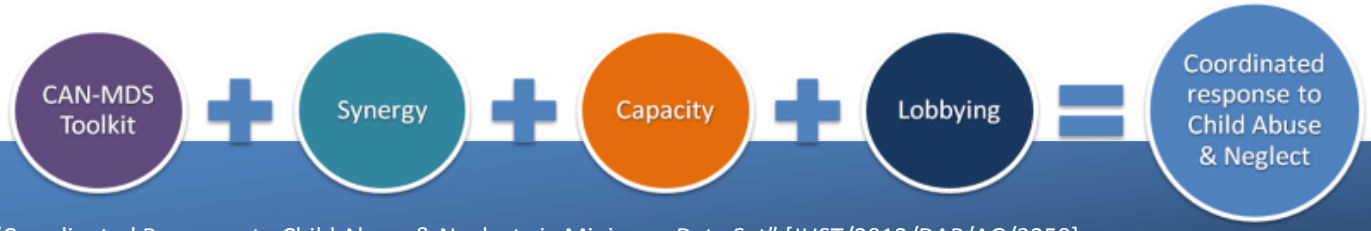
*With financial support from the DAPHNE III Programme of the European Union*

# D3.3 Methodology for cultural adaptation of national CAN-MDS Toolkits

# Coordinated Response to CAN via MDS

The current document was prepared on the basis of Annex I "Project Description and Implementation of the Project JUST/2012/DAP/AG/3250 (2011-2012)" submitted and approved under the Priority "Rights of Victims (RoV)" of the DAPHNE III Programme of the European Union

*Partnership and Any stakeholder interested to develop CAN-MDS*



## Project's Information

| | |
|---|---|
| **Project's Title** | Coordinated Response to Child Abuse & Neglect (CAN) via Minimum Data Set (MDS) |
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## Deliverable's Information

| | |
|---|---|
| **Workstream** | Workstream 3<br>Creating Synergies – Building of national CAN-MDS Core Groups of Operators |
| **Activity** | Activity 4: Translation of CAN-MDS Toolkit in partners' official languages (Bulgarian, Belgian, German, Greek, French, Italian and Romanian) |
| **Deliverable No.** | Deliverable D3.3 |
| **Drafted** | A. Ntinapogias, Project Coordinator with the contribution of Project's Partners |
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| **Target group** | Partners and any stakeholder interested in developing a CAN-MDS |

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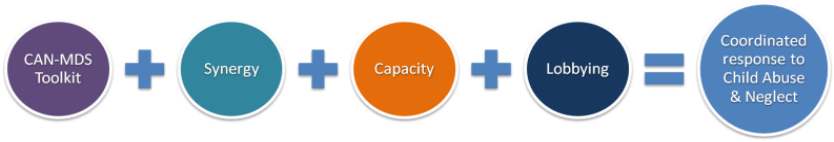


This Guide is part of the CAN-MDS Toolkit prepared in the context of DAPHNE III Programme "Coordinated Response to Child Abuse & Neglect (CAN) via Minimum Data Set (MDS)"

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# National Adaptation of CAN-MDS Toolkit

## *why needed*

The CAN-MDS promotes the usage of a standard set of variables in order to collect comprehensive, comparable and reliable data among stakeholders deriving from different sectors within and among countries.

On the other hand, however, there are given differences among countries that should be handled in order for the CAN-MDS to be feasible to be applied in practice.

First, it is not possible for the system to operate in a single language; this makes translation of the whole toolkit imperative.

In addition, there are data elements such as agencies and operators to be involved that should be developed on the basis of the reality of each country.

Next, country profile reports showed differences in terms of already available infrastructures, practices, policies and legislation in regards to CAN cases administration; adaptation taking into account such country specifics should be made in order for the data elements to target valid and reliable data collection.

Lastly, content validity of the definitions of data element should be ensured for each individual data element, without however to modify the structure of the MDS. Instructions and definitions should be appropriate for all target groups (i.e. CAN-MDS operators with different professional backgrounds and responsibilities in the route of CAN cases administration), in order useful data to be collected and the collected data to be useful for all stakeholders.

## *which parts should be adapted in which way*

Operator's Manual, e- application and Data collection protocol are the main components of CAN-MDS Toolkit. Supportive material for the Toolkit includes the eligibility criteria for Sectors and Operators and methodology for identifying the eligible data sources, the capacity building package (training module, training material, Trainer's Guide and evaluation methodology and tools) and the country profile reports, including up-to-date information for CAN related aspects (such as available infrastructures, legislation and ethics) at a national level.

From the above mentioned material methodology for national adaptation targets in CAN-MDS Toolkit, namely the Operator's Manual, e-application and Data collection protocol. Adaptation includes translation from EN to national official languages, development of content on the basis of national data, addition of country specific information and references and cultural adaptation of content on the basis of focus group discussions.

Tables 1 and 2 below suggests detailed adaptation to be used for each individual part of the toolkit

## *how to adapt the CAN-MDS Toolkit into National version*

**Translation**

World Health Organization in its document entitled *Process of translation and adaptation of instruments*[1] mentions that "*the aim of this process is to achieve different language versions of the English instrument that are conceptually equivalent in each of the target countries/cultures. That is, the instrument should be equally*

[1] World Health Organization. Process of translation and adaptation of instruments Available at: http://www.who.int/substance_abuse/research_tools/translation/en/

*natural and acceptable and should practically perform in the same way. The focus is on cross-cultural and conceptual, rather than on linguistic/literal equivalence. A well-established method to achieve this goal is to use forward-translations and back-translations*".

It is noted that in the context of the project only forward translation is provisioned (in terms of financial resources); it is suggested, however, that small samples of the material to be back-translated in order to be ensured the conceptual equivalent of the national version of the toolkit to English toolkit.

As for the forward translation, the recommendations that included in the above mentioned document are valid also for the case of CAN-MDS Toolkit. In this case the translator should preferably be a professional familiar with terminology of the area of child maltreatment and epidemiological surveillance; s/he should be knowledgeable of the English-speaking culture but his/her mother tongue should be the primary language of the target culture. National coordinator in each country should provide the translator with instructions in regards to the approach to translate such as to emphasize conceptual rather than literal translations, as well as the need to use natural and acceptable language for the CAN-MDS groups of operators, which are in fact heterogeneous.

World Health Organization suggests that the following general guidelines should be considered in this process:

- *Translators should always aim at the conceptual equivalent of a word or phrase, not a word-for-word translation, i.e. not a literal translation. They should consider the definition of the original term and attempt to translate it in the most relevant way.*
- *Translators should strive to be simple, clear and concise in formulating a question. Fewer words are better. Long sentences with many clauses should be avoided.*
- *The target language should aim for the most common audience. Translators should avoid addressing professional audiences such as those in medicine or any other professional group. They should consider the typical respondent for the instrument being translated and what the respondent will understand when s/he hears the question.*
- *Translators should avoid the use of any jargon. For example, they should not use:*
  - *technical terms that cannot be understood clearly; and*
  - *colloquialism, idioms or vernacular terms that cannot be understood by common people in everyday life.*
- *Translators should consider issues of gender and age applicability and avoid any terms that might be considered offensive to the target population.*

Related sources:
World Health Organization (1991). Guidelines for Translation & Adaptation of the Manual "Training in the Community for People with Disabilities". WHO/RHB/91.1. Geneva
CAMH. Culture Counts: A Guide to Best Practices for Developing Health Promotion Initiatives in Mental Health and Substance Use with Ethnocultural Communities. Culture Counts: A Roadmap to Health Promotion
Chavez, L.M., Canino, G., (2005). Toolkit on translating and adapting instruments. Human Services Research Institute, Cambridge.[2]

[2] Available at: http://www.hsri.org/files/uploads/publications/PN54_Translating_and_Adapting.pdf

# Table 1. Development of National CAN-MDS Toolkit

| | Translation | Content (FG) | Country specific info | Completion/inclusion of new information |
|---|---|---|---|---|
| **e-CAN-MDS** | **Translation** | | | **Working files 1, 2, 5, 6, 8, 11** |

| | Translation | Content (FG) | Country specific info | Completion/inclusion of new information |
|---|---|---|---|---|
| **Data Collection Protocol** | **Translation** | | **Where needed** | **Screenshots of translated e-CAN-MDS** |

| **Operator's Manual** | Translation | Content (FG) | Country specific info | Completion/inclusion of new information |
|---|---|---|---|---|
| **PART 1: Introducing the CAN-MDS** | Translation | - | - | - |
| **Introductory Note** | Translation | - | 1st paragraph-If needed | - |
| **Background** | Translation | - | - | - |
| ***Child maltreatment data collection – a common necessity worldwide*** | Translation | - | - | - |
| ***Documenting the necessity for CAN-MDS implementation in [COUNTRY]*** | - | - | Based on country profile report | Country name |
| ***Further reading*** | Translation | - | Link to country profile report | Country name/ reference/ link |
| **Coordinated Response to Child Abuse & Neglect via a Minimum Data Set - *at a glance*** | Translation | - | - | - |
| **CAN-MDS v1.0 - *aim and objectives*** | Translation | - | - | - |
| **CAN-MDS Toolkit - *at a glance*** | Translation | - | - | - |
| **Structure of the CAN-MDS Toolkit** | Translation | - | - | - |
| **CAN-MDS Operators: *eligibility criteria, prerequisites & roles*** | Translation | - | - | - |
| **Who can become a CAN-MDS Operator and How?** | Translation | - | - | - |

| Operator's Manual | Translation | Content (FG) | Country specific info | Completion/inclusion of new information |
|---|---|---|---|---|
| ***Eligibile professional backgrounds*** | Translation | - | Modify-if needed | - |
| ***Prerequisites for an eligible professional to become CAN-MDS Operator*** | Translation | - | - | - |
| ***Roles of stakeholders as defined by the assigned Level of Access to CAN-MDS*** | Translation | - | Modify Table 1.2 Core Groups and Expanded Groups -if needed | Working file 8 (national administrator) |
| ***What a CAN-MDS Operator can contribute to CAN-MDS*** | Translation | - | - | - |
| ***What CAN-MDS can provide to a CAN-MDS Operator*** | Translation | - | - | - |
| **Eligible incidents for CAN-MDS - *case definitions*** | Translation | - | - | - |
| **Child Maltreatment Incident** | Translation | - | - | - |
| **Child (alleged) victim** | Translation | - | - | - |
| **Defining Child Maltreatment** | Translation | - | - | - |
| **Means to overcome the definitions-related obstacle** | Translation | - | - | - |
| ***Use of common conceptual definitions*** | Translation | - | - | - |
| ***Operationalization of conceptual definitions*** | Translation | - | - | - |
| ***Training of Professionals before they become Operators*** | Translation | - | - | - |
| ***Trainers & Trainees for a training cascade process*** | Translation | - | - | Provide the number of core group members &working file 9 |
| ***Content of the Training workshops*** | Translation | - | - | - |
| ***Learning objectives*** | Translation | - | - | - |
| **Ethics in CAN-MDS - *privacy and confidentiality considerations*** | Translation | - | - | - |
| **Existing CAN surveillance mechanisms** | - | - | according to country profile report and working file 13 | - |
| **Privacy of personal data: national Legislation** | - | - | Define according to country specifics | - |

| Operator's Manual | Translation | Content (FG) | Country specific info | Completion/inclusion of new information |
|---|---|---|---|---|
| **CAN-MDS Stakeholders, Operations, Tasks and Responsibilities** | Translation of Figure 1.2 | - | - | - |
| | | - | | |
| **PART 2: the Operator's Guide** | Translation | - | - | - |
| **Guide for Operators - *purpose and structure*** | Translation | - | - | - |
| **CAN-MDS v1.0 - *axes*** | Translation | - | - | - |
| **Axis: RECORD** | Translation | - | - | - |
| **Axis: INCIDENT** | Translation | - | - | - |
| **Axis: CHILD** | Translation | - | Modify definition-if needed- for individuals>18 | - |
| **Axis: FAMILY** | Translation | - | Define family according to national law | - |
| **Axis: SERVICES** | Translation | - | - | - |
| **CAN-MDS v1 - *data collection and data reporting*** | Translation | - | - | - |
| **Entering new data in the CAN-MDS** | Translation | - | - | - |
| ***CAN-MDS data entry*** | Translation | - | - | - |
| ***CAN-MDS data reporting*** | Translation | - | - | - |
| ***CAN-MDS data extraction*** | Translation | - | - | - |
| **CAN-MDS Flowchart** | Translation | - | - | - |
| **Data elements in the Operator's Guide - *outline of presentation*** | Translation | - | - | - |
| **Attributes per data element (DE)** | Translation | - | - | - |
| ***Agency's ID*** | Translation | - | - | Develop national Agencies' IDs [Annex II] (working files 1, 6) |
| ***Operator's ID*** | Translation | - | - | Develop national operators' IDs, working file 2, 9-11 |
| ***Date of Record*** | Translation | - | - | - |
| ***Source of Information*** | Translation | - | "definitions": | "definitions": all |

| Operator's Manual | Translation | Content (FG) | Country specific info | Completion/inclusion of new information |
|---|---|---|---|---|
| | | | to be indicated who are mandate to report working file 10 | codes involving "personnel" to be nationaly defined, working file 5 |
| ***Incident ID*** | Translation | - | - | - |
| ***Date of Incident*** | Translation | - | - | - |
| ***Form(s) of maltreatment*** | Translation | - | - | - |
| ***Location of Incident*** | Translation | - | - | - |
| ***Child's ID*** | Translation | - | Modify format & values, if needed | Working file 7, working file 8 |
| ***Child's Sex*** | Translation | - | Modify format & values, if needed | - |
| ***Child's Date of Birth*** | Translation | - | - | - |
| ***Child's Citizenship Status*** | Translation | - | part "definitions": to be adapted according to national law | - |
| ***Family Composition*** | Translation | - | - | - |
| ***Type of family*** | Translation | - | - | - |
| ***Family members*** | Translation | - | - | - |
| ***Number of members per identity*** | Translation | - | - | - |
| ***Indication of Primary caregiver(s)*** | Translation | - | - | - |
| ***Primary Caregiver(s)' Relationship to Child*** | Translation | - | - | - |
| ***Primary Caregiver(s)' Sex*** | Translation | - | Modify format & values, if needed | - |
| ***Primary Caregiver(s)' Date of Birth*** | Translation | - | - | - |
| ***Institutional Response*** | Translation | - | - | - |
| ***Referral(s) to Services*** | Translation | - | - | sub-list per type of service will auto- |

| Operator's Manual | Translation | Content (FG) | Country specific info | Completion/inclusion of new information |
|---|---|---|---|---|
| | | | | created upon the creation of agencies' IDs |
| ***Focus of Referral*** | Translation | - | - | - |
| ***Services' Response*** | Translation | - | nationaly defined time period, e.g. two-week | - |
| **Overview of DE attributes** | Translation | - | - | - |
| **CAN-MDS - *feedback to the Operator*** | Translation | - | - | - |
| **PART 3: CAN-MDS technical specifications** | Translation | - | - | - |
| **CAN-MDS Data Dictionary** | Translation | - | - | - |
| **Introductory note** | Translation | - | - | - |
| **Structure of the CAN-MDS Data-Dictionarry** | Translation | - | - | - |
| **Limitations** | Translation | - | - | - |
| **CAN-MDS V.01 Data Dictionary – *description of DE permissible values*** | Translation | - | - | - |
| **RECORD** | Translation | - | - | - |
| **DE_R1** | Translation | - | - | for develop IDs see working file 1 |
| **DE_R2** | Translation | - | - | for develop IDs see working file 2 |
| **DE_R3** | Translation | - | - | - |
| **DE_R4** | Translation | - | - | - |
| **INCIDENT** | Translation | - | - | - |
| **DE_I1** | Translation | - | - | - |
| **DE_I2** | Translation | - | - | - |
| **DE_I3** | Translation | I3_A_2.1 (law(s) on corporal punishment)<br>I3_A_2.5 (law(s) on institutional/detention measures)<br>I3_A_3 (legal age of consensual sexual activities)<br>I3_A_3.1 (law(s) on sexual crimes)<br>I3_A_3.2 (law(s) on children's sexual exploitation)<br>I3_A_4.2.02 (law(s) on legal age for salaried work)<br>I3_A_4.3.01 (law(s) on domestic violence) | | |

| Operator's Manual | Translation | Content (FG) | Country specific info | Completion/inclusion of new information |
|---|---|---|---|---|
| **DE_I4** | Translation | I3_B_3 (provisions for parental rights to refuse/ withhold medical care for religious/ cultural reasons) I3_B_3.01 (provisions for vaccinations) See working file 3 (vaccinations) I3_B_4 (provisions for mandatory school attendance) See working file 4 (school attendance) | | |
| **CHILD** | Translation | - | - | Working file 7 |
| **DE_C1** | Translation | - | - | - |
| **DE_C2** | Translation | - | - | - |
| **DE_C3** | Translation | - | C3_02, C3_03, C3_04 (country specific) | - |
| **DE_C4** | Translation | - | C4_01, C4_01.1, 2 (country specific) | - |
| **FAMILY** | - | - | Country specific definition | - |
| **DE_F1** | Translation | - | - | - |
| **DE_F1.A** | Translation | - | - | - |
| **DE_F1.B1** | Translation | - | - | - |
| **DE_F1.B2** | Translation | | - | - |
| **DE_F1.C** | Translation | - | - | - |
| **DE_F2** | Translation | - | - | - |
| **DE_F3** | Translation | - | - | - |
| **DE_F4** | Translation | - | - | - |
| **SERVICES** | Translation | - | - | - |
| **DE_S1** | Translation | - | - | - |
| **DE_S2** | Translation | - | - | Lists of agencies |
| **DE_S2.1** | Translation | - | - | - |
| **DE_S2_A** | Translation | - | description of standards for services' provision | |
| **CAN-MDS V.01 *-terms and definitions*** | See **Table 2** below | | | |

| Operator's Manual | Translation | Content (FG) | Country specific info | Completion/inclusion of new information |
|---|---|---|---|---|
| **References** | - | - | - | addition of references |
| **ANNEXES** | Translation | - | - | - |
| **Annex 1: List of Agencies contributing to CAN-MDS** | - | - | National CAN-MDS agencies' network (ongoing) | To be developed on the basis of working file 6 |
| **Annex 2: National Administrative Authority of CAN-MDS** | - | - | National administrator | To be developed on the basis of working file 7 |

