework is key to the realisation of children's rights to protection from violence. Though the institutional framework itself contains a full

³³¹ Responsibilities of the child protection authorities at central and local level and the rest of the parties involved under the Coordination mechanism for interaction in addressing cases of child abuse or children at risk of abuse and for interaction in crisis intervention, provided by UNICEF 2017.

range of bodies and institutions tasked with the requisite activities to prevent and respond to violence against children, it is most important that these bodies have the financial and human resources to fulfil their roles and responsibilities, including through trained, specialised staff and service providers.

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