

"Hope For Children" CRC Policy Center

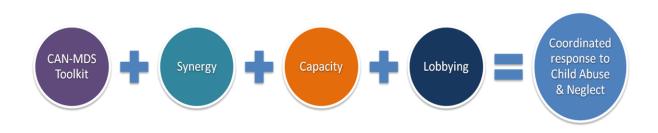
Reporting on CAN-MDS II pilot implementation at a national level



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The CAN-MDS II project:

As set out in the UNCRC, ratified by most countries in the world, all children have the right to protection from all forms of violence (Article 19). Realization of this right requires concerted effort, effective procedures, and coordination and cooperation by child protection relevant sectors. Reporting of suspected or known child abuse and neglect (CAN) cases by professionals working with children is the first step toward protecting children from future victimization. level, including of services to a Follow-up а case child-victim provided at bv agencies from various sectors, is the next step for avoiding re-victimization. Aggregated CAN data are essential to identify trends, measure responses, feed into policy development and inform prevention, identification, reporting, referral, investigation, treatment, judicial involvement and follow-up of cases.

In this context the CAN-MDS System was developed to strengthen speedy coordination and cooperation among professionals *at a case-level*, namely to be used as a *ready-to-use* tool for improving multi-disciplinary and inter-sectoral cooperation by facilitating appropriate information sharing among professionals, reporting, follow-up and prevention of re-victimization. In parallel, *at a population-level* the system aims to operate as a mechanism for collecting uniform, reliable and comparable epidemiological data for incidence of reported CAN cases and changes in the magnitude of the problem over time at local, national and international levels.

About the pilot implementation in Cyprus:

In the framework of the CAN-MDS II project, "Hope For Children" CRC Policy Center was responsible for organizing and delivering the trainings to professionals working in different agencies and institutions in Cyprus regarding the platform.

For the purpose of the implementation of the platform, Hope For Children CRC Policy Center together with Social Welfare Services presented the project and the objectives of CAN-MDS II: Joining forces to more effectively protect children from abuse and neglect' (www.can-mds.eu). The program aims to provide case-level follow-up, including services to children to prevent repeated victimization.

The organisers then presented the role of the Intersectoral Board (representing services/sectors, providing information and supporting the piloting of the CAN-MDS system). It was clarified that the CAN-MDS Board members are not directly responsible for managing any aspects of the System but for providing support and sectoral guidance to the National Administrative Authority. It is worth noting that the terms of reference proposed by the organizers for signature



are not legally binding but represent values, approaches and objectives related to children's rights and their protection from all forms of violence.

At the end of the meeting, the stakeholders and agencies requested time to discuss with their agencies the possible signing of the terms of reference for the establishment of the Intersectoral Board.

One more inter-sectoral meeting is planned to be delivered in a later stage, as the platform will be implemented in the following months after the end of the project, in a total of 6 months, as agreed with project's coordinators. In the following meeting is planned to discuss about the potential problems.

A skype meeting scheduled and delivered with the project coordinator's, involving the local coordinator and the technical staff in order to support the national team in regards of the platform technical issues while the piloting phase.

From the professionals trained, 34 accounts were created from the national coordinator for the professionals of HFC in order for the piloting phase to start. After their accounts were created, each one receive their credentials along with further instructions in order to start adding their new cases on the platform.

All the professionals added again some mock cases in the guidance of the HFC project's team as their trainings were delivered online. In continuation, three cases were added to the platform, for three different child IDs.

The first case added in the platform on 23/06/2021 referring to "A "distinct" event took place – Not continuous maltreatment". The second case added on 28/06/2021, referring to "Continuous maltreatment – including distinct event(s)" and the third cases added on 30/06/2021, referring to "A "distinct" event took place – Not continuous maltreatment".

Even though the piloting phase started in a national level, the cases added by now are from Nicosia regional offices.

The sectors involved in the piloting phase are the Children's House, which handles the investigation of cases of children sexual abuse, with therapy included, and the Foster department which deals with the home replacement of children.

In regards to the system and its understanding of the professionals, even though not all of them had real cases to add, they tried to navigate in the platform using mock cases (taking into account their previous cases) in order to be able to give their feedback. They said that at the beginning it



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was a bit confusing as some of the choices were not translated or were placed twice using different terms. However, on that we informed the project's coordinators and they work on that.

Moreover, they found that there are many options under each category and they mentioned that even though at this point it seems confusing, they believe that once they learn the platform this would be very helpful on extract exact data as the professionals don't need to write something, thus won't use different terms for the same issue.

Added to that, they said that the platform is easy to navigate as it's step by step and it's not confusing.

They mentioned the importance of the Operator's Manual as this helped them to understand the terms were written solving any confusions.

About any technical problems they didn't face any of them by now, but they said that this might be because the platform is not overloaded yet and they share their concerns on that regarding the host proxy. This is something we keep in mind for the future.

After the piloting phase, the project team plans to continue with the comparison of the data and to collect the feedback of the professionals through focus groups in order to fix any issue.

Overall, the professionals involved in the piloting phase of the CAN-MDS II platform were particularly satisfied of this initiative and interested to see the results of this new reporting mechanism built within the framework of the project.

Conclusion

The pilot implementation of the CAN-MDS II project in Cyprus proved to be both challenging and stimulating. The feedback provided by the professionals that participated in the different stages of the project will serve as a guide to improve the current mechanism. Yet, as the piloting phase did not finish due to the delay of the situation with the pandemic, the project team engaged with the professionals to continue the piloting phase in a total of six months.