# Table 2: Suggested adaptation for Operator's Manual Part III

| term | Suggested adaptation (translation/ modification/ addition of information and/or reference)<br>Supporting working files and reports (where applicable) | modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable) |
|---|---|---|
| abandoned child | translation | |
| abandonment | translation+reference to respective law (if applicable) | |
| abduction-related acts | translation+reference to respective law (if applicable) | |
| access to CAN-MDS | translation+adaptation (if needed) - for more information see D3.2 | modify definition (if needed) |
| access | translation | |
| action taken -court or equivalent authority involvement | translation+adaptation (if needed) and additional information (if applicable) | modify definition (if needed) and add description - if specific procedures are provisioned |
| action taken -no court involvement | translation+adaptation (if needed) and additional information (if applicable) | modify definition (if needed) and add description - if specific procedures are provisioned |
| active professional | translation | |
| acts (of maltreatment) committed | translation+reference to respective law (if applicable) | |
| acts involving penetration | translation+additional information (if applicable) and reference to respective law (if applicable) | age for consensual sexual activities/ provisions for sexual activities between children |
| acts of life threatening maltreatment (with intention) | translation+reference to respective law (if applicable) | |
| actual suicide | translation | |
| administering unnecessary invasive medical procedures and non prescribed substances to child | translation | |
| administrator | translation | |
| adoption | translation+reference to respective law (if applicable) | |
| adoptive family | translation | |
| adoptive parent | translation | |
| agencies related to CAN | translation+adaptation (if needed) | modify definition (if needed) |
| agency | translation | |
| agency's ID | translation+additional information (if applicable) and reference to | develop agencies' IDs and list the agencies (at least those |

| term | Suggested adaptation (translation/ modification/ addition of information and/or reference)<br>Supporting working files and reports (where applicable) | modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable) |
|---|---|---|
| | respective law (if applicable) and secondary data-working file 6 (see also working file 1) | where the core group's professionals working in Annex (Annex I)<br>**Secondary data (working file 6)**<br>[Agency's Name]; [Postal_Address (street number; street name; postal code)]; [Phone_Number]; [Email_Address] |
| **alcohol use by the child** | translation+additional information (if applicable) and reference to respective law (if applicable) | national legislation-if exists (e.g. for selling alcohol to persons<18) |
| **amputation** | translation | |
| **anonymous source of information** | translation | |
| **anorexia nervosa** | translation+note "for informational reasons only" | |
| **apparent harm** | translation | |
| **assessment by child protection /social welfare services** | translation+adaptation (if needed) and additional information (if applicable) | modify definition (if needed) and add information - if specific practices are in place |
| **association** | translation+additional information (if applicable) | provide examples of well-known associations |
| **attempted sexual abuse** | translation | |
| **avoidant/restrictive food intake disorder** | translation+note "for informational reasons only" | |
| **beating** | translation | |
| **binding** | translation | |
| **binge eating disorder** | translation+note "for informational reasons only" | |
| **biological family** | translation | |
| **biting** | translation | |
| **blood relation** | translation+adaptation (if needed) | modify definition (if needed) |
| **blood relative** | translation | |
| **boarder** | translation | |
| **boxing ear** | translation | |
| **branding** | translation | |
| **bulimia nervosa** | translation+note "for informational reasons only" | |
| **bullying** | translation | |
| **burning** | translation | |
| **by-law relative** | translation | |

| term | Suggested adaptation (translation/ modification/ addition of information and/or reference)<br>Supporting working files and reports (where applicable) | modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable) |
|---|---|---|
| caning | translation | |
| CAN-MDS administrator | translation | Working file 8 |
| CAN-MDS axis | translation | |
| CAN-MDS short training | translation (and for more information see D4.1, D4.2, D4.5, D4.6) | |
| CAN-MDS | translation (and for more information see D2.1, D2.2, D5.4, D5.6) | |
| caregiver | translation | |
| child (alleged) victim | Translation (and secondary data -see also working file 7) | **Secondary data (working file 7)**<br>Child's personal data [Child's Surname, Name, Middle name, Parents' Name, date of birth]; [Postal_Address]; [Phone Number]:<br>Shared: sent by the Operators to CAN-MDS Administrator |
| child maltreatment | translation+reference to respective law (if applicable) | |
| child protection services or social welfare services emergency protection procedures | translation+additional information (if applicable) | if specific procedures are provisioned |
| child | translation+adaptation (if needed) and reference to respective law (if applicable) | modify definition (if needed) - for example, if existing legislation for individuals >18 treated as children |
| child's caregiver | translation | |
| child's citizenship status | Translation (and secondary data) | **Secondary data**<br>Country legislation of citizenship status |
| child's date of birth (DoB) | translation | |
| child's emergency placement | translation+additional information (if applicable) | if specific procedures are provisioned |
| child's ID | translation+additional information (if applicable) | specific format of child pseudonym (if you decide a different way than the suggested) |
| child's sex | translation+adaptation (if needed) | modify definition (if needed) - especially in regards to the codes related to intersex and transgender |
| children's home/residential institution | translation+additional information (if applicable) and reference to respective law (if applicable) | you may provide some examples of residential care |
| choking | translation | |
| chronic inattention to the child | translation | |
| chronic truancy | translation+additional information (if applicable) and reference to respective law (if applicable) (see also working file 4) | country specific information on the number of unjustified absenses allowed according to child's age |

| term | Suggested adaptation (translation/ modification/ addition of information and/or reference)<br>Supporting working files and reports (where applicable) | modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable) |
|---|---|---|
| citizenship | translation+additional information (if applicable) and reference to respective law (if applicable) | country provisions |
| close confinement | translation | |
| code of ethics | translation+additional information (if applicable) | provide examples of professions subjected to code of ethics |
| code of practice | translation+additional information (if applicable) | provide examples of professions subjected to code of ethics |
| coincidental identification of child maltreatment incident | translation | |
| community agency personnel | translation+adaptation (if needed) and secondary data (working file 10) | modify definition (if needed)<br>**Secondary data [working file 10]**<br>whehter the *source of information* is mandated to report CAN or not |
| community agency | translation+adaptation (if needed) and additional information (if applicable) | modify definition (if needed) and provide examples of well-known community agencies |
| complulsory school | translation+reference to respective law (if applicable); see also working file 4 | |
| corporal punishment and “disciplines” | translation+reference to respective law (if applicable) | |
| corruption | translation | |
| court order for perpetrator(s) to leave the home or to prosecute perpetrator(s) | translation+additional information (if applicable) | if specific procedures are provisioned |
| court | translation+adaptation (if needed) | modify definition (if needed) according to what is applicable in your country (e.g. family court exists or not) |
| custodial parent | translation+reference to respective law (if applicable) | |
| custody refusal and abandonment | translation+adaptation (if needed) | modify definition (if needed) |
| cyber-bullying | translation | |
| date of birth (DoB) | translation | |
| date of incident | translation | |
| date of record | translation | |
| date | translation | |

| term | Suggested adaptation (translation/ modification/ addition of information and/or reference)<br>Supporting working files and reports (where applicable) | modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable) |
|---|---|---|
| day care institution | translation+adaptation (if needed) and additional information (if applicable) and reference to respective law (if applicable) | modify definition (if needed) - provide examples of day-care institutions |
| day-care service personnel | translation+adaptation (if needed) and secondary data (working file 10) | modify definition (if needed)<br>**Secondary data [working file 10]**<br>whehter the *source of information* is mandated to report CAN or not |
| day-care | translation+adaptation (if needed) | modify definition (if needed)- adapt according to what is applicable in your country |
| degrading conditions of detention | translation+additional information (if applicable) and reference to respective law (if applicable) | standards for detention conditions for persons <18 (if applicable |
| deliberate infliction of disabilities | translation | |
| dental care neglect | translation+additional information (if applicable) | standards for dental care (if applicable) |
| denying emotional responsiveness | translation | |
| designated professional-CAN-MDS operator | translation | |
| detention or correctional institution | translation+additional information (if applicable) and reference to respective law (if applicable) | provide examples of detention/correctional institutions |
| diagnosed feeding and eating disorder | translation+note "for informational reasons only" | |
| disability support services personnel | translation+additional information (if applicable) and reference to respective law (if applicable) and secondary data-working file 10 | provide examples of disability support services<br>**Secondary data [working file 10]**<br>whehter the *source of information* is mandated to report CAN or not |
| disability | translation+adaptation (if needed) | modify definition (if needed) |
| dowry-related violence or death | translation | |
| dropped out | translation+additional information (if applicable) and reference to respective law (if applicable) (see also working file 4) | provisions for mandatory schooling |
| drugs use by the child | translation+additional information (if applicable) | provisions for drugs/ alcohol use for persons <18 |
| eating and feeding disorder | translation+note "for informational reasons only" | |
| educational institution | translation+additional information (if applicable) | provide examples of out-of-school educational institutions |
| educational neglect | translation (see also working file 4) | |
| education-related professions | translation | |

| term | Suggested adaptation (translation/ modification/ addition of information and/or reference)<br>Supporting working files and reports (where applicable) | modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable) |
|---|---|---|
| elder abuse | translation+reference to respective law (if applicable) | |
| eligibility criterion for operators | translation (and for more information, see D3.1) | |
| eligible CAN-MDS operator | translation (and for more information, see D3.1) | |
| eligible professional groups for CAN-MDS | translation+adaptation (if needed) - for more information, see D3.2 | modify definition (if needed) |
| emotional neglect | translation | |
| ethics in the CAN-MDS | translation (and for more information, see D4.1, D4.5 and D4.6) | |
| ethics | translation (and for more information, see D4.5 and D4.6) | |
| exorcism after accusations of "witchcraft" | translation | |
| exposure to a violent environment outside household | translation | |
| exposure to any kind of violence in the family | translation+reference to respective law (if applicable) | |
| exposure to risk | translation | |
| exposure to violence via electronic means | translation+additional information (if applicable) and reference to respective law (if applicable) | description of standards for non-exposure to violence (e.g. television) |
| failure to provide with basic medical care | translation | |
| family abduction | translation+reference to respective law (if applicable) | |
| family composition | translation | |
| family friend | translation | |
| family members | translation | |
| family | translation+adaptation (if needed) | modify definition (if needed) - define according to national law |
| fattening | translation | |
| female genital mutilation | translation+reference to respective law (if applicable) | |
| female | translation | |
| flogging | translation | |
| focus of referral | translation | |
| follow-up | translation+additional information (if applicable) | description, if specific procedures are provisioned |

| term | Suggested adaptation (translation/ modification/ addition of information and/or reference)<br>Supporting working files and reports (where applicable) | modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable) |
|---|---|---|
| forced circumcision | translation | |
| forced feeding | translation | |
| forced marriage and early marriage | translation+additional information (if applicable) and reference to respective law (if applicable) | mention legal marriage age |
| forced sterilization | translation | |
| forcing child to beg | translation | |
| forcing child to exposed in pornography | translation | |
| forcing child to get married | translation | |
| forcing child to involve in pornography | translation+reference to respective law (if applicable) | |
| forcing child to participate in a violent political event | translation+adaptation (if needed) | modify definition (if needed) |
| forcing child to participate in religious ritual | translation+adaptation (if needed) | modify definition (if needed) |
| forcing child to undertake adult's responsibilities | translation | |
| forcing child to undertake criminal behaviour | translation | |
| forcing child to witness sexual violence against mother | translation+reference to respective law (if applicable) | |
| forcing of child to prostitution | translation+reference to respective law (if applicable) | |
| forcing to ingest spicy food | translation | |
| forms of maltreatment | translation | |
| foster care | translation+reference to respective law (if applicable) | |
| foster family | translation | |
| foster parent | translation | |
| friend's family | translation | |
| full access | translation | |
| full view access (level 1) | translation+adaptation (if needed) | modify definition (if needed) |
| gender | translation | |

| term | Suggested adaptation (translation/ modification/ addition of information and/or reference)<br>Supporting working files and reports (where applicable) | modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable) |
|---|---|---|
| grabbing | translation | |
| grandparent(s) | translation | |
| has not attended school at all | translation+adaptation (if needed) - see also working file 4 | modify definition (if needed) |
| health care organization | translation+additional information (if applicable) | provide examples of health organizations |
| health related professions | translation | |
| health services personnel | translation+additional information (if applicable) and reference to respective law (if applicable) and secondary data-working file 10 | indicate if mandatory reporting<br>**Secondary data [working file 10]**<br>whehter the *source of information* is mandated to report CAN or not |
| health services | translation | |
| helpline personnel | translation+adaptation (if needed) and additional information (if applicable) and secondary data (see working file 10) | modify definition (if needed) - indicate if mandatory reporting<br>**Secondary data [working file 10]**<br>whehter the *source of information* is mandated to report CAN or not |
| helpline | translation+additional information (if applicable) | provide examples of well-known national helplines |
| hitting on head | translation | |
| hitting on the soles of the feet | translation | |
| hitting with an object | translation | |
| home | translation | |
| hospitalization of child in mother/child shelter | translation+additional information (if applicable) | provide examples of well-known child-mother shelters |
| humiliation | translation | |
| ICT | translation | |
| ID (identification) | translation | |
| identified incident | translation+additional information (if applicable) | if specific procedures of routine screening are provisioned |
| ignoring | translation | |
| illegal transfers of custody | translation+adaptation (if needed) and reference to respective law (if applicable) | modify definition (if needed) |

| term | Suggested adaptation (translation/ modification/ addition of information and/or reference)<br>Supporting working files and reports (where applicable) | modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable) |
|---|---|---|
| immediate intervention | translation+additional information (if applicable) | if specific internentions are provisioned other than the ones mentioned below |
| imposing of death sentence | translation+reference to respective law (if applicable) | |
| inadequate or inappropriate clothing | translation | |
| inadequate or inappropriate nutrition | translation | |
| inadequate or inappropriate personal hygiene | translation | |
| inadequate or inappropriate shelter | translation | |
| inadequate supervision | translation | |
| inappropriately advanced expectations | translation | |
| incident ID | translation | |
| incident of child maltreatment | translation | |
| incident | translation | |
| inflicting scars/scarring | translation | |
| initiation of court measures | translation+adaptation (if needed) and additional information (if applicable) and reference to respective law (if applicable) | modify definition (if needed) - if specific procedures are provisioned |
| initiation of forensic evaluation | translation+additional information (if applicable) and reference to respective law (if applicable) | if specific procedures are provisioned |
| institutional and system violations of child rights | translation+additional information (if applicable) and reference to respective law (if applicable) | age that children are subjected to detention penalties |
| institutional response | translation+additional information (if applicable) | mention the time period normally required for a service to be provided |
| intentional poisoning | translation | |
| intersex or intermediate | translation+adaptation (if needed) | modify definition, if needed (e.g. the case that this code is not applicable) |
| intimate partner violence (IPV) | translation+reference to respective law (if applicable) | |
| irregular school attendance | translation+additional information (if applicable) and reference to respective law (if applicable) (see also working file 4) | according to what provisioned by the education-related laws |
| isolation | translation | |
| justice-related professions | translation+adaptation (if needed) | modify definition (if needed) |
| kicking | translation | |

| term | Suggested adaptation (translation/ modification/ addition of information and/or reference)<br>Supporting working files and reports (where applicable) | modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable) |
|---|---|---|
| kindergarden | translation+adaptation (if needed) | modify definition - if different for your country |
| kinship care | translation+reference to respective law (if applicable) | |
| labour/economic exploitation | translation+additional information (if applicable) and reference to respective law (if applicable) | legal age for entering into labour market (salaried work) |
| lack of supervision | translation | |
| law enforcement related professions | translation+adaptation (if needed) | modify definition, if needed (e.g. in Italy there also i carabineri) |
| law enforcement services | translation+adaptation (if needed) | modify definition (if needed) |
| law enformcement | translation | |
| learning difficulty | translation+note "for informational reasons only" | |
| leisure | translation | |
| level of access | translation (and for more information, see D3.2) | |
| limited access (level 2) | translation (and for more information, see D3.2) | |
| limited access (level 3) | translation (and for more information, see D3.2) | |
| location of incident | translation | |
| locking up | translation | |
| majority | translation | |
| male | translation | |
| mandatory vaccination | translation (see also working file 3) | |
| medical neglect | translation | |
| mental health exam(s) | translation+additional information (if applicable) | if specific mental health exams are provisioned |
| mental health professions | translation | |
| mental health service | translation+additional information (if applicable) | provide examples of well-known mental health services |
| mental health services personnel | translation+additional information (if applicable) and reference to respective law (if applicable) and secondary data-working file 10 | indicate if mandatory reporting<br>**Secondary data [working file 10]**<br>whehter the *source of information* is mandated to report CAN or not |
| minimum data set (MDS) | translation | |
| Munchausen Syndrome by Proxy | translation+note "for informational reasons only" | |

| term | Suggested adaptation (translation/ modification/ addition of information and/or reference)<br>Supporting working files and reports (where applicable) | modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable) |
|---|---|---|
| national CAN-MDS administrator | translation+additional information (if applicable) + secondary data - working file 8) | [Name-to be completed]<br>**Secondary data [working file 8]**<br>Legal status of the administrator's agency]; and [Field where the administrator's agency belongs]; contact details: telephone number(s): [to be completed]; email(s): [to be completed] |
| national ombudsman | translation+additional information (if applicable) and reference to respective law (if applicable); see also working file 5 | if applicable (also for deputy obmudsman for children's rights) |
| NGO | translation+additional information (if applicable) | provide examples of well-known NGOs |
| NGOs/association personnel | translation+adaptation (if needed) and secondary data (working file 10) | modify definition (if needed)<br>**Secondary data [working file 10]**<br>whehter the *source of information* is mandated to report CAN or not |
| non compulsory school | translation+adaptation (if needed) - see also working file 4 | modify definition (if needed) |
| noncustodial parent | translation | |
| non-family abduction | translation | |
| ombudsman personnel | translation+adaptation (if needed) and secondary data (working file 10) and see also working file 5 | modify definition if needed (and if applicable)<br>**Secondary data [working file 10]**<br>whehter the *source of information* is mandated to report CAN or not |
| omission | translation | |
| omissions | translation | |
| online sexual stalking and harassment | translation | |
| operator | translation | |
| operator's ID | translation (and secondary data-see working file 8) (see also working file 2) | **Secondary data (working file 11)**<br>[Operator's Name]; [profession]; [Phone_Number]; [Email_Address] |
| ordinary/juvenile court and related services personnel | translation+adaptation (if needed) and secondary data (working file 10) | modify definition (if needed)<br>**Secondary data [working file 10]**<br>whehter the *source of information* is mandated to report CAN or not |
| other not-related household member | translation | |

| term | Suggested adaptation (translation/ modification/ addition of information and/or reference)<br>Supporting working files and reports (where applicable) | modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable) |
|---|---|---|
| other relative(s) | translation | |
| other relevant professionals | translation+adaptation (if needed) | modify definition (if needed) |
| other specified feeding or eating disorders | translation+note "for informational reasons only" | |
| other substance misuse by the child | translation+note "for informational reasons only" | |
| out of home placement | translation+reference to respective law (if applicable) | |
| overprotection | translation | |
| parent(s)' partner(s) | translation | |
| parent | translation | |
| persistent failure to register the child at the school | translation (see also working file 4) | |
| persistent ignoring of the child's emotional needs | translation | |
| personnel | translation | |
| physical bullying | translation | |
| physical medical exam(s) | translation | |
| physical neglect | translation | |
| physical violence acts | translation+reference to respective law (if applicable) | |
| pica | translation+note "for informational reasons only" | |
| pinching | translation | |
| planning of intervention | translation+additional information (if applicable) | if specific procedures are provisioned |
| playground | translation | |
| police emergency protection procedures | translation+adaptation (if needed) and additional information (if applicable) | modify definition (if needed) and add information if specific procedures are provisioned |
| police intervention (immediate interventions) | translation+adaptation (if needed) and additional information (if applicable) | modify definition (if needed) and add information if specific procedures are provisioned |
| police or other law enforcement services personnel | translation+adaptation (if needed) and secondary data (working file 10) | modify definition (if needed)<br>**Secondary data [working file 10)**<br>whehter the *source of information* is mandated to report CAN or not |
| police | translation | |

| term | Suggested adaptation (translation/ modification/ addition of information and/or reference)<br>Supporting working files and reports (where applicable) | modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable) |
|---|---|---|
| preschool | translation+additional information (if applicable) | if needed according to country specifics |
| primary caregiver | translation | |
| primary caregiver's date of birth | translation | |
| primary caregiver's relationship to child | translation | |
| primary caregiver's sex | translation+adaptation (if needed) | modify definition (if needed) |
| primary health care services | translation+additional information (if applicable) | provide example of primary health care services |
| private schools/institutions | translation+additional information (if applicable) | provide well-known examples |
| professional licence/certification | translation+additional information (if applicable) | provide examples of professions requiring license/ certification |
| providing child with sexually explicit material | translation | |
| pseudonymization | translation (see also ISO/TS 25237:2008. Health informatics – Pseudonymization) | |
| psychological violence acts | translation | |
| psychologically "unavailable" caregivers | translation | |
| public place | translation | |
| public schools/institutions | translation+additional information (if applicable) | provide examples of public schools/ institutions |
| public transportation mean | translation+adaptation (if needed) | modify definition (if needed) according to what is applicable in your country |
| pulling hair | translation | |
| pushing | translation | |
| recommended vaccination | translation+adaptation (if needed) - see also working file 3 | modify definition (if needed) according to what is applicable in your country |
| re-composed family | translation | |
| recreational area | translation+additional information (if applicable) | provide examples of well-known recreational areas |
| recreational or leisure area or a playground | translation | |
| referral of child to child protection /welfare services | translation | |
| referral to service | translation | |

| term | Suggested adaptation (translation/ modification/ addition of information and/or reference)<br>Supporting working files and reports (where applicable) | modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable) |
|---|---|---|
| referral | translation+additional information (if applicable) and reference to respective law (if applicable) | provisions related to mandatory reporting of CAN (e.g. for specific professional groups, public officials and the general public) (working file 10) |
| refusal of child's custody | translation | |
| refusal or failure to provide preventive health care | translation+adaptation (if needed) | modify definition if needed (if, for example, it is permitted to caregivers to not provide specific health care due to religious or cultural reasons) |
| refusal to allow /provide needed medical care for diagnosed health condition/ impairment | translation+adaptation (if needed) | modify definition if needed (if, for example, it is permitted to caregivers to not provide specific health care due to religious or cultural reasons) |
| refusal to allow needed attention to special educational needs | translation | |
| refusal to attend special educational needs | translation | |
| refusal to provide needed attention to special educational needs | translation | |
| rejection | translation | |
| relation by law | translation+adaptation (if needed) | modify definition (if needed) |
| relative's family | translation | |
| removal of parent(s)' rights | translation+additional information (if applicable) and reference to respective law (if applicable) | provisions for removal of parental rights |
| residential care institution | translation+additional information (if applicable) and reference to respective law (if applicable) | provide examples of well-known residential care institutions |
| restraining in cloth sacks | translation | |
| retribution violence | translation | |
| right of blood | translation+adaptation (if needed) | modify definition /provide information of whether this is applicable in your country |
| right of the soil | translation+adaptation (if needed) | modify definition /provide information of whether this is applicable in your country |
| routine screening | translation+additional information (if applicable) and reference to respective law (if applicable) | if specific routine screening is applied |
| rumination disorder | translation+note "for informational reasons only" | |

| term | Suggested adaptation (translation/ modification/ addition of information and/or reference)<br>Supporting working files and reports (where applicable) | modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable) |
|---|---|---|
| runaway | translation+adaptation (if needed) | modify definition according to what is applicable in your country (e.g. after how many hours a child is considered that runaway) |
| sale child for sexual purposes | translation+reference to respective law (if applicable) | |
| scalding | translation | |
| school/kindergarten/preschool personnel | translation+adaptation (if needed) and secondary data (working file 10) | modify definition if needed, according to what is applicable in your country<br>**Secondary data [working file 10]**<br>whehter the *source of information* is mandated to report CAN or not |
| school | translation | |
| scratching | translation | |
| screening tool | translation+additional information (if applicable) | if specific screening tool is applied please mention AND annex |
| secondary health care services | translation+additional information (if applicable) | provide example of secondary health care services |
| sectors related to CAN | translation+adaptation (if needed) | modify definition (if needed) |
| self-harm actions | translation | |
| self-inflicted injuries | translation | |
| service's response | translation+additional information (if applicable) | describe standards (set by the organization itself) for service provision in terms of quantity [: for example, the number of councelling sessions or medical interventions than needed] and timeliness [: within the normal time for the provision of the specific service by the specific agency]; |
| services for people with disabilities | translation+additional information (if applicable) | provide example of services for people with disabilities |
| sex | translation | |
| sexual exploitation acts | translation | |
| sexual harassment | translation | |
| sexual luring via ICT | translation | |

| term | Suggested adaptation (translation/ modification/ addition of information and/or reference)<br>Supporting working files and reports (where applicable) | modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable) |
|---|---|---|
| **sexual slavery** | translation | |
| **sexual violence acts** | translation | |
| **sexually explicit material** | translation | |
| **shaking baby syndrom** | translation+note "for informational reasons only" | |
| **shaking** | translation | |
| **shooting** | translation | |
| **showing genitals to child** | translation | |
| **sibling(s)** | translation | |
| **slapping** | translation | |
| **smacking** | translation | |
| **social bullying** | translation | |
| **social services** | translation+adaptation (if needed) and reference to respective law (if applicable) | modify definition/ adapt the description of what is applicable in your country (e.g. if CPS are in place) |
| **social welfare (public) system personnel** | translation+adaptation (if needed) and secondary data (working file 10) | modify definition (if needed)<br>**Secondary data [working file 10]**<br>whehter the *source of information* is mandated to report CAN or not |
| **source of information** | translation | |
| **spanking** | translation | |
| **specific incident of child maltreatment** | translation | |
| **sports-athletics** | translation | |
| **stabbing** | translation | |
| **staying in uncomfortable positions** | translation | |
| **step parent** | translation | |
| **stoning** | translation | |
| **substance** | translation+adaptation (if needed) and reference to respective law (if applicable) | modify definition/ adapt content if needed (legal/ illegal substances) according to country specifics |
| **substance use/abuse by the child** | translation+reference to respective law (if applicable) | |

| term | Suggested adaptation (translation/ modification/ addition of information and/or reference)<br>Supporting working files and reports (where applicable) | modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable) |
|---|---|---|
| substance use/abuse | translation | |
| substanstiation status of maltreatment | translation+additional information (if applicable) | if specific procedures/ classification of substantiation is applied in your country |
| suicidal thoughts | translation | |
| suicide attempt(s) | translation | |
| supportive intervention for current caregivers | translation+additional information (if applicable) | if specific supportive interventions are provisioned |
| suspected maltreatment | translation | |
| terrorization | translation | |
| tertiary health care services | translation+additional information (if applicable) | provide example of tertiary health care services |
| threatened sexual abuse | translation | |
| threatening with a knife or with a gun | translation | |
| threats of maltreatment | translation | |
| throwing | translation | |
| torture | translation+reference to respective law (if applicable) | |
| touching genitals | translation | |
| trafficking | translation+reference to respective law (if applicable) | |
| trained professional as CAN-MDS operators | Translation (and secondary data-see also working file 9) | **Secondary data [working file 9]**<br>Name, Profession, Agency, Address, Telephone, email (personal) |
| transgender | translation+adaptation (if needed) | add note that this is applicable or not in your country |
| travel and tourism sexual exploitation | translation+reference to respective law (if applicable) | |
| twisting ears | translation | |
| tying up or tying to something | translation | |
| type of family | translation | |
| unborn | translation+additional information (if applicable) and reference to respective law (if applicable) | describe provisions for rights of unborns and/or abuse of unborns (if applicable) |
| unjustified delay to seek medical care | translation | |
| unstable custody arrangements | translation+reference to respective law (if applicable) | |

| term | Suggested adaptation (translation/ modification/ addition of information and/or reference)<br>Supporting working files and reports (where applicable) | modification of definition (if needed) and/or additional national information (if applicable) and/or secondary data (where applicable) |
|---|---|---|
| use the child in commercial sexual exploitation | translation+reference to respective law (if applicable) | |
| uvulectomy | translation | |
| vaccination related neglect | translation (see also working file 3) | |
| verbal assaulting | translation | |
| verbal bullying | translation | |
| violence in the guise of treatment | translation | |
| violence | translation | |
| violent acts against self | translation | |
| violent acts known also as harmful practices | translation+reference to respective law (if applicable) | |
| violent acts related to child's exploitation | translation+reference to respective law (if applicable) | |
| violent acts related to child's exposure | translation+reference to respective law (if applicable) | |
| violent acts with or without obvious consequences | translation | |
| violent and degrading initiation rites, "hazing" | translation+additional information (if applicable) | if country specific types of hazing are applicable |
| virginity testing | translation | |
| vision care neglect | translation+additional information (if applicable) | if specific vision care procedures are provisioned |
| voyeurism | translation | |
| welfare related professions | translation | |
| withholding essential medical care | translation+adaptation (if needed) | add note if, for example, it is permitted to caregivers to not provide specific health care due to religious or cultural reasons |

# Working Files

## Working file 1: Instructions for creating Agencies' IDs

## Working file 2: Instructions for creating Operators' IDs

## Working file 3: Mandatory and Recommended vaccinations

## Working file 4: Education related information

## Working file 5: National Ombudsman

## Working file 6: Secondary Data for CAN-MDS Participating Agencies

## Working file 7: Secondary Data for Child (alleged) Victim

## Working file 8: Secondary Data for National CAN-MDS Administator

## Working file 9: Secondary Data for CAN-MDS Trained Professionals

## Working file 10: Secondary Data for Mandatory reporting of CAN

## Working file 11: Secondary Data for CAN-MDS Operators

## Working file 12: Focus Group Protocol & Discussion Guide

## Working file 13: Correspondance of CAN-MDS codes/subcodes with existing systems (DSM-V, ICD-10 and ICD-9; ICECI?)

# Working file 1: Instructions for creating Agencies' IDs

**[see also Working file 6]**

**INSTRUCTIONS FOR GENERATING AGENCIES' IDs [DE_R1]**

| | |
|---|---|
| **ID format** | **Instructions**<br>**10-digit CODE formulated as follows:**<br>**+ Country abbreviation (2 letters)[3] (see also Annex IA)**<br>**+ Region abbreviation (2 letters)[4] (see also Annex IB)***<br>**+ Organization/Service Type (3 letters) (see Annex IC)**<br>**+ Organization/Service Number (3 digits) (see also Annex ID)**<br>**** All countries have a 2-digit abbreviation but Belgium (3-digit abbreviation and therefore code should be 11-digit)*** |
| **Prerequisites** | A detailed mapping of all related agencies on the basis of your responses in the STEP A of the tool for the definition of eligibility criteria for CAN-MDS operators, including basic information on the type of service (such as health, mental health, social welfare etc.).<br>**TIP:** You can also use the respective information from your country profile report (if you think that the information in Chapter 4 *"Brief overview of child maltreatment prevention & child protection"* is sufficient) |
| **Secondary information needed:** | Agencies' contact details<br>a. ***necessarily*** email to be used in V18 for auto-notifications based on the referral(s) made by the Operator's Agency<br>b. further contact details (telephone number(s), address) for the Annex I of the national version |
| **Expected outcomes:** | Two lists are expected to be developed:<br>1st list will include all eligible agencies to be involved in the system along with contact details. This list will be Annexed in the Guide for Operator<br>2nd list will include all eligible agencies with their codes. Only System's Administrator will have access in this list including paired "Agency-Code". |
| **NOTE** | Agencies' IDs will also be used for the formulation of Operator's ID working in the respective agencies (as 1st part). |

[3] **ISO 3166-1**. *Codes for the representation of names of countries and their subdivisions* (part of the ISO 3166 standard published by the International Organization for Standardization)

[4] **ISO 3166-2**. *Country subdivision code* (part of the ISO 3166 standard published by the International Organization for Standardization

**Examples**

| Agency's Identity | Agency's Identity Data Elements | | | | Agency | Readily available information deriving from the DE_R1 to be used:*<br>From a public health perspective<br>*-to periodically measure incidence of CAN and its specific forms based on data deriving from services' responses to CAN cases*<br>*-per sector and service, at both, local and national level*<br>For case-level administration<br>*-to operate as a communication channel among sectors involved in administration of CAN cases*<br>*-to facilitate follow-up at case-level* |
|---|---|---|---|---|---|---|
| | Country ISO 3166-1 | Subdivision ISO 3166-2 | Type of Organization/ Service (CAN-MDS) | 3-digit ID NUMBER | | |
| BE-BRU-ROI-001 | BE | BRU | ROI | 001 | Coördinatiecel Internationaal Kind en Gezin - Kind en Gezin Academie – Belgium | 1st *"Research Organization/ Institute/ University*" in subdivision [region (en) / Region (de) / région (fr) / gewest (nl)] of Brussels Hoofdstedelijk Gewest in Belgium |
| BG-01-ROI-001 | BG | 01 | ROI | 001 | South West University "Neofit Rilski", Faculty of Public Health and Sport – Bulgaria | 1st *"Research Organization/ Institute/ University*" in subdivision [région (fr) / region (en) / oblast (bg)] of Blagoevgrad in Bulgaria |
| CH-LU-ROI-001 | CH | LU | ROI | 001 | Lucerne University of Applied Sciences & Arts, School of Social Work – Switzerland | 1st *"Research Organization/ Institute/ University*" in subdivision [Kanton (de) / canton (en) / chantun (rm) / cantone (it) / canton (fr)] of Luzern in Switzerland |
| DE-BW-ROI-001 | DE | BW | ROI | 001 | University Ulm, Department of Child and Adolescent Psychiatry/Psychotherapy - Germany | 1st *"Research Organization/ Institute/ University*" in subdivision [Land (en) / Länder (de) / Land (fr)] of Baden-Württemberg in Germany |
| FR-75-RSS-001 | FR | 75 | RSS | 001 | Observatoire national de l'enfance en danger (ONED) – FRANCE | 1st *"Already existing registries/CAN monitoring mechanisms"* in subdivision [département métropolitain (fr) / metropolitan department (en)] of Paris, in [région métropolitaine (fr) / metropolitan region (en) Île-de-France FR-J)] in France |
| GR-A1-ROI-001 | GR | A1 | ROI | 001 | Institute of Child Health, Department of Mental Health and Social Welfare, Greece | 1st *"Research Organization/ Institute/ University*" in subdivision [département (fr) / department (en) / nomos (el)] of Attiki [administrative region (en) / périféreia (el) / région administrative (fr) Attiki Prefecture, GR-I] in Greece |
| IT-FI-ROI-001 | IT | FI | ROI | 001 | Istituto degli Innocenti, Italy | 1st *"Research Organization/ Institute/ University*" in subdivision [province (fr) / province (en) / provincia (it)] of Firenze [regione (it) / région (fr) Toscana, IT-52] in Italy |
| RO-CJ-ROI-001 | RO | CJ | ROI | 001 | Babes-Bolyai University, Department of Sociology and Social Work, Romania | 1st *"Research Organization/ Institute/ University*" in subdivision [department (en) / judeţ (ro) / département (fr)] of Cluj in Romania |

* To collect data on which services receive/detect CAN referrals and are involved in administration of cases at both, local and national level. On the basis of the data that will be collected via this variable, the established network of agencies administrating CAN cases and working with maltreated children and their families will be outlined. This information would also be useful for future improvement of the criteria for eligible fields/ services to be included or excluded in the CAN-MDS as data-sources.

Moreover, knowing the identity of services involved in case administration could be useful for policy makers as a baseline for assessment of services' needs (at local and national level) for prioritizning the allocation of resources mainly for secondary and tertiary prevention of child maltreatment; furthermore, by profiling the route of case administration and the practices applied, they can strengthen potential synergies and work towards the adoption of agreements or protocols to facilitate agencies' cooperation and subsequently cases' administration.

## ANNEX

### A. COUNTRY CODES (ISO 3166-1)[5]

**Alpha-2 code** – a two-letter code that represents a country name, recommended as the general purpose code
Country abbreviation (2 letters)[6]

| | | |
|---|---|---|
| BE | = | Belgium |
| BG | = | Bulgaria |
| CH | = | Switzerland |
| DE | = | Germany |
| FR | = | France |
| GR | = | Greece |
| IT | = | Italy |
| RO | = | Romania |

### B. SUBDIVISION CODES (ISO 3166-2)[7]

**Subdivision codes** – code that represents the name of a principal subdivision (e.g province or state) of countries coded in ISO 3166-1. This code is based on the two-letter code element from ISO 3166-1 followed by a separator and up to three alphanumeric characters. The characters after the separator cannot be used on their own to denote a subdivision, they must be preceded by the alpha-2 country code.
The codes denoting the subdivision are usually obtained from national sources and stem from coding systems already in place in the country.

**BE**[8]

| | |
|---|---|
| Short name | BELGIUM |
| Short name lower case | Belgium |
| Full name | the Kingdom of Belgium |
| Alpha-2 code | BE |
| Alpha-3 code | BEL |
| Numeric code | 056 |

*List source: Institut Belge de Normalisation (IBN), 1996-06-06; IGN 1986 update BET 1996; http://unstats.un.org/unsd/geoinfo/UNGEGN/docs/25th-gegn-docs/wp%20papers/wp93-tgl%20belgium-april%202009.pdf*

*Code source: Institut Belge de Normalisation (IBN), 1996-06-06*

| 3 Regions [région (fr) / Region (de) / gewest (nl)] | Language code | 3166-2 code |
|---|---|---|
| Brussels Hoofdstedelijk Gewest | nl | |
| Bruxelles-Capitale, Région de | fr | BE-BRU |
| Vlaams Gewest | nl | BE-VLG |
| wallonne, Région | fr | BE-WAL |

[5] Glossary for ISO 3166 - Codes for countries and their subdivisions (www.iso.org/iso/country_codes_glossary.html)

[6] **ISO 3166-2** (1998). *Codes for the representation of names of countries and their subdivisions – Part 2: Country subdivision code* (part of the ISO 3166 standard published by the International Organization for Standardization

[7] Glossary for ISO 3166 - Codes for countries and their subdivisions (www.iso.org/iso/country_codes_glossary.html)

[8] ISO 3166-Codes for the representation of names of countries and their subdivisions. Committee: ISO/TC 46 ICS: 01.140.30 (https://www.iso.org/obp/ui/#iso:code:3166:BE)

| 10 Provinces [province (fr) / Provinz (de) / provincie (nl)] | | |
|---|---|---|
| Antwerpen | nl | BE-VAN |
| Brabant wallon | fr | BE-WBR |
| Hainaut | fr | BE-WHT |
| Liège | fr | BE-WLG |
| Limburg | nl | BE-VLI |
| Luxembourg | fr | BE-WLX |
| Namur | fr | BE-WNA |
| Oost-Vlaanderen | nl | BE-VOV |
| Vlaams-Brabant | nl | BE-VBR |
| West-Vlaanderen | nl | BE-VWV |

**EXAMPLE: BE-BRU-ROI-001 → Coördinatiecel Internationaal Kind en Gezin - Kind en Gezin Academie – Belgium**

**BG**[9]

| | |
|---|---|
| Short name | BULGARIA |
| Short name lower case | Bulgaria |
| Full name | the Republic of Bulgaria |
| Alpha-2 code | BG |
| Alpha-3 code | BGR |
| Numeric code | 100 |

*List source: Administrative Atlas of the Republic of Bulgaria, produced by Global, Sofia 2007 for MSAAR; http://en.wikipedia.org/wiki/Romanization_of_Bulgarian*

*Code source: Transliteration Law, Promulgated. OJ. No 19 - 13 March 2009., Amended OJ. N 77 - 1 October 2010., Amended, N 77 - 9 October 2012. Approved by the United Nations in 2012*

| 28 Regions [région (fr) / oblast (bg)] | Language code | 3166-2 code |
|---|---|---|
| Blagoevgrad | bg | BG-01 |
| Burgas | bg | BG-02 |
| Dobrich | bg | BG-08 |
| Gabrovo | bg | BG-07 |
| Haskovo | bg | BG-26 |
| Kardzhali | bg | BG-09 |
| Kyustendil | bg | BG-10 |
| Lovech | bg | BG-11 |
| Montana | bg | BG-12 |
| Pazardzhik | bg | BG-13 |
| Pernik | bg | BG-14 |
| Pleven | bg | BG-15 |
| Plovdiv | bg | BG-16 |
| Razgrad | bg | BG-17 |
| Ruse | bg | BG-18 |
| Shumen | bg | BG-27 |

[9]ISO 3166-Codes for the representation of names of countries and their subdivisions. Committee: ISO/TC 46 ICS: 01.140.30 (https://www.iso.org/obp/ui/#iso:code:3166:BG)

| | | |
|---|---|---|
| Silistra | bg | BG-19 |
| Sliven | bg | BG-20 |
| Smolyan | bg | BG-21 |
| Sofia | bg | BG-23 |
| Sofia (stolitsa) | bg | BG-22 |
| Stara Zagora | bg | BG-24 |
| Targovishte | bg | BG-25 |
| Varna | bg | BG-03 |
| Veliko Tarnovo | bg | BG-04 |
| Vidin | bg | BG-05 |
| Vratsa | bg | BG-06 |
| Yambol | bg | BG-28 |

**EXAMPLE: BG-01-ROI-001 → South West University "Neofit Rilski", Faculty of Public Health and Sport – Bulgaria**

**CH**[10]

| | |
|---|---|
| Short name | SWITZERLAND |
| Short name lower case | Switzerland |
| Full name | the Swiss Confederation |
| Alpha-2 code | CH |
| Alpha-3 code | CHE |
| Numeric code | 756 |

*List source: Swiss constitution (2002-10-15)*
*Code source: Swiss Association for Standardization (SNV), 1987-08-26*

| 26 Cantons [Kanton (de) / chantun (rm) / cantone (it) / canton (fr)] | Language code | 3166-2 code |
|---|---|---|
| Aargau | de | CH-AG |
| Appenzell Ausserrhoden | de | CH-AR |
| Appenzell Innerrhoden | de | CH-AI |
| Basel-Landschaft | de | CH-BL |
| Basel-Stadt | de | CH-BS |
| Bern | de | CH-BE |
| Berne | fr | CH-BE |
| Freiburg | de | CH-FR |
| Fribourg | fr | CH-FR |
| Genève | fr | CH-GE |
| Glarus | de | CH-GL |
| Graubünden | de | CH-GR |
| Grigioni | it | CH-GR |
| Grischun | rm | CH-GR |
| Grisons | fr | CH-GR |
| Jura | fr | CH-JU |

[10] ISO 3166-Codes for the representation of names of countries and their subdivisions. Committee: ISO/TC 46 ICS:01.140.30 (https://www.iso.org/obp/ui/#iso:code:3166:CH)

| | | |
|---|---|---|
| Luzern | de | CH-LU |
| Neuchâtel | fr | CH-NE |
| Nidwalden | de | CH-NW |
| Obwalden | de | CH-OW |
| Sankt Gallen | de | CH-SG |
| Schaffhausen | de | CH-SH |
| Schwyz | de | CH-SZ |
| Solothurn | de | CH-SO |
| Thurgau | de | CH-TG |
| Ticino | it | CH-TI |
| Uri | de | CH-UR |
| Valais | fr | CH-VS |
| Vaud | fr | CH-VD |
| Wallis | de | CH-VS |
| Zug | de | CH-ZG |
| Zürich | de | CH-ZH |

**EXAMPLE: CH-LU-ROI-001 → Lucerne University of Applied Sciences & Arts, School of Social Work – Switzerland**

**DE**[11]

| | |
|---|---|
| Short name | GERMANY |
| Short name lower case | Germany |
| Full name | the Federal Republic of Germany |
| Alpha-2 code | DE |
| Alpha-3 code | DEU |
| Numeric code | 276 |

*List source: DE-PRO (German Association for Facilitation of Trade Procedures and Promotion of EDI) 1991-06-07, Codes and names according to the Federal Ministry of the Interior*

*Code source: DE-PRO (German Association for Facilitation of Trade Procedures and Promotion of EDI) 1991-06-07, Codes and names according to the Federal Ministry of the Interior*

| 16 Lands [Länder (de) / Land (fr)] | Language code | 3166-2 code |
|---|---|---|
| Baden-Württemberg | de | DE-BW |
| Bayern | de | DE-BY |
| Berlin | de | DE-BE |
| Brandenburg | de | DE-BB |
| Bremen | de | DE-HB |
| Hamburg | de | DE-HH |
| Hessen | de | DE-HE |
| Mecklenburg-Vorpommern | de | DE-MV |
| Niedersachsen | de | DE-NI |
| Nordrhein-Westfalen | de | DE-NW |

[11] ISO 3166-Codes for the representation of names of countries and their subdivisions. Committee: ISO/TC 46 ICS: 01.140.30 (https://www.iso.org/obp/ui/#iso:code:3166:DE)

| | | |
|---|---|---|
| Rheinland-Pfalz | de | DE-RP |
| Saarland | de | DE-SL |
| Sachsen | de | DE-SN |
| Sachsen-Anhalt | de | DE-ST |
| Schleswig-Holstein | de | DE-SH |
| Thüringen | de | DE-TH |

**EXAMPLE: DE-BW-ROI-001 → University Ulm, Department of Child & Adolescent Psychiatry/Psychotherapy - Germany**

**FR**[12]

| | |
|---|---|
| Short name | FRANCE |
| Short name lower case | France |
| Full name | the French Republic |
| Alpha-2 code | FR |
| Alpha-3 code | FRA |
| Numeric code | 250 |
| Remarks | |
| Comprises: Metropolitan France, French Guiana, Guadeloupe, Martinique, La Réunion, Mayotte, Saint Barthélemy, Saint Martin, Saint Pierre and Miquelon, French Polynesia, French Southern Territories, New Caledonia, Wallis and Futuna. Includes: Clipperton Island. | |

*List source: Association Française de Normalisation (AFNOR), 1995-11-09; Institut National de la Statistique et des Études Économiques (INSEE), 2004 ; 2011-03*
*Code source: Association Française de Normalisation (AFNOR), 1995-11-09; Correction INSEE; 2002-0*

| **22 Metropolitan Regions [région métropolitaine (fr)]** | **Language code** | **3166-2 code** | **Parent subdivision** |
|---|---|---|---|
| Alsace | fr | FR-A | |
| Aquitaine | fr | FR-B | |
| Auvergne | fr | FR-C | |
| Basse-Normandie | fr | FR-P | |
| Bourgogne | fr | FR-D | |
| Bretagne | fr | FR-E | |
| Centre | fr | FR-F | |
| Champagne-Ardenne | fr | FR-G | |
| Corse | fr | FR-H | |
| Franche-Comté | fr | FR-I | |
| Haute-Normandie | fr | FR-Q | |
| Île-de-France | fr | FR-J | |
| Languedoc-Roussillon | fr | FR-K | |

[12] ISO 3166-Codes for the representation of names of countries and their subdivisions. Committee: ISO/TC 46 ICS: 01.140.30 (https://www.iso.org/obp/ui/#iso:code:3166:FR)

| | | | |
|---|---|---|---|
| Limousin | fr | FR-L | |
| Lorraine | fr | FR-M | |
| Midi-Pyrénées | fr | FR-N | |
| Nord-Pas-de-Calais | fr | FR-O | |
| Pays-de-la-Loire | fr | FR-R | |
| Picardie | fr | FR-S | |
| Poitou-Charentes | fr | FR-T | |
| Provence-Alpes-Côte-d'Azur | fr | FR-U | |
| Rhône-Alpes | fr | FR-V | |
| **96 Metropolitan Departments [département métropolitain (fr)]** | | | |
| Ain | fr | FR-01 | FR-V |
| Aisne | fr | FR-02 | FR-S |
| Allier | fr | FR-03 | FR-C |
| Alpes-de-Haute-Provence | fr | FR-04 | FR-U |
| Alpes-Maritimes | fr | FR-06 | FR-U |
| Ardèche | fr | FR-07 | FR-V |
| Ardennes | fr | FR-08 | FR-G |
| Ariège | fr | FR-09 | FR-N |
| Aube | fr | FR-10 | FR-G |
| Aude | fr | FR-11 | FR-K |
| Aveyron | fr | FR-12 | FR-N |
| Bas-Rhin | fr | FR-67 | FR-A |
| Bouches-du-Rhône | fr | FR-13 | FR-U |
| Calvados | fr | FR-14 | FR-P |
| Cantal | fr | FR-15 | FR-C |
| Charente | fr | FR-16 | FR-T |
| Charente-Maritime | fr | FR-17 | FR-T |
| Cher | fr | FR-18 | FR-F |
| Corrèze | fr | FR-19 | FR-L |
| Corse-du-Sud | fr | FR-2A | FR-H |
| Côte-d'Or | fr | FR-21 | FR-D |
| Côtes-d'Armor | fr | FR-22 | FR-E |
| Creuse | fr | FR-23 | FR-L |
| Deux-Sèvres | fr | FR-79 | FR-T |
| Dordogne | fr | FR-24 | FR-B |
| Doubs | fr | FR-25 | FR-I |
| Drôme | fr | FR-26 | FR-V |
| Essonne | fr | FR-91 | FR-J |
| Eure | fr | FR-27 | FR-Q |
| Eure-et-Loir | fr | FR-28 | FR-F |
| Finistère | fr | FR-29 | FR-E |
| Gard | fr | FR-30 | FR-K |
| Gers | fr | FR-32 | FR-N |
| Gironde | fr | FR-33 | FR-B |
| Haute-Corse | fr | FR-2B | FR-H |

| | | | |
|---|---|---|---|
| Haute-Garonne | fr | FR-31 | FR-N |
| Haute-Loire | fr | FR-43 | FR-C |
| Haute-Marne | fr | FR-52 | FR-G |
| Hautes-Alpes | fr | FR-05 | FR-U |
| Haute-Saône | fr | FR-70 | FR-I |
| Haute-Savoie | fr | FR-74 | FR-V |
| Hautes-Pyrénées | fr | FR-65 | FR-N |
| Haute-Vienne | fr | FR-87 | FR-L |
| Haut-Rhin | fr | FR-68 | FR-A |
| Hauts-de-Seine | fr | FR-92 | FR-J |
| Hérault | fr | FR-34 | FR-K |
| Ille-et-Vilaine | fr | FR-35 | FR-E |
| Indre | fr | FR-36 | FR-F |
| Indre-et-Loire | fr | FR-37 | FR-F |
| Isère | fr | FR-38 | FR-V |
| Jura | fr | FR-39 | FR-I |
| Landes | fr | FR-40 | FR-B |
| Loire | fr | FR-42 | FR-V |
| Loire-Atlantique | fr | FR-44 | FR-R |
| Loiret | fr | FR-45 | FR-F |
| Loir-et-Cher | fr | FR-41 | FR-F |
| Lot | fr | FR-46 | FR-N |
| Lot-et-Garonne | fr | FR-47 | FR-B |
| Lozère | fr | FR-48 | FR-K |
| Maine-et-Loire | fr | FR-49 | FR-R |
| Manche | fr | FR-50 | FR-P |
| Marne | fr | FR-51 | FR-G |
| Mayenne | fr | FR-53 | FR-R |
| Meurthe-et-Moselle | fr | FR-54 | FR-M |
| Meuse | fr | FR-55 | FR-M |
| Morbihan | fr | FR-56 | FR-E |
| Moselle | fr | FR-57 | FR-M |
| Nièvre | fr | FR-58 | FR-D |
| Nord | fr | FR-59 | FR-O |
| Oise | fr | FR-60 | FR-S |
| Orne | fr | FR-61 | FR-P |
| Paris | fr | FR-75 | FR-J |
| Pas-de-Calais | fr | FR-62 | FR-O |
| Puy-de-Dôme | fr | FR-63 | FR-C |
| Pyrénées-Atlantiques | fr | FR-64 | FR-B |
| Pyrénées-Orientales | fr | FR-66 | FR-K |
| Rhône | fr | FR-69 | FR-V |
| Saône-et-Loire | fr | FR-71 | FR-D |
| Sarthe | fr | FR-72 | FR-R |
| Savoie | fr | FR-73 | FR-V |

| | | | |
|---|---|---|---|
| Seine-et-Marne | fr | FR-77 | FR-J |
| Seine-Maritime | fr | FR-76 | FR-Q |
| Seine-Saint-Denis | fr | FR-93 | FR-J |
| Somme | fr | FR-80 | FR-S |
| Tarn | fr | FR-81 | FR-N |
| Tarn-et-Garonne | fr | FR-82 | FR-N |
| Territoire de Belfort | fr | FR-90 | FR-I |
| Val-de-Marne | fr | FR-94 | FR-J |
| Val-d'Oise | fr | FR-95 | FR-J |
| Var | fr | FR-83 | FR-U |
| Vaucluse | fr | FR-84 | FR-U |
| Vendée | fr | FR-85 | FR-R |
| Vienne | fr | FR-86 | FR-T |
| Vosges | fr | FR-88 | FR-M |
| Yonne | fr | FR-89 | FR-D |
| Yvelines | fr | FR-78 | FR-J |
| **5 Overseas Departments [département d'outre-mer (fr)]** | | | |
| Guadeloupe (see also separate country code entry under GP) | fr | FR-GP | |
| Guyane (française) (see also separate country code entry under GF) | fr | FR-GF | |
| La Réunion (see also separate country code entry under RE) | fr | FR-RE | |
| Martinique (see also separate country code entry under MQ) | fr | FR-MQ | |
| Mayotte (see also separate country code entry under YT) | fr | FR-YT | |
| **7 Overseas territorial collectivities [collectivité territoriale d'outre-mer (fr)]** | | | |
| Nouvelle-Calédonie (see also separate country code entry under NC) | fr | FR-NC | |
| Polynésie française (see also separate country code entry under PF) | fr | FR-PF | |
| Saint-Barthélemy (see also separate country code entry under BL) | fr | FR-BL | |
| Saint-Martin (see also separate country code entry under MF) | fr | FR-MF | |
| Saint-Pierre-et-Miquelon (see also separate country code entry under PM) | fr | FR-PM | |
| Terres australes françaises (see also separate country code entry under TF) | fr | FR-TF | |
| Wallis-et-Futuna (see also separate country code entry under WF) | fr | FR-WF | |
| **1 Dependency [dépendance (fr)]** | | | |
| Clipperton | fr | FR-CP | |

**EXAMPLE:** **FR-75-RSS-001 → Observatoire national de l'enfance en danger (ONED) – FRANCE**

**GR**[13]

| | |
|---|---|
| Short name | GREECE |
| Short name lower case | Greece |
| Full name | the Hellenic Republic |
| Alpha-2 code | GR |
| Alpha-3 code | GRC |
| Numeric code | 300 |
| Remarks | |
| Includes: | Mount Athos autonomous area (non applicable here) |

*List source: Hellenic Organization for Standardization (ELOT), 1997-04-08; http://el.wikipedia.org/wiki/ISO_3166-2:GR*
*Code source: Hellenic Organization for Standardization (ELOT), 1997-04-08*

| **13 Administration Regions [periféreia (el) / région administrative (fr)]** | **Language code** | **3166-2 code** | **Parent subdivision** |
|---|---|---|---|
| Anatoliki Makedonia kai Thraki | el | GR-A | |
| Attiki | el | GR-I | |
| Dytiki Ellada | el | GR-G | |
| Dytiki Makedonia | el | GR-C | |
| Ionia Nisia | el | GR-F | |
| Ipeiros | el | GR-D | |
| Kentriki Makedonia | el | GR-B | |
| Kriti | el | GR-M | |
| Notio Aigaio | el | GR-L | |
| Peloponnisos | el | GR-J | |
| Sterea Ellada | el | GR-H | |
| Thessalia | el | GR-E | |
| Voreio Aigaio | el | GR-K | |
| **51 Departments [département (fr) / nomos (el)]** | | | |
| Achaïa | el | GR-13 | GR-G |
| Aitolia kai Akarnania | el | GR-01 | GR-G |
| Argolida | el | GR-11 | GR-J |
| Arkadia | el | GR-12 | GR-J |
| Arta | el | GR-31 | GR-D |
| Attiki | el | GR-A1 | GR-I |
| Chalkidiki | el | GR-64 | GR-B |
| Chania | el | GR-94 | GR-M |
| Chios | el | GR-85 | GR-K |
| Dodekanisos | el | GR-81 | GR-L |

[13] ISO 3166-Codes for the representation of names of countries and their subdivisions. Committee: ISO/TC 46 ICS: 01.140.30 (https://www.iso.org/obp/ui/#iso:code:3166:GR)

| | | | |
|---|---|---|---|
| Drama | el | GR-52 | GR-A |
| Evros | el | GR-71 | GR-A |
| Evrytania | el | GR-05 | GR-H |
| Evvoia | el | GR-04 | GR-H |
| Florina | el | GR-63 | GR-C |
| Fokida | el | GR-07 | GR-H |
| Fthiotida | el | GR-06 | GR-H |
| Grevena | el | GR-51 | GR-C |
| Ileia | el | GR-14 | GR-G |
| Imathia | el | GR-53 | GR-B |
| Ioannina | el | GR-33 | GR-D |
| Irakleio | el | GR-91 | GR-M |
| Karditsa | el | GR-41 | GR-E |
| Kastoria | el | GR-56 | GR-C |
| Kavala | el | GR-55 | GR-A |
| Kefallonia | el | GR-23 | GR-F |
| Kerkyra | el | GR-22 | GR-F |
| Kilkis | el | GR-57 | GR-B |
| Korinthia | el | GR-15 | GR-J |
| Kozani | el | GR-58 | GR-C |
| Kyklades | el | GR-82 | GR-L |
| Lakonia | el | GR-16 | GR-J |
| Larisa | el | GR-42 | GR-E |
| Lasithi | el | GR-92 | GR-M |
| Lefkada | el | GR-24 | GR-F |
| Lesvos | el | GR-83 | GR-K |
| Magnisia | el | GR-43 | GR-E |
| Messinia | el | GR-17 | GR-J |
| Pella | el | GR-59 | GR-B |
| Pieria | el | GR-61 | GR-B |
| Preveza | el | GR-34 | GR-D |
| Rethymno | el | GR-93 | GR-M |
| Rodopi | el | GR-73 | GR-A |
| Samos | el | GR-84 | GR-K |
| Serres | el | GR-62 | GR-B |
| Thesprotia | el | GR-32 | GR-D |
| Thessaloniki | el | GR-54 | GR-B |
| Trikala | el | GR-44 | GR-E |
| Voiotia | el | GR-03 | GR-H |
| Xanthi | el | GR-72 | GR-A |
| Zakynthos | el | GR-21 | GR-F |

**EXAMPLE:** **GR-A1-ROI-001 → Institute of Child Health, Department of Mental Health and Social Welfare, Greece**

**IT**[14]

| | |
|---|---|
| Short name | ITALY |
| Short name lower case | Italy |
| Full name | the Republic of Italy |
| Alpha-2 code | IT |
| Alpha-3 code | ITA |
| Numeric code | 380 |

*List source: Ente Nazionale Italiano di Unificazione (UNI), 1995-11-15 (regions) + 1998-03-02 (provinces); BET 1996; Servizio Informativo e Cartografico Regionale, Regione Autonoma della Sardegna 2006; http://www.statoids.com/uit.html; http://fr.wikipedia.org/wiki/*

*Code source: Ente Nazionale Italiano di Unificazione (UNI); ISO/TC 46/WG 2 Secretariat (*)*

| 20 Regions [regione (it) / région (fr)] | Language code | 3166-2 code | Parent subdivision |
|---|---|---|---|
| Abruzzo | it | IT-65 | |
| Basilicata | it | IT-77 | |
| Calabria | it | IT-78 | |
| Campania | it | IT-72 | |
| Emilia-Romagna | it | IT-45 | |
| Friuli-Venezia Giulia | it | IT-36 | |
| Lazio | it | IT-62 | |
| Liguria | it | IT-42 | |
| Lombardia | it | IT-25 | |
| Marche | it | IT-57 | |
| Molise | it | IT-67 | |
| Piemonte | it | IT-21 | |
| Puglia | it | IT-75 | |
| Sardegna | it | IT-88 | |
| Sicilia | it | IT-82 | |
| Toscana | it | IT-52 | |
| Trentino-Alto Adige | it | IT-32 | |
| Trentino-Südtirol | de | IT-32 | |
| Umbria | it | IT-55 | |
| Val d'Aoste | fr | IT-23 | |
| Valle d'Aosta | it | IT-23 | |
| Veneto | it | IT-34 | |
| **110 Provinces [province (fr) / provincia (it)]** | | | |
| Agrigento | it | IT-AG | IT-82 |
| Alessandria | it | IT-AL | IT-21 |
| Ancona | it | IT-AN | IT-57 |
| Aosta | it | IT-AO | IT-23 |
| Aoste | fr | IT-AO | IT-23 |
| Arezzo | it | IT-AR | IT-52 |

[14] ISO 3166-Codes for the representation of names of countries and their subdivisions. Committee: ISO/TC 46 ICS: 01.140.30 (https://www.iso.org/obp/ui/#iso:code:3166:IT)

| | | | |
|---|---|---|---|
| Ascoli Piceno | it | IT-AP | IT-57 |
| Asti | it | IT-AT | IT-21 |
| Avellino | it | IT-AV | IT-72 |
| Bari | it | IT-BA | IT-75 |
| Barletta-Andria-Trani | it | IT-BT | IT-75 |
| Belluno | it | IT-BL | IT-34 |
| Benevento | it | IT-BN | IT-72 |
| Bergamo | it | IT-BG | IT-25 |
| Biella | it | IT-BI | IT-21 |
| Bologna | it | IT-BO | IT-45 |
| Bolzano | it | IT-BZ | IT-32 |
| Bozen | de | IT-BZ | IT-32 |
| Brescia | it | IT-BS | IT-25 |
| Brindisi | it | IT-BR | IT-75 |
| Cagliari | it | IT-CA | IT-88 |
| Caltanissetta | it | IT-CL | IT-82 |
| Campobasso | it | IT-CB | IT-67 |
| Carbonia-Iglesias | it | IT-CI* | IT-88 |
| Caserta | it | IT-CE | IT-72 |
| Catania | it | IT-CT | IT-82 |
| Catanzaro | it | IT-CZ | IT-78 |
| Chieti | it | IT-CH | IT-65 |
| Como | it | IT-CO | IT-25 |
| Cosenza | it | IT-CS | IT-78 |
| Cremona | it | IT-CR | IT-25 |
| Crotone | it | IT-KR | IT-78 |
| Cuneo | it | IT-CN | IT-21 |
| Enna | it | IT-EN | IT-82 |
| Fermo | it | IT-FM | IT-57 |
| Ferrara | it | IT-FE | IT-45 |
| Firenze | it | IT-FI | IT-52 |
| Foggia | it | IT-FG | IT-75 |
| Forlì-Cesena | it | IT-FC* | IT-45 |
| Frosinone | it | IT-FR | IT-62 |
| Genova | it | IT-GE | IT-42 |
| Gorizia | it | IT-GO | IT-36 |
| Grosseto | it | IT-GR | IT-52 |
| Imperia | it | IT-IM | IT-42 |
| Isernia | it | IT-IS | IT-67 |
| La Spezia | it | IT-SP | IT-42 |
| L'Aquila | it | IT-AQ | IT-65 |
| Latina | it | IT-LT | IT-62 |
| Lecce | it | IT-LE | IT-75 |
| Lecco | it | IT-LC | IT-25 |
| Livorno | it | IT-LI | IT-52 |

| | | | |
|---|---|---|---|
| Lodi | it | IT-LO | IT-25 |
| Lucca | it | IT-LU | IT-52 |
| Macerata | it | IT-MC | IT-57 |
| Mantova | it | IT-MN | IT-25 |
| Massa-Carrara | it | IT-MS | IT-52 |
| Matera | it | IT-MT | IT-77 |
| Medio Campidano | it | IT-VS | IT-88 |
| Messina | it | IT-ME | IT-82 |
| Milano | it | IT-MI | IT-25 |
| Modena | it | IT-MO | IT-45 |
| Monza e Brianza | it | IT-MB | IT-25 |
| Napoli | it | IT-NA | IT-72 |
| Novara | it | IT-NO | IT-21 |
| Nuoro | it | IT-NU | IT-88 |
| Ogliastra | it | IT-OG* | IT-88 |
| Olbia-Tempio | it | IT-OT | IT-88 |
| Oristano | it | IT-OR | IT-88 |
| Padova | it | IT-PD | IT-34 |
| Palermo | it | IT-PA | IT-82 |
| Parma | it | IT-PR | IT-45 |
| Pavia | it | IT-PV | IT-25 |
| Perugia | it | IT-PG | IT-55 |
| Pesaro e Urbino | it | IT-PU | IT-57 |
| Pescara | it | IT-PE | IT-65 |
| Piacenza | it | IT-PC | IT-45 |
| Pisa | it | IT-PI | IT-52 |
| Pistoia | it | IT-PT | IT-52 |
| Pordenone | it | IT-PN | IT-36 |
| Potenza | it | IT-PZ | IT-77 |
| Prato | it | IT-PO | IT-52 |
| Ragusa | it | IT-RG | IT-82 |
| Ravenna | it | IT-RA | IT-45 |
| Reggio Calabria | it | IT-RC | IT-78 |
| Reggio Emilia | it | IT-RE | IT-45 |
| Rieti | it | IT-RI | IT-62 |
| Rimini | it | IT-RN | IT-45 |
| Roma | it | IT-RM | IT-62 |
| Rovigo | it | IT-RO | IT-34 |
| Salerno | it | IT-SA | IT-72 |
| Sassari | it | IT-SS | IT-88 |
| Savona | it | IT-SV | IT-42 |
| Siena | it | IT-SI | IT-52 |
| Siracusa | it | IT-SR | IT-82 |
| Sondrio | it | IT-SO | IT-25 |
| Taranto | it | IT-TA | IT-75 |

| | | | |
|---|---|---|---|
| Teramo | it | IT-TE | IT-65 |
| Terni | it | IT-TR | IT-55 |
| Torino | it | IT-TO | IT-21 |
| Trapani | it | IT-TP | IT-82 |
| Trento | it | IT-TN | IT-32 |
| Treviso | it | IT-TV | IT-34 |
| Trieste | it | IT-TS | IT-36 |
| Udine | it | IT-UD | IT-36 |
| Varese | it | IT-VA | IT-25 |
| Venezia | it | IT-VE | IT-34 |
| Verbano-Cusio-Ossola | it | IT-VB | IT-21 |
| Vercelli | it | IT-VC | IT-21 |
| Verona | it | IT-VR | IT-34 |
| Vibo Valentia | it | IT-VV | IT-78 |
| Vicenza | it | IT-VI | IT-34 |
| Viterbo | it | IT-VT | IT-62 |

**EXAMPLE: IT-FI-ROI-001 → Istituto degli Innocenti Italy**

**RO**[15]

| | |
|---|---|
| Alpha-2 code | RO |
| Short name | ROMANIA |
| Short name lower case | Romania |
| Full name | |
| Alpha-3 code | ROU |
| Numeric code | 642 |

*List source: Institutul Român de Standardizare (IRS), 1988-04-29; U.S. Geopolitical Entities, Names, and Codes (GENC) Standard, cf. http://earth- info.nga.mil/gns/html/gazetteers2.html; IGN 1990 update BET 1996; update PCGN 2002-10; http://www.guv.ro (2002-11-01)*

*Code source: Institutul Român de Standardizare (IRS), 1988-04-29; ISO 3166/MA (*)*

| **1 Municipality [municipalité (fr) / municipiu (ro)]** | **Language code** | **3166-2 code** |
|---|---|---|
| Bucureşti | ro | RO-B |
| **41 Departments [judeţ (ro) / département (fr)]** | | |
| Alba | ro | RO-AB |
| Arad | ro | RO-AR |
| Argeş | ro | RO-AG |
| Bacău | ro | RO-BC |
| Bihor | ro | RO-BH |
| Bistriţa-Năsăud | ro | RO-BN |
| Botoşani | ro | RO-BT |
| Brăila | ro | RO-BR |
| Braşov | ro | RO-BV |

[15] ISO 3166-Codes for the representation of names of countries and their subdivisions. Committee: ISO/TC 46 ICS: 01.140.30 (https://www.iso.org/obp/ui/#iso:code:3166:RO)

| | | |
|---|---|---|
| Buzău | ro | RO-BZ |
| Călăraşi | ro | RO-CL |
| Caraş-Severin | ro | RO-CS |
| Cluj | ro | RO-CJ |
| Constanţa | ro | RO-CT |
| Covasna | ro | RO-CV |
| Dâmboviţa | ro | RO-DB |
| Dolj | ro | RO-DJ |
| Galaţi | ro | RO-GL |
| Giurgiu | ro | RO-GR |
| Gorj | ro | RO-GJ |
| Harghita | ro | RO-HR |
| Hunedoara | ro | RO-HD |
| Ialomiţa | ro | RO-IL |
| Iaşi | ro | RO-IS |
| Ilfov | ro | RO-IF* |
| Maramureş | ro | RO-MM |
| Mehedinţi | ro | RO-MH |
| Mureş | ro | RO-MS |
| Neamţ | ro | RO-NT |
| Olt | ro | RO-OT |
| Prahova | ro | RO-PH |
| Sălaj | ro | RO-SJ |
| Satu Mare | ro | RO-SM |
| Sibiu | ro | RO-SB |
| Suceava | ro | RO-SV |
| Teleorman | ro | RO-TR |
| Timiş | ro | RO-TM |
| Tulcea | ro | RO-TL |
| Vâlcea | ro | RO-VL |
| Vaslui | ro | RO-VS |
| Vrancea | ro | RO-VN |

**EXAMPLE:** **RO-CJ-ROI-001 → Babes-Bolyai University, Department of Sociology and Social Work Romania**

**C. Organization/Service Type (3-letter)**

As no standards are available for Organization/Service Type, the following initialisms will be used for the formulation of Agency's ID

| Organization/Service Type | 3-letter initialism | Major Groups of Occupations belonging to each field (ISCO, 2008: broad classification)[16] |
|---|---|---|
| Child Protection Services | CPS | 39-0000 Personal Care and Service Occupations<br>21-0000 Community and Social Service Occupations |
| Social Welfare Services | SWS | 21-0000 Community and Social Service Occupations<br>39-0000 Personal Care and Service Occupations |
| Mental Health Services | MHS | 19-0000 Life, Physical, and Social Science Occupations |
| Primary Health Care Services | PHC | 29-0000 Healthcare Practitioners & Technical Occupations<br>31-0000 Healthcare Support Occupations<br>11-0000 Management Occupations |
| Secondary Health Care Services | SHC | |
| Tertiary Health Care Services | THC | |
| Judicial Services | JUD | 23-0000 Legal Occupations<br>43-0000 Office and Administrative Support Occupations |
| Police | POL | 33-0000 Protective Service Occupations |
| Other Law Enforcement-related Services | LES | |
| Preschool Educational Facilities | PEF | 25-0000 Education, Training, and Library Occupations<br>11-0000 Management Occupations<br>43-0000 Office and Administrative Support Occupations |
| Primary Educational Services | PES | |
| Secondary Educational Services | SES | |
| Vocational Educational Services | VES | |
| Already existing registries/CAN monitoring mechanisms | RSS | 15-0000 Computer and Mathematical Occupations |
| Research Organizations/ Institutions/ Universities | ROI | 19-0000 Life, Physical, and Social Science Occupations<br>15-0000 Computer and Mathematical Occupations |
| Independent Authorities (such as Child Ombudsman) | IAU | 11-0000 Management Occupations |
| Accredited NGOs | NGO | NA (could be all the broad categories) |
| Community Organizations | COM | NA (could be all the broad categories) |
| Other Related Services | ORS | 11-0000 Management Occupations |

**Professionals codes will be based on the detailed classification of occupations ISCO-2008 published by ILO, 2007.*

**D. Organization/Service Number (3 digits)**

Numerical ID per type of Organization/Service per geographical subdivision

[16] Bureau of Labor Statistics (2010). 2010 Standard Occupational Classification (final structure for the 2010 SOC). On behalf of the Standard Occupational Classification Policy Committee (SOCPC) (available at: http://www.bls.gov/oes/current/oes_stru.htm#11-0000).

# Working file 2: Instructions for creating Operators' IDs

**[see also Working file 11]**

**INSTRUCTIONS FOR GENERATING OPERATORS' IDs [DE_R2]**

| | |
|---|---|
| **ID format** | Instructions (on the basis of ILO 2007)<br>**18-digit* CODE formulated as follows:**<br>**+ 10-digit Agency's ID (V1)**<br>**+ Operators Professional Specialty: 4-digit (ILO, 2007 )**[17]<br>**+ 1 digit for the Access level (See Annex IIB)**<br>**+ 3-digit number indicating individual professionals working** in the same **Agency.**<br>***but Belgium which should have 19-digit*** |
| **Prerequisites:** | In order for a Professional to become Operator of CAN-MDS systems, s/he should:<br>a. to fulfill the pre-defined eligibility criteria, namely to belong in one of the eligible groups of professionals[18] (see Annex IIC)<br>b. to previously successfully attend the workshop for "CAN-MDS"<br>**TIP:** You can also use the respective information from your country profile report (if you think that the information in Chapter 4 *"Brief overview of child maltreatment prevention & child protection"* is sufficient) |
| **Secondary information needed:** | Operator's contact details<br>a. ***necessarily*** email and telephone number to be used for further communication with the Administrator<br>b. further contact details (such as address) will be already available in the Annex I of the national version |
| **Expected outcome:** | A list is expected to be developed that will include all Operators to be involved in the system along with their codes and contact details. Only System's Administrator will have this list. |
| **For the next period:** | A list including all national Core-Group Members (20-25 persons) as well as staff of your agency involved in the project. |
| **NOTE** | Given that Operator's ID includes the Agency's ID, information on where the Operator works (geographically, specific agency, type of agency and agency's contact details) will be readily available. |

[17] International Labour Organization. Resolution Concerning Updating the International Standard Classification of Occupations. Adopted at the Tripartite Meeting of Experts on Labour Statistics, 6 December 2007. (available at http://www.ilo.org/public/english/bureau/stat/isco/isco08/)

[18] WS3 WS3 Creating Synergies; Activity 1 *Developing of eligibility criteria for the creation of national CAN-MDS Operators' Core Groups (in the context of the project) and of national Expanded Groups (to be included into national policy manuals);* WS3 *D3.1 Eligibility criteria for CAN-MDS Operators' Core Groups and Expanded Groups*

**Examples based on International Standard Classification of Occupations (ILO, 2007)**

(please note that in the examples below the professional background is taken into account and NOT the academic title)

| Operator's ID<br>18 digit code<br>19 digit for BE | Operator's Identity Data Elements | | | | Operator | Readily available information deriving from the V2 to be used*<br>From a public health perspective<br>- To outline the administrative practices applied for CAN cases, especially the groups of professionals involved in services' responses to CAN cases<br>For case-level administration<br>- To operate as a communication channel among professionals working in the same or different sectors and are involved in administration of common CAN cases<br>- to facilitate follow-up at case-level |
|---|---|---|---|---|---|---|
| | Agency's Identity | Operator's Occupation Classification) ISCO 08 | Level of access | 3-digit ID NUMBER | | |
| BE-BRU-ROI-001-*2634*-1-001 | BE-BRU-ROI-001 | 2634 | 1 | 001 | Bert Van Puyenbroeck | Psychologist with level of access 1 (Full Access), 1st professional working in the *"Kind & Gezin"* located in subdivision [region (en) / Region (de) / région (fr) / gewest (nl)] of Brussels Hoofdstedelijk Gewest in Belgium |
| BE-BRU-ROI-001-*2634*-1-002 | BE-BRU-ROI-001 | 2634 | 2 | 002 | Benedikte Van den Bruel | Psychologist with level of access 2 (Limited Access), 2nd professional working in the *"Kind & Gezin"* located in subdivision [region (en) / Region (de) / région (fr) / gewest (nl)] of Brussels Hoofdstedelijk Gewest in Belgium |
| BE-BRU-ROI-001-*0121*-1-003 | BE-BRU-ROI-001 | 121 | 2 | 003 | Anneliese Hendrix | Administration Manager with level of access 2 (Limited Access) working in the *"Kind & Gezin"* located in subdivision [region (en) / Region (de) / région (fr) / gewest (nl)] of Brussels Hoofdstedelijk Gewest in Belgium |
| BG-01-ROI-001-*2212*-1-001 | BG-01-ROI-001 | 2212 | 1 | 001 | Vaska Stancheva-Popkostadinova | Specialist Medical Practitioner with level of access 1 (Full Access), 1st professional working in the *"South West University "Neofit Rilski", Faculty of Public Health and Sport"* in subdivision [région (fr) / region (en) / oblast (bg)] of Blagoevgrad in Bulgaria |
| BG-01-ROI-001-*0221*-1-002 | BG-01-ROI-001 | 221 | 1 | 002 | Stefka Chincheva | Medical Doctor with level of access 1 (Full Access), 2nd professional working in the *"South West University "Neofit Rilski", Faculty of Public Health and Sport"* in subdivision [région (fr) / region (en) / oblast (bg)] of Blagoevgrad in Bulgaria |
| BG-01-ROI-001-*2212*-2-003 | BG-01-ROI-001 | 2212 | 2 | 003 | Ekaterina Mitova | Specialist Medical practitioner with level of access 2 (Limited Access), 3rd professional working in the *"South West University "Neofit Rilski", Faculty of Public Health and Sport"* in subdivision [région (fr) / region (en) / oblast (bg)] of Blagoevgrad in Bulgaria |
| BG-01-ROI-001-*2611*-2-003 | BG-01-ROI-001 | 2611 | 2 | 004 | Elina Popova | Lawyer with level of access 2 (Limited Access), 4th professional working in the *"South West University "Neofit Rilski", Faculty of Public Health and Sport"* in subdivision [région (fr) / region (en) / oblast (bg)] of Blagoevgrad in Bulgaria |
| CH-LU-ROI-001-*2635*-1-001 | CH-LU-ROI-001 | 2635 | 1 | 001 | Andreas Jud | Social Worker with level of access 1 (Full Access) 1st professional working in *"Lucerne University of Applied Sciences & Arts, School of Social Work"* located in subdivision [Kanton (de) / canton (en) / chantun (rm) / cantone |

| | | | | | | |
|---|---|---|---|---|---|---|
| | | | | | | (it) / canton (fr)] of Luzern in Switzerland |
| DE-BW-ROI-001-*2634*-1-001 | DE-BW-ROI-001 | 2634 | 1 | 001 | Lutz Goldbeck | Psychologist with level of access 1 (Full Access), 1st professional working in *"University Ulm, Department of Child and Adolescent Psychiatry/Psychotherapy"* located in subdivision [Land (en) / Länder (de) / Land (fr)] of Baden-Württemberg in Germany |
| DE-BW-ROI-001-*2634*-1-002 | DE-BW-ROI-001 | 2634 | 1 | 002 | Andreas Witt | Psychologist with level of access 1 (Full Access), 2nd professional working in *"University Ulm, Department of Child and Adolescent Psychiatry/Psychotherapy"* located in subdivision [Land (en) / Länder (de) / Land (fr)] of Baden-Württemberg in Germany |
| FR-75-RSS-001-*2632*-1-001 | FR-75-RSS-001 | 2632 | 1 | 001 | Gilles Séraphin | Sociologist with level of access 1 (Full Access), 2nd professional working in "Observatoire national de l'enfance en danger (ONED)" located in in subdivision [département métropolitain (fr) / metropolitan department (en)] of Paris, in [région métropolitaine (fr) / metropolitan region (en) Île-de-France FR-J)] in France |
| FR-75-RSS-001-*2633*-1-002 | FR-75-RSS-001 | 2633 | 1 | 002 | Flora Bolter | Political Scientist with level of access 1 (Full Access), 2nd professional working in "Observatoire national de l'enfance en danger (ONED)" located in in subdivision [département métropolitain (fr) / metropolitan department (en)] of Paris, in [région métropolitaine (fr) / metropolitan region (en) Île-de-France FR-J)] in France |
| FR-75-RSS-001-*2634*-1-002 | FR-75-RSS-001 | 2634 | 1 | 003 | Marie-Paule Martin-Blachais | Psychologist with level of access 1 (Full Access), 3rd professional working in "Observatoire national de l'enfance en danger (ONED)" located in in subdivision [département métropolitain (fr) / metropolitan department (en)] of Paris, in [région métropolitaine (fr) / metropolitan region (en) Île-de-France FR-J)] in France |
| FR-75-RSS-001-*2631*-1-002 | FR-75-RSS-001 | 2631 | 1 | 004 | Adeline Renuy | Economist with level of access 1 (Full Access), 4th professional working in "Observatoire national de l'enfance en danger (ONED)" located in in subdivision [département métropolitain (fr) / metropolitan department (en)] of Paris, in [région métropolitaine (fr) / metropolitan region (en) Île-de-France FR-J)] in France |
| GR-A1-ROI-001-*2212*-1-001 | GR-A1-ROI-001 | 2212 | 1 | 001 | George Nikolaidis | Psychiatrist with level of access 1 (Full Access), 1st professional working in "*Institute of Child Health, Department of Mental Health and Social Welfare*" located in subdivision [département (fr) / department (en) / nomos (el)] of Attiki [administrative region (en) / periféreia (el) / région administrative (fr) Attiki Prefecture, GR-I] in Greece |
| GR-A1-ROI-001-*0334*-3-002 | GR-A1-ROI-001 | 334 | 3 | 002 | Eleni Michalopoulou | Specialized Administrative secretary with level of access 3 (Restricted Access), 2nd professional working in "*Institute of Child Health, Department of Mental Health and Social Welfare*" located in subdivision [département (fr) / department (en) / nomos (el)] of Attiki [administrative region (en) / periféreia (el) / région administrative (fr) Attiki Prefecture, GR-I] in Greece |
| GR-A1-ROI-001-*2634*-1-003 | GR-A1-ROI-001 | 2634 | 1 | 003 | Sakis Ntinapogias | Psychologist with level of access 1 (Full Access), 3rd professional working in "*Institute of Child Health, Department of Mental Health and Social Welfare*" |

| | | | | | | |
|---|---|---|---|---|---|---|
| | | | | | | located in subdivision [département (fr) / department (en) / nomos (el)] of Attiki [administrative region (en) / périféreia (el) / région administrative (fr) Attiki Prefecture, GR-I] in Greece |
| IT-FI-ROI-001-*2634*-1-001 | IT-FI-ROI-001 | 2634 | 1 | 001 | Donata Bianchi | Psychologist with level of access 1 (Full Access), 1st professional working in "*Istituto degli Innocenti*" located in subdivision [province (fr) / province (en) / provincia (it)] of Firenze [regione (it) / région (fr) Toscana, IT-52] in Italy |
| IT-FI-ROI-001-*2633*-1-002 | IT-FI-ROI-001 | 2633 | 1 | 002 | Silvia Mammini | Political Scientist with level of access 1 (Full Access), 2nd professional working in "*Istituto degli Innocenti*" located in subdivision [province (fr) / province (en) / provincia (it)] of Firenze [regione (it) / région (fr) Toscana, IT-52] in Italy |
| IT-FI-ROI-001-*2611*-2-003 | IT-FI-ROI-001 | 2611 | 2 | 003 | Paola Pili | Lawyer with level of access 2 (Limited Access), 3rd professional working in "*Istituto degli Innocenti*" located in subdivision [province (fr) / province (en) / provincia (it)] of Firenze [regione (it) / région (fr) Toscana, IT-52] in Italy |
| IT-FI-ROI-001-*2611*-2-004 | IT-FI-ROI-001 | 2611 | 2 | 004 | Giulia Biagioni | Lawyer with level of access 2 (Limited Access), 4th professional working in "*Istituto degli Innocenti*" located in subdivision [province (fr) / province (en) / provincia (it)] of Firenze [regione (it) / région (fr) Toscana, IT-52] in Italy |
| IT-FI-ROI-001-*2633*-1-002 | IT-FI-ROI-001 | 2633 | 1 | 005 | Stefano Mattiuzzo | Political Scientist with level of access 2 (Limited Access), 5th professional working in "*Istituto degli Innocenti*" located in subdivision [province (fr) / province (en) / provincia (it)] of Firenze [regione (it) / région (fr) Toscana, IT-52] in Italy |
| RO-CJ-ROI-001-*2635*-1-001 | RO-CJ-ROI-001 | 2635 | 1 | 001 | Maria Roth | Social Worker with level of access 1 (Full Access) 1st professional working in "Babes-Bolyai University, Department of Sociology and Social Work" located in in subdivision [department (en) / judeţ (ro) / département (fr)] of Cluj in Romania |
| RO-CJ-ROI-001-*2634*-1-002 | RO-CJ-ROI-001 | 2634 | 1 | 002 | Imola Antal | Psychologist with level of access 1 (Full Access) 2nd professional working in "Babes-Bolyai University, Department of Sociology and Social Work" located in in subdivision [department (en) / judeţ (ro) / département (fr)] of Cluj in Romania |
| RO-CJ-ROI-001-*2634*-1-003 | RO-CJ-ROI-001 | 2634 | 1 | 003 | Tonk Gabriella | Psychologist with level of access 1 (Full Access) 3rd professional working in "Babes-Bolyai University, Department of Sociology and Social Work" located in in subdivision [department (en) / judeţ (ro) / département (fr)] of Cluj in Romania |

* To collect data on the professional backround of "professionals-operators" who are involved in receiving referrals/ detect cases, recording of cases and involved in case administration in order to map their "responsibilities". These data could be useful for agencies' administrators and policy makers for assessing the educational needs of the different groups of professionals who are mainly involved in the administration of CAN cases. Moreover, this information would also be useful for future improvement of the eligibility criteria for potential CAN-MDS operators.

**ANNEX**

A. Agency's ID (See working file 1)

B. **ISCO-08: International Standards for Classificiation of Occupations (ILO, 2007)**

Available at: http://www.ilo.org/public/english/bureau/stat/isco/docs/gdstruct08.doc (word format) and at: http://www.ilo.org/public/english/bureau/stat/isco/docs/gdstruct08.xls (excel format).

*"The Tripartite Meeting of Experts on Labour Statistics on Updating the International Standard Classification of Occupations (ISCO) [,…] Adopts, this sixth day of December 2007, the following resolution*

1. *The occupational classification system of major, sub-major, minor and unit groups shown in the Annex to this resolution is endorsed by the Meeting of Experts in Labour Statistics and is designated the International Standard Classification of Occupations, 2008 (ISCO-08).*
2. *ISCO classifies jobs. A Job is defined for the purposes of ISCO-08 as a set of tasks and duties performed, or meant to be performed, by one person, including for an employer or in self employment.*
3. *An occupation is defined as a set of jobs whose main tasks and duties are characterised by a high degree of similarity. A person may be associated with an occupation through the main job currently held, a second job or a job previously held.*
4. *Jobs are classified by occupation with respect to the type of work performed, or to be performed. The basic criteria used to define the system of major, sub-major, minor and unit groups are the "skill level" and "skill specialization" required to competently perform the tasks and duties of the occupations.*
5. *In collecting and processing statistics classified by occupation (e.g. for use in fields such as labour market analysis, educational planning, human resource planning, occupational health and safety analysis, wages analysis, etc.), each country should endeavour to compile data that can be converted to the ISCO-08 system, to facilitate the international use and comparison of occupational information."*[19]

| **ISCO 08 Code** | **Title EN (full list available at: http://www.ilo.org/public/english/bureau/stat/isco/isco08/)** |
|---|---|
| 134 | Professional services managers |
| 1341 | Child care services managers |
| 1342 | Health services managers |
| 1344 | Social welfare managers |
| 1345 | Education managers |
| 1349 | Professional services managers not elsewhere classified |
| 143 | Other services managers |
| 1431 | Sports, recreation and cultural centre managers |
| 1439 | Services managers not elsewhere classified |
| 2 | Professionals |
| 2120 | Mathematicians, actuaries and statisticians |
| 22 | Health professionals |
| 221 | Medical doctors |
| 2211 | Generalist medical practitioners |
| 2212 | Specialist medical practitioners |
| 222 | Nursing and midwifery professionals |
| 2221 | Nursing professionals |
| 2222 | Midwifery professionals |
| 223 | Traditional and complementary medicine professionals |
| 2230 | Traditional and complementary medicine professionals |
| 2240 | Paramedical practitioners |
| 226 | Other health professionals |
| 2261 | Dentists |
| 2264 | Physiotherapists |
| 2265 | Dieticians and nutritionists |

[19] International Labour Organization (2007). Resolution Concerning Updating the International Standard Classification of Occupations. Adopted at the Tripartite Meeting of Experts on Labour Statistics. (Available at: http://www.ilo.org/public/english/bureau/stat/isco/docs/resol08.doc)

| | |
|---|---|
| 2266 | Audiologists and speech therapists |
| 2267 | Optometrists and ophthalmic opticians |
| 2269 | Health professionals not elsewhere classified |
| 23 | Teaching professionals |
| 232 | Vocational education teachers |
| 2320 | Vocational education teachers |
| 233 | Secondary education teachers |
| 2330 | Secondary education teachers |
| 234 | Primary school and early childhood teachers |
| 2341 | Primary school teachers |
| 2342 | Early childhood educators |
| 235 | Other teaching professionals |
| 2351 | Education methods specialists |
| 2352 | Special needs teachers |
| 2353 | Other language teachers |
| 2354 | Other music teachers |
| 2355 | Other arts teachers |
| 2359 | Teaching professionals not elsewhere classified |
| 2522 | Systems administrators |
| 2529 | Database and network professionals not elsewhere classified |
| 26 | Legal, social and cultural professionals |
| 261 | Legal professionals |
| 2611 | Lawyers |
| 2612 | Judges |
| 2619 | Legal professionals not elsewhere classified |
| 263 | Social and religious professionals |
| 2632 | Sociologists, anthropologists and related professionals |
| 2633 | Philosophers, historians and political scientists |
| 2634 | Psychologists |
| 2635 | Social work and counselling professionals |
| 2636 | Religious professionals |
| 32 | Health associate professionals |
| 321 | Medical and pharmaceutical technicians |
| 3211 | Medical imaging and therapeutic equipment technicians |
| 3212 | Medical and pathology laboratory technicians |
| 3213 | Pharmaceutical technicians and assistants |
| 3214 | Medical and dental prosthetic technicians |
| 322 | Nursing and midwifery associate professionals |
| 3221 | Nursing associate professionals |
| 3222 | Midwifery associate professionals |
| 323 | Traditional and complementary medicine associate professionals |
| 3230 | Traditional and complementary medicine associate professionals |
| 325 | Other health associate professionals |
| 3251 | Dental assistants and therapists |
| 3252 | Medical records and health information technicians |
| 3253 | Community health workers |
| 3254 | Dispensing opticians |
| 3255 | Physiotherapy technicians and assistants |
| 3256 | Medical assistants |
| 3258 | Ambulance workers |
| 3259 | Health associate professionals not elsewhere classified |
| 3314 | Statistical, mathematical and related associate professionals |
| 3342 | Legal secretaries |
| 3344 | Medical secretaries |

| | |
|---|---|
| 3355 | Police inspectors and detectives |
| 34 | Legal, social, cultural and related associate professionals |
| 341 | Legal, social and religious associate professionals |
| 3411 | Police inspectors and detectives |
| 3412 | Social work associate professionals |
| 3413 | Religious associate professionals |
| 342 | Sports and fitness workers |
| 3422 | Sports coaches, instructors and officials |
| 53 | Personal care workers |
| 531 | Child care workers and teachers' aides |
| 5311 | Child care workers |
| 5312 | Teachers' aides |
| 532 | Personal care workers in health services |
| 5321 | Health care assistants |
| 5322 | Home-based personal care workers |
| 5329 | Personal care workers in health services not elsewhere classified |
| 54 | Protective services workers |
| 541 | Protective services workers |
| 5411 | Fire-fighters |
| 5412 | Police officers |
| 5413 | Prison guards |
| 5414 | Security guards |
| 5419 | Protective services workers not elsewhere classified |

### C. Levels of Access[20]

| Responsibilities | Level of access | Attributes & *"rights"* of the level of access |
|---|---|---|
| **System Administrator** | **Full Access** | enters data WITH access to ALL data, aggregated AND disaggregated (at case-level) (view/ edit/ delete) and to users' accounts create/edit/delete) |
| - Making decision on whether sufficient evidence exists to prosecute (alleged) offenders | **Full View access (level 1)** | enters data WITH view access to ALL data, aggregated AND disaggregated (at case-level) (view/ edit/ delete) and to users' accounts (view) |
| - Conducting initial assessments for suspected CAN cases<br>- Providing services to CAN victims (diagnostic/ treatment/ consultation/ care)<br>- Providing services to CAN victims' families (supporting)<br>- Following-up of CAN cases | **Limited access (level 2)** | enters data WITH access to data entered by the same user (view/ edit/delete) AND to data entered by other users for the same case (view) |
| - Notifying (optionally) authorities of (suspected) CAN cases<br>- Reporting mandatorily (suspected) CAN cases<br>- Applying screening in the general child population for CAN<br>- Providing emergency protective measures to CAN victims<br>- Providing legal advice/ consultation/ advocacy for CAN cases | **Limited access (level 3)** | enters data WITH access ONLY to data entered by the specific user (view/edit/delete)] |
| - No administration-Making referrals to other services for ALL cases<br>- Professionals not subjected to a code of ethics or related national legislation | **No access** | no *"rights"* |

[20] CAN-MDS WS3, Act. 1 Developing of eligibility criteria for the creation of national CAN-MDS Operators' Core Groups (in the context of the project) and of national Expanded Groups,*D3.1: Eligibility criteria for CAN-MDS Operators' Core Groups and Expanded Groups*

**Recommended Data sources and corresponding level of access in CAN-MDS**

(Core data sources/ Expanded data sources -where applicable, according to country specifics)

| Full View Access (Level 1) | Limited Access (Level 2) | Limited Access (Level 3) |
|---|---|---|
| - **Public Prosecutors working in Judicial Services**<br>- **Social Workers working in Child Protection System** | - Social Workers working in Social Welfare Services<br>- Social Workers working in Accredited NGOs/ Community Organizations<br>- Mental Health Professionals (psychologists, psychiatrists) working in Mental Health services<br>- Child Psychiatrists working in Health Care Services<br>- Child Psychiatrists working in Mental Health Services<br>- Psychologists working in Child Protection/Social Welfare Services<br>- Psychologists working in Health Care Services<br>- Psychologists working in Mental Health Services<br>- Paediatricians working in Health Care Services<br>- Medical Doctors (different specialties, e.g. orthopaedists, radiologists) working in Health Care Services<br>- Police Officers working in Law Enforcement-related Services<br>- Mental Health Professionals *(psychologists, psychiatrists)* working in Law Enforcement related services<br>- Licensed Counsellors working in CPS/Social Welfare Services<br>- Licensed Counsellors working in Mental Health Services<br>- Judges working in Judicial Services<br>- Gynaecologists working in Health Care Services<br>- Nurses working in CPS/Social Welfare Services<br>- Midwives working in CPS/Social Welfare Services<br>- Data administrators working in existing related registries<br>- Legitimate researchers working to human subject protection | - Social Workers working in Health Care Services<br>- Mental Health Professionals *(psychologists, psychiatrists, licensed counsellors)* working in Accredited NGOs/Community Organizations<br>- Social Workers working in Education Services<br>- Social Workers working in Mental Health Services<br>- Care Providers in Institutions working in Child Protection System/ Social Welfare Services<br>- Psychologists working in Educational Services<br>- Licensed Counsellors working in Education<br>- Probation Officers working in Judicial Services<br>- Other Justice-related professions working in Judicial Services<br>- Nurses working in Accredited NGOs/Community Organizations<br>- Teachers/educators (pre-school, kindergarten, primary and secondary education, for children with special needs, school principals) working in Educational services<br>- Other personnel working in antitrafficking, directorate for disability, Child Ombudsman, etc.) working in Independent Authorities |

**D. Organization/Service Number (3 digits)**

Numerical ID per Professional per Agency

# Working file 3: Mandatory and Recommended vaccinations

**[I3_B_3.01]** Omissions < Medical neglect < **failure to provide preventive health care** < **vaccinations**

National adaptation according to "Modality of implementation of childhood vaccination programme by country"[21]

| | Belgium | Bulgaria | France | Germany | Greece | Italy | Romania |
|---|---|---|---|---|---|---|---|
| Diphtheria | RA | MA | MA/MR/RA[1] | RA | MA | MA[2] | MA |
| Haemophilus influenzae type B | RA | MA | RA | RA | RA | RA | MA |
| Hepatitis A | RR | RR | RR | RR | RA | A[3] | RR |
| Hepatitis B | MR/RA[4] | MA | MR/RA[4] | RA | MA[5] | MA | MA |
| Human Papillomavirus a | R | R | R | R | R | R | R |
| Influenza | RR | RR | RR | RR | RR | RR | RR |
| Invasive disease caused by Neisseria meningitides group C | RA | A | RA | RA | RA | RA/RR[6] | RA |
| Invasive pneumococcal disease | RA | MA/RA[7] | RA | RA | RA | RA/RR[6] | A |
| Measles-mumps-Rubella | RA | MA | RA | RA | RA | RA | MA |
| Pertussis | RA | MA | RA | RA | RA | RA | MA |
| Polio | MA | MA | MA/MR/RA[8] | RA | MA[5] | MA | MA |
| Rotavirus | RA | RA | A | A | A | A | A |
| Tetanus | RA | MA | MA/MR/RA[1] | RA | MA | MA | MA |
| Tuberculosis (with Bacillus Calmette-Guérin ) | A | MA | MR/RR[4] | A | RA | RR | MA |
| Varicella | RR | A | RR | RA | RA | RA/RR[6] | A |

**MA:** mandatory for all
**MR:** mandatory for people at risk
**RA:** recommended for all
**RR:** recommended for people at risk
**R:** recommended
**A:** absence of recommendation

1. MA: children up to 18 months of age./ MR: healthcare workers./ RA: bolder than 13 years of age.
2. One of 20 regions does not have any mandatory vaccination as of 2008.
3. RA: only in one region.
4. Mandatory for healthcare workers.
5. No penalty exists for non-compliance.
6. Regional variability.
7. RA: children born prior to 2010 and younger than five years of age.
8. MA: children up to 13 years of age. MR: healthcare workers. RA: older than 13 years of age.

[21] Haverkate M, D'Ancona F, Giambi C, Johansen K, Lopalco PL, Cozza V, Appelgren E, on behalf of the VENICE project gatekeepers and contact points. Mandatory and recommended vaccination in the EU, Iceland and Norway: results of the VENICE 2010 survey on the ways of implementing national vaccination programmes. Euro Surveill. 2012;17(22):pii=20183. Available online: http://www.eurosurveillance.org/ViewArticle.aspx?ArticleId=20183

# Working file 4: Education related information

**[I3_B_4]** Omissions < educational neglect related omissions

Useful information for national adaptation of permissible values related to educational neglect omissions

**Compulsory Education in Europe 2014-15**

Source: http://eacea.ec.europa.eu/education/eurydice/documents/facts_and_figures/compulsory_education_EN.pdf

| Student's age-groups and duration of compulsory education 2014-15 | Full-time education/schooling | | | | | | | | | Additional compulsory part-time | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | Starting age | | | | Ending age | | | | | Duration (in years) | Ending age |
| | 4 | 5 | 6 | 7 | 14 | 15 | 16 | 17 | 18 | | |
| BE fr | | | ISCED 1 | | | X | | | | 9 | 18 |
| BE de | | | ISCED 1 | | | X | | | | 9 | 18 |
| BE nl | | | ISCED 1 | | | X | | | | 9 | 18 |
| BG | | | | ISCED 1 | | | X | | | 9 | Na |
| DE (12 Länder) | | | ISCED 1 | | | X | | | | 9 | 18 |
| DE (5 Länder) | | | ISCED 1 | | | | X | | | 10 | 19 |
| FR | | | ISCED 1 | | | | X | | | 10 | Na |
| GR | | ISCED 0 | ISCED 1 | | | X | | | | 10 | Na |
| IT | | | ISCED 1 | | | | X | | | 10 | Na |
| RO | | | ISCED 1 | | | | | X | | 11 | na |

**ISCED 2011: International Standard Classification of Education**

ISCED 0: Early Childhood Education Programmes at this level are typically designed with a holistic approach to support children's early cognitive, physical, social and emotional development and introduce young children to organised instruction outside of the family context. ISCED level 0 refers to early childhood programmes that have an intentional education component.

ISCED 1: Primary education Programmes at this level are typically designed to provide students with fundamental skills in reading, writing and mathematics (i.e. literacy and numeracy) and establish a solid foundation for learning and understanding core areas of knowledge, personal and social development, in preparation for lower secondary education. Age is typically the only entry requirement at this level. The customary or legal age of entry is usually not below 5 years old nor above 7 years old. This level typically lasts six years, although its duration can range between four and seven years.

ISCED 2: Lower secondary education Programmes at this level are typically designed to build on the learning outcomes from ISCED level 1. Students enter ISCED level 2 typically between ages 10 and 13 (age 12 being the most common).

ISCED 3: Upper secondary education Programmes at this level are typically designed to complete secondary education in preparation for tertiary education or provide skills relevant to employment, or both. Pupils enter this level typically between ages 14 and 16.

ISCED 4: Post-secondary non-tertiary education Post-secondary non-tertiary education provides learning experiences building on secondary education, preparing for labour market entry as well as tertiary education. Programmes at ISCED level 4, or post-secondary non-tertiary education, are typically designed to provide individuals who completed ISCED level 3 with non-tertiary qualifications required for progression to tertiary education or for employment when their ISCED level 3 qualifications do not grant such access. The completion of an ISCED level 3 programme is required to enter ISCED level 4 programmes.

ISCED 5: Short-cycle tertiary education Programmes at this level are often designed to provide participants with professional knowledge, skills and competencies. Typically, they are practically based, occupationally-specific and prepare students to enter the labour market. However, these programmes may also provide a pathway to other tertiary education programmes. Entry into ISCED level 5 programmes requires the successful completion of ISCED level 3 or 4 with access to tertiary education.

ISCED 6: Bachelors' or equivalent level Programmes at this level, are often designed to provide participants with intermediate academic and/or professional knowledge, skills and competencies, leading to a first degree or equivalent qualification. Entry into these programmes normally requires the successful completion of an ISCED level 3 or 4 programme with access to tertiary education. Entry may depend on subject choice and/or grades achieved at ISCED levels 3 and/or 4. Additionally, it may be

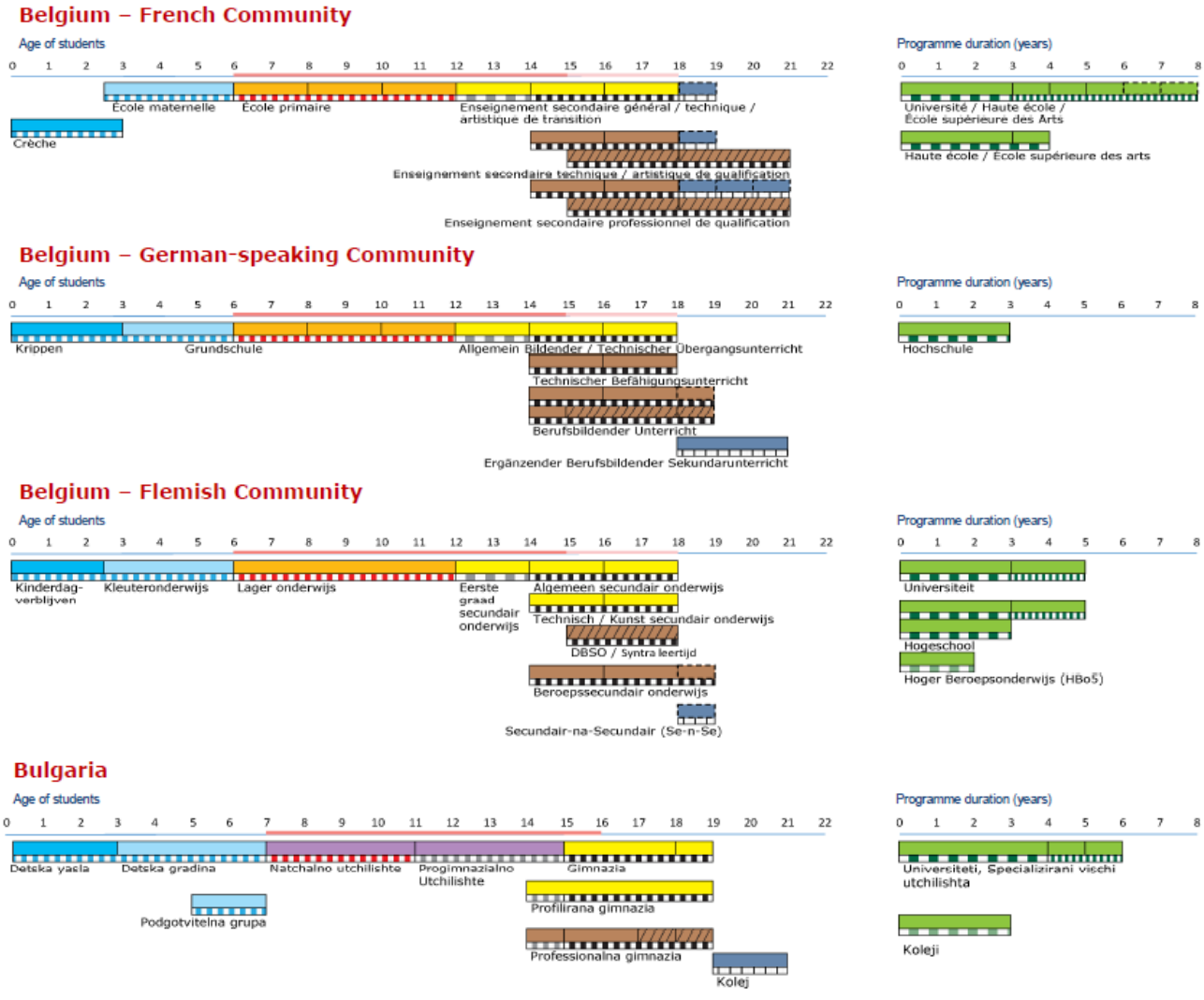
required to take and succeed in entry examinations. Entry or transfer into ISCED level 6 is also sometimes possible after the successful completion of ISCED level 5.

ISCED 7: Master's or equivalent level Programmes at this level, are often designed to provide participants with advanced academic and/or professional knowledge, skills and competencies, leading to a second degree or equivalent qualification. Typically, programmes at this level are theoretically-based but may include practical components and are informed by state of the art research and/or best professional practice. They are traditionally offered by universities and other tertiary educational institutions. Entry into ISCED level 7 programmes preparing for a second or further degree normally requires the successful completion of an ISCED level 6 or 7 programme. In the case of long programmes that prepare for a first degree equivalent to a Master's degree, entry requires the successful completion of an ISCED level 3 or 4 programme with access to tertiary education. Entry into such programmes may depend on subject choice and/or grades achieved at ISCED levels 3 and/or 4. Additionally, it may be required to take and succeed in entry examinations. For the full details on each ISCED level, please consult: UNESCO, Institute for Statistics, 2012. International Standard Classification of Education. ISCED 2011.

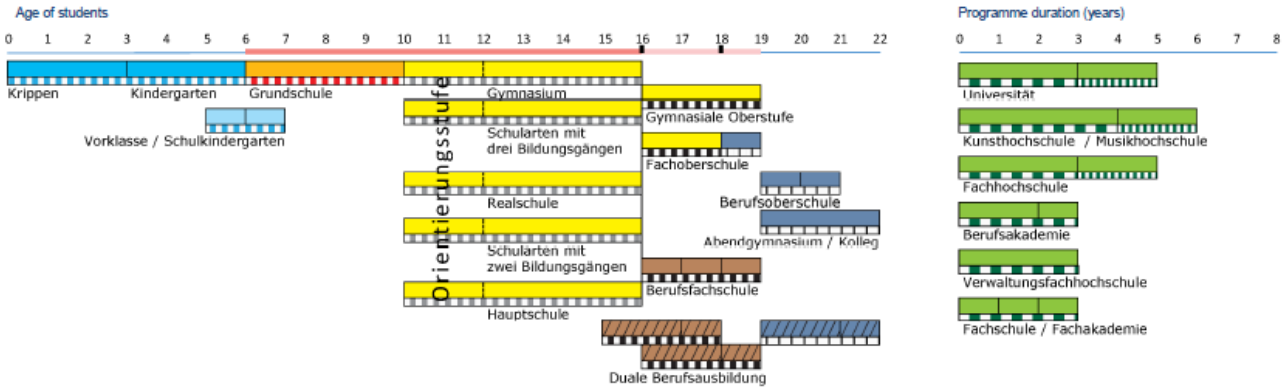
Available at: http://www.uis.unesco.org/Education/Documents/isced-2011-en.pdf

**The Structure of the European Education Systems 2014/15: Schematic Diagrams November 2014**

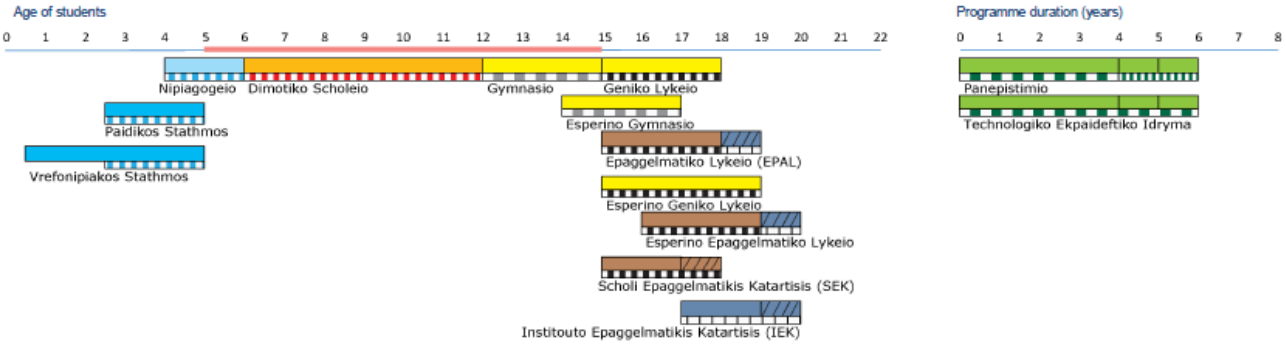
Source: http://eacea.ec.europa.eu/education/eurydice/documents/facts_and_figures/education_structures_EN.pdf



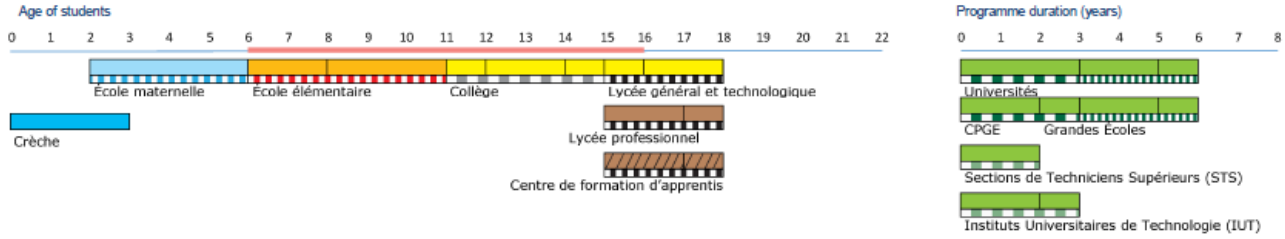
## Germany



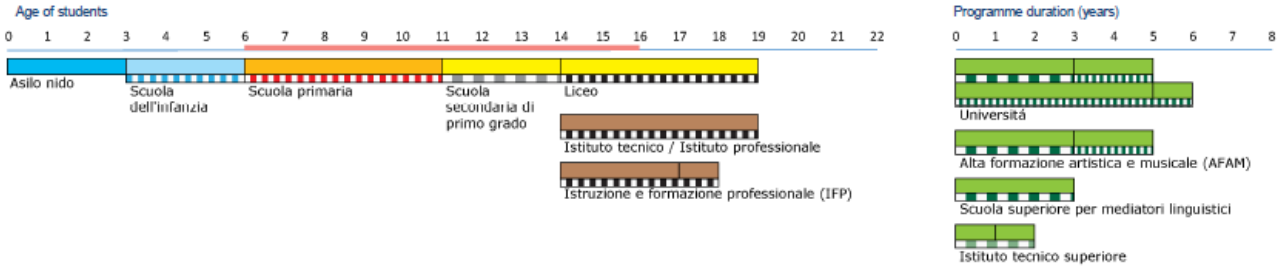

## Greece



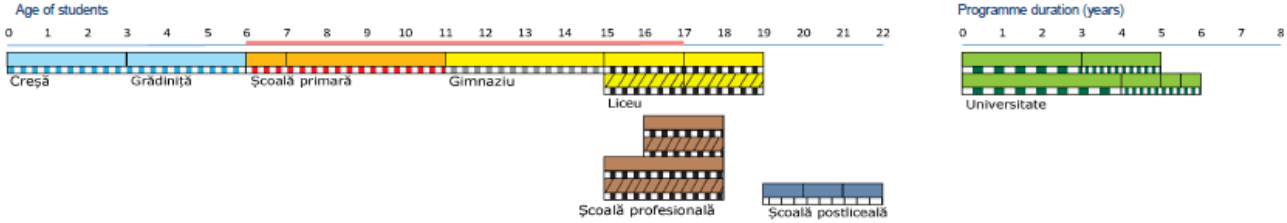

## France

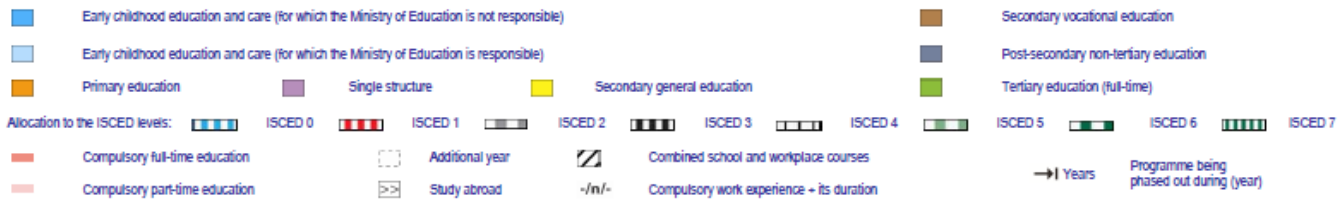



## Italy




## Romania






**Early childhood education and care** (ECEC): Provision for children from birth through to primary education that falls within a national regulatory framework, i.e., it has to comply with a set of rules, minimum standards and/or undergo accreditation procedures.

source: European Commission/EACEA/Eurydice/Eurostat, 2014. *Key Data on Early Childhood Education and Care in Europe. 2014 Edition.* Eurydice and Eurostat Report. Luxembourg: Publications Office of the European Union.

**Legal entitlement and/or compulsory ECEC, including starting age and weekly hours, 2012/13**

| | BE fr | BE de | BE nl | BG | DE | FR | GR | IT | RO |
|---|---|---|---|---|---|---|---|---|---|
| Starting age of **legal entitlement** (years) | 2½ | 3 | 2½ | | 3 | 3 | | - | - |
| Starting age of **compulsory ECEC (years)** | | | | 5 | | | 5 | | |
| **Weekly duration** (hours) | 28 | 28 | 28 | 20 24) | 40 | 24 | 22.5 | - | - |

*Source:* Eurydice.

**Country specific notes**
**Bulgaria**: Compulsory ECEC: 5-year-olds – 20 hours; 6-year-olds – 24 hours.
**Germany**: From August 2013, the legal entitlement to subsidised ECEC is from age 1.
**Romania**: From September 2014, all 5-year-olds will have a legal entitlement to ECEC.
**Switzerland**: In 19 cantons (out of 26) attendance of pre-primary education is compulsory. Depending on the canton, compulsory pre-primary provision lasts one or two years. In those cantons where pre-primary education is not compulsory, children from the age of 4 or 5 are legally entitled to a publicly subsidised place.

**Explanatory note:** Legal entitlement or compulsory ECEC that applies only to certain categories of learners (e.g. disadvantaged learners) is not considered [**Legal entitlement to ECEC** refers to a statutory duty on ECEC providers to secure publicly subsidised ECEC provision for all children living in a catchment area whose parents, regardless of their employment, socio-economic or family status, require a place for their child]

**ECEC Organization**
**Belgium – French Community**
Children from 3 months to 3 years may attend different types of centre-based settings (milieu d'accueil collectif), including crèche, prégardiennat, maison communale d'accueil de l'enfance (MCAE) or maison d'enfants. In addition, there is also a system of regulated home-based care, which is delivered by child-minders (accueillantes d'enfants) who either work independently (accueillantes d'enfants
autonomes) or are affiliated to specific child-minding organisations (accueillantes d'enfants conventionnées). Home-based and centre-based care for the youngest children falls under the responsibility of the organisation ONE (Office de la Naissance et de l'Enfance), which is under the authority of the Minister of Childhood. From age 2½, children are legally entitled to free early childhood education in the école maternelle. This area falls under the responsibility of the Minister of Education. Primary education starts at age 6.

**Belgium – German speaking Community**
Up to the age of 3, children mostly attend regulated home-based care, which is provided by child-minders (Tagesmütter) who either work independently (Selbstständige Tagesmütter) or are affiliated to a specific child-minding Organisation (Tagesmütterdienst – TMD). There is also a centre-based setting known as Kinderkrippe. ECEC for the youngest children falls

under the responsibility of the Ministry of Employment, Health and Social Affairs. From age 3, children are legally entitled to free early childhood education in Kindergarten. This area falls under the responsibility of the Ministry of Education. Primary education starts at age 6.

**Belgium – Flemish Community**

Early childhood education and care is divided into two main areas: formal child care for children from birth to 3 years that can be home-based (Onthaalouders) or centre-based (Kinderdagverblijven), and pre-primary education (Kleuteronderwijs) for children from age 2½ The first area falls under the responsibility of the Flemish Minister of Welfare, Health and Family and is administered by the agency Kind en Gezin. Preprimary education for children over 2½ falls under the responsibility of the Flemish Ministry of Education and Training. From age 2½, children are legally entitled to free pre-primary education. Primary education starts at age 6.

**Reforms:** From 1 April 2014, a new decree on childcare (0 to 3) will be implemented. This will be combined with a whole new regulation. Accreditation and evaluation procedures will be the same for public and private settings in order to strive for more uniform quality in every setting. A new and more uniform subsidy system linking subsidies with specific responsibilities will be introduced.

**Bulgaria**

Children aged between 3 months and 3 years may attend centre-based settings known as detska yasla. From age 3, early childhood education is available in detska gradina, where the Ministry of Education and Science is responsible for the education process. The last two years of pre-primary education (i.e. between the ages 5 and 7) are compulsory and children may take them either in detska gradina or in primary school (uchiliste). In addition to the separate settings for younger and older children, there are also unitary settings (obedineni detski zavedenia) intended for children aged between 10 months and 7 years. The provision in these settings is structured according to the above phases (i.e. up to 3 years, between 3 and 5 years, and between 5 and 7 years of age). Primary education starts at age 7.

**France**

The ECEC system includes various types of provision, especially for the youngest children. Provision for the under-3s consists of centre-based crèches and other structures collectives (group settings) (e.g. jardins d'éveil, classes passerelles, etc.), which are complemented by regulated home-based provision provided by assistant(e)s maternel(le)s agréé(e)s. ECEC policies and subsidies aim to provide choice and flexibility for parents to use more than one type of provision at the same time. The statistics provided show only the main forms of provision. Home-based ECEC is often used to complement centre-based ECEC. From age 3, all children are enrolled in pre-primary schools (écoles maternelles) which are coordinated by the Ministry of Education. Most children attend free public schools in their catchment area, while less than a third enrol in fee-paying (although subsidised) private schools. Primary education starts at age 6.

**Reforms:** As of 2013/14, children from the age of 2 may be enrolled in pre-primary schools (écoles maternelles). This measure is being implemented progressively with priority given to children from socially disadvantaged areas. The educational staff-pupil ratio for 2 year-old children is lower than for older children.

**Germany**

The ECEC system is highly decentralised and comprises several different types of setting. Childcare centres (Tageseinrichtung) provide for either younger or older children separately (in Krippen and Kindergarten, respectively) or operate as one setting for the entire ECEC phase. In addition to centre-based ECEC provision, there is also a system of regulated and publicly subsidised home-based care (Tagespflege), which mainly caters for the youngest children (between 0 and 3), but may also deliver parttime provision for older children. Prior to the beginning of primary education, some Länder provide pre-school education (Vorschuleinrichtung). However, this provision only covers a very small proportion of children and is therefore not represented in the diagram. At the federal/national level, the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth is responsible for ECEC in both homebased and centre-base provision. At Länder level, it can be either the ministry of family affairs or the ministry of education. Until 2013, parents were legally entitled to a publicly subsidised childcare place when their child reached age 3. Primary education starts at age 6.

**Reforms:** From August 2013, the starting age for the legal entitlement to subsidised ECEC has been lowered to 1 year.

**Greece**

From 6 months to 5 years, children can attend infant centres (vrefonipiakos stathmos). Between the ages of 2½ and 5, parents can opt for a place in a child centre (paidikos stathmos). Both types of centres must set up their rules of operation in compliance with the regulations specified in the ministerial decision currently in force. These rules of operation must then be approved by the relevant municipal council. From age 4, children can attend a pre-primary school (nipiagogeio), which is compulsory for those aged between 5 and 6. This type of provision falls under the responsibility of the Ministry of Education and Religious Affairs. Primary education starts at age 6.

**Italy**

The system of early childhood education and care includes settings for children between 0 and 3 years known as nido d'infanzia and settings for children between 3 and 6 years (scuola dell'infanzia). The latter settings fall under the responsibility of the Ministry of Education, while the provision for young children is highly decentralised and managed at local level by Communes according to their own regulations. Alongside centre-based provision, home based provision (asilo familiare) is becoming more and more common. However, it is not regulated centrally and is not available across the whole country. In addition to the settings represented in the diagram, there are also other types of provision for young children, including 'spring sections (sezioni primavera) aimed at children aged from 2 to 3 years. This new service has been introduced to meet the demand of families. Primary education starts at age 6.

**Romania**

Up to the age of 3, children are provided early childhood care in centre-based settings known as creşa. From age 3 years (sometimes even from age 2) up to 6 years, children may attend a centre based gradinita. The Ministry of National Education is entirely responsible for the ECEC of children over 3 years of age in gradinita. However, it shares responsibility with the Ministry of Health and the Ministry of Labour, Family, Social Protection and Elderly for children under 3 years. Primary education starts at age 6. However, prior to entry into force of the Law of National Education 1/2011, parents could choose where to enrol their children: at the age of 6, a child could be either in kindergarten or at school, in grade 1.

**Reforms:** From 2014 September, children aged 5 to 6 will have a legal right to a place in a gradinita.

**Switzerland**

Due to the federal structure the ECEC system in Switzerland is highly decentralized and differs across 26 cantons. There are, however, some characteristics common to the whole system. Centre-based ECEC (in Kindertagesstätten or Krippen/Structures d'accueil collectif de jour or crèches/Strutture di custodia collettiva diurne) is available for children between 3.5 months up to age 4 (until the start of compulsory education). In some cantons, it is also available for children up to age 5 or 6 for additional hours of provision. There is also home-based ECEC (Tagesfamilie/Famille de jour/ Famiglia diurna) that usually caters for children between 3.5 months up to the start of compulsory education, but they are also open to older children. The majority of settings for the youngest children fall under the responsibility of the cantonal ministries of social affairs, while in a few cantons they are under the responsibility of the cantonal ministry of education. From the beginning of compulsory education, which in most cantons starts at age 4 (in a few at age 5 or 6), children must attend pre-primary institutions (Kindergärten/ Ecoles enfantines/Scuole dell'infanzia), which fall under the responsibility of cantonal ministers of education. Primary education starts at age 6. Complementing compulsory education, in most cantons fee-paying out of school hours provision (Schulergänzende Betreuung/Accueil parascolaire/ Strutture di custodia parascolastiche) including midday meals, is available.

**Reforms:** 15 out of 26 cantons have signed the 'Intercantonal Agreement on the Harmonisation of Compulsory Education' (HarmoS Agreement), which aims to ensure harmonised regulation of certain benchmarks in education. In ECEC this implies introducing compulsory pre-school from age 4 and fee paying outof-school hours' provision to meet local needs by the beginning of the 2015/16 school year.

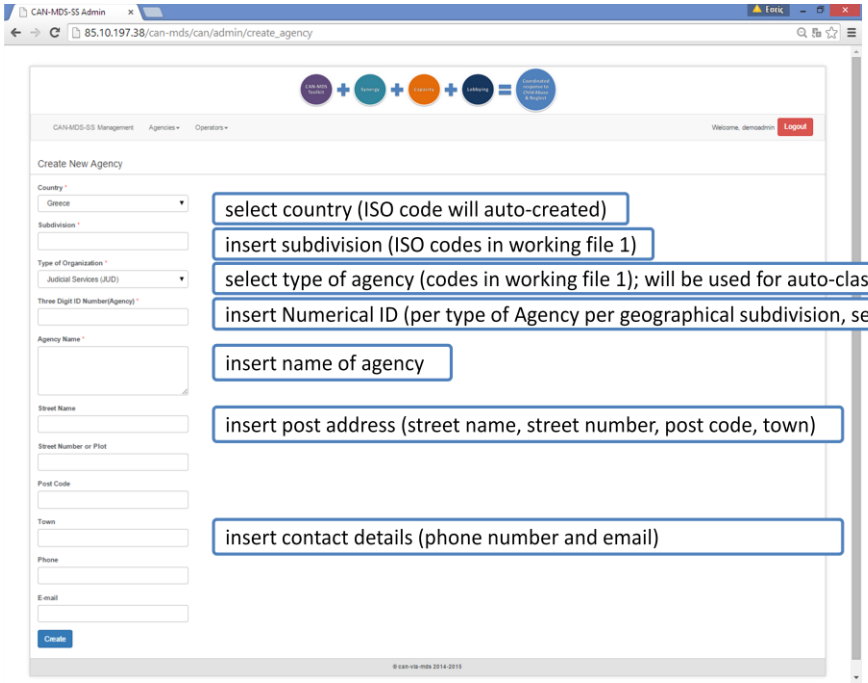
# Working file 5: National Ombudsman

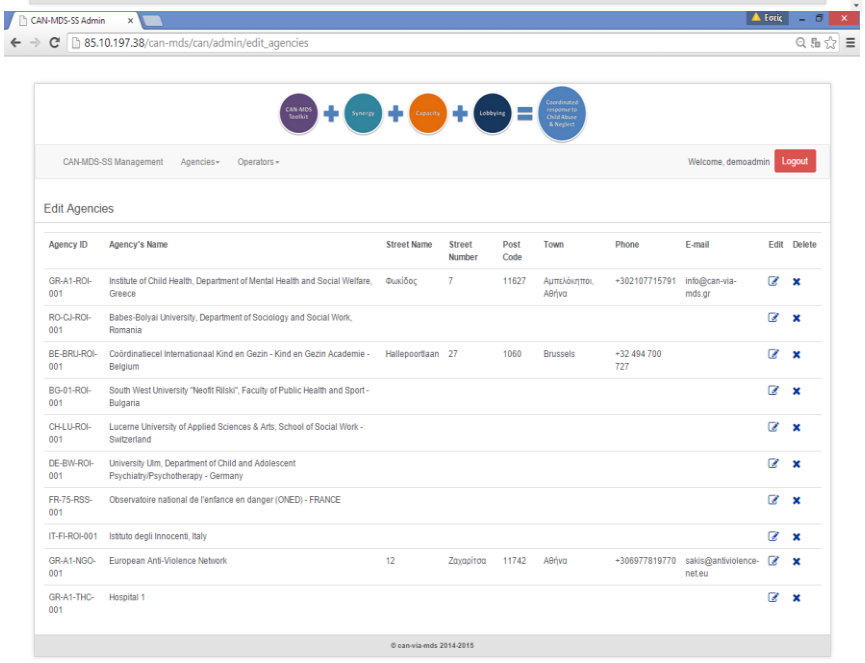
**National ombudsmen** (http://www.ombudsman.europa.eu/en/atyourservice/nationalombudsmen.faces)

| | |
|---|---|
| **Belgium** | Le Médiateur fédéral<br>Rue de Louvain 48, bte 6,<br>BE - 1000 Bruxelles<br>Tel.: +32 2 289 27 27<br>Fax: +32 2 289 27 28<br>Website: http://www.federalombudsman.be |
| **Bulgaria** | Омбудсман на Република България<br>22 George Washington Street<br>BG -1000 Sofia<br>Tel.: +359 2 81 06 955<br>Fax: +359 2 81 06 963<br>Website: http://www.ombudsman.bg |
| **Germany** | Petitionsausschuss<br>Deutscher Bundestag<br>Platz der Republik 1<br>DE-11011 Berlin<br>Tel.: +49 30 227 35257<br>Fax: +49 30 227 36053<br>Website: http://www.bundestag.de/bundestag/ausschuesse17/a02/index.jsp |
| **Greece** | Ombudsman<br>17 Halkokondyli Street<br>GR - 10432 Athens<br>Tel.: +30 210 728 9600<br>Fax: +30 210 729 2129<br>Website: http://www.synigoros.gr |
| **France** | Défenseur des droits<br>7 rue Saint-Florentin<br>FR - 75008 Paris<br>Tel.: +33 1 53 29 22 00<br>Fax: +33 1 53 29 22 45<br>Website: http://www.defenseurdesdroits.fr |
| **Italy** | *Italy does not yet have either a national Ombudsman or a national Committee on Petitions. However, it does have an extensive network of regional ombudsmen. The Regional Ombudsman for Toscany is the coordinator of the regional ombudsmen in Italy. A link to his Website is accessible below:*<br>**Italien** Ufficio del Difensore Civico della Regione Toscana<br>Via de' Pucci, 4<br>IT-50122 Firenze<br>Tel.: +39 0552 387 800<br>Fax: +39 0552 10230<br>Website: http://www.difensorecivicotoscana.it/ |
| **Romania** | Avocatul Poporului<br>Eugeniu Carada 3<br>Sector 3<br>RO-71204 Bucuresti<br>Tel.: +40 21 312 71 34<br>Fax: +40 21 312 49 21<br>Website: http://www.avp.ro |

# Working file 6: Secondary Data for CAN-MDS Participating Agencies

**http://85.10.197.38/can-mds/can/admin/login**



## Working file 7: Secondary Data for Child (alleged) Victim

| Child's Personal data | | | CANMDS | Contact details | | | | | | Caregiver's data | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | Address 1 | | Address 2 | | Phone (s) | | 1st | | | 2nd | | |
| surname | name | midle name | Pseudonym | Street name | Street number | Street name | Street number | Phone 1 | Phne 2 | Name | Street name | Street number | Name | Street name | Street number |
| | | | | | | | | | | | | | | | |

## Working file 8: Secondary Data for National CAN-MDS Administator

**IDENTITY**
[Name of National Administrator (Agency)]
[Legal status of the administrator's agency]
[Field where the administrator's agency belongs]
[Website]
**CONTACT PERSONS**
[Responsible for surveillance data administrator]
[Responsible for communication with Operators]

**CONTACT DETAILS**
**telephone number(s)**: [to be completed];
**email(s)**: [to be completed]

# Working file 9: Secondary Data for CAN-MDS Trained Professionals

- **Identity**
  - Surname
  - Name

- **Professional background**
  - (ISCO-08)
  - Available License:

- **Contact details**
  - Direct/personal phone
  - Personal email

- **Training**
  - Group: core/expanded
  - Trained by:
  - Complete training:

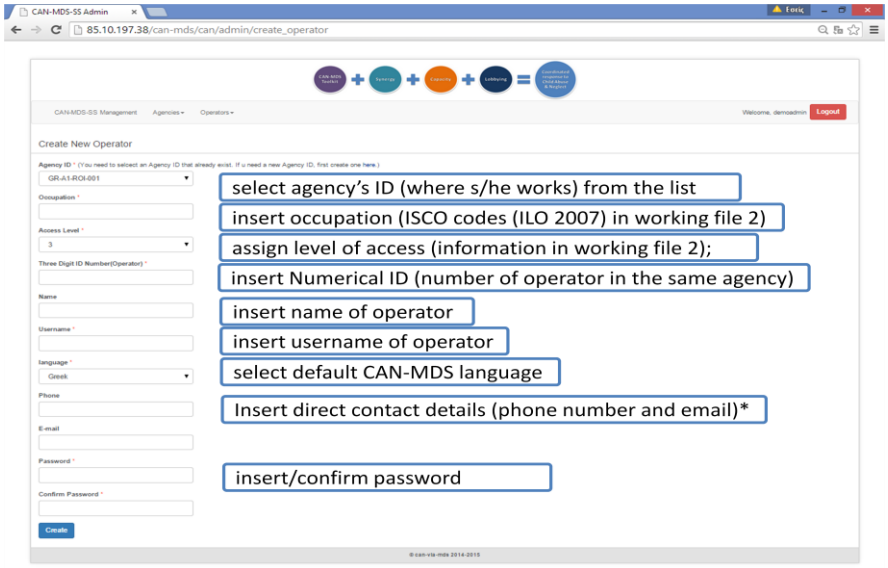
- **Agency where works (Agency ID)**
  - Dedicated operator (YES/NOT YET)
    - If YES, Number within agency

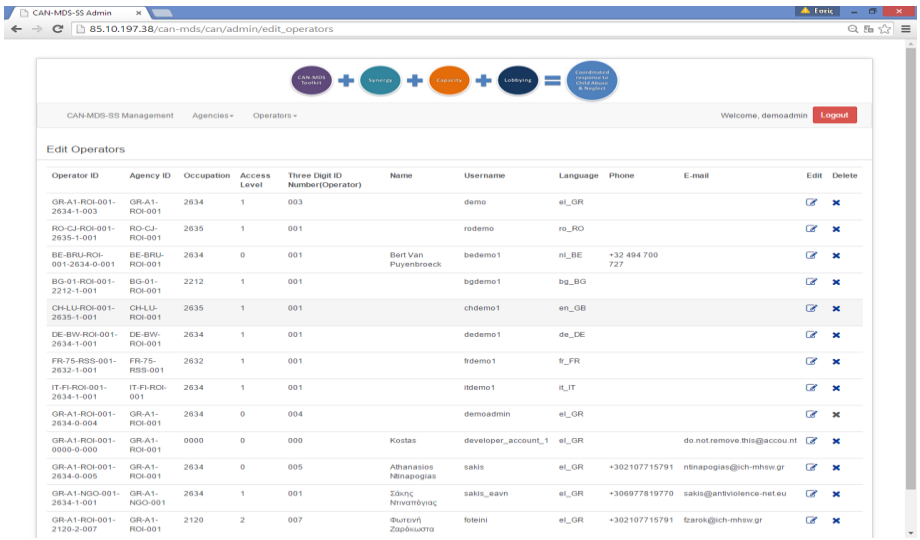
## Working file 10: Secondary Data for Mandatory reporting of CAN

| (Professional) group | Mandated for report CAN | Related law |
|---|---|---|
| 1. | | |
| 2. | | |
| . …. | | |
| n. | | |
| | | |
| | | |

# Working file 11: Secondary Data for CAN-MDS Operators

## http://85.10.197.38/can-mds/can/admin/login



# Working file 12: Focus Group Protocol & Discussion Guide

***Suggested Methodology for cultural adaptation of CAN-MDS Toolkit***

**Focus Group Discussions**

***AIM:*** *to assess content validity, quality and feasibility of each individual element in CAN-MDS*

- 2 groups * 10 professionals / country
    - *Professionals should represent all eligible professional groups and sectors*

  **Suggestion:** *it would be easier to recruit the same professionals who will be invited in the Core groups and in the national workshops*

**Planning the Focus Groups**

- *Preparing Invitation letters**
- *Provision of the material in advance (in order for the FGs' members to have the time to review them)*
- *Define the venue & the dates*

**Focus group results**

- *Reporting*
    - *Revising the national version of the Toolkit according to FG results*

*** Invitation for participation to the Focus Groups Discussions**

- Invitation letter including
    - a brief description of the objectives of discussion group and of the procedure including their preparation (review of CAN-MDS Toolkit)
    - Upon the confirmation of their participation, copies of the Toolkit will be sent to each of the professionals in advance, with the instruction to read the material and keep notes for any point they would like to discuss.

**Overview of FGs**

| | Suggested Process & Organization |
|---|---|
| Method | Group session |
| Group size | 10 participants per session + 2 moderators |
| Session duration | 120 min |
| Time | Before December 2014 |
| Place | TBD per country |
| Participants | Professionals eligible to participate in the Core groups of Operators |
| Recruitment of participants | Written invitations and further communication via phone where needed |
| Participants preparation | Review in advance the CAN-MDS Toolkit |
| Eligible participants | According to the eligibility criteria (see Deliverable) |
| Number of Groups & participants | 2 groups * 10 participants /country * 7 countries |
| Moderator(s) | Project's local coordinators and researchers per group<br>Moderator: coordinate the discussion<br>Co-moderator: keeping the minutes of the discussion |
| Moderators' discussion guide | Will include the issues to be discussed, instructions for moderating the discussion, time to be devoted per topic |
| Other material | Invitation letters and copies of the CAN-MDS Toolkit |
| Data to be collected | Qualitative |
| Data collection | Written minutes/ other? |
| Analysis of data | Descriptive analysis of repeated issues, comments and suggestions<br>Presentation of selected quotations (words, sentences, expressions) |
| Reporting | Brief description of aim and method of FG<br>Presentation of results and references for any specific part of the Toolkit suggested to be modified<br>A list of the modifications made in the national version |

**FOCUS GROUP DISCUSSION CAN-MDS Toolkit [120 MIN PER GROUP]**

**Opening of the Discussion**

**TOPIC 1: CONTENT OF the Toolkit** **[10 min]**

As the participants get prepared for the discussion, the moderator asks the following questions:

1. Do you think that the way the content is presented meet the objectives of the CAN-MDS?
2. As for the content of the Toolkit, is there any point that you don't agree with?

**TOPIC 2: STRUCTURE & FUNCTIONALITY OF Toolkit** **[10 min]**

1. In general, how would you evaluate the structure of the Toolkit?
2. Do you think that the Toolkit would be useful for you as an operator of a future CAN-MDS System?
3. Is there anything that you don't understand regarding the instructions for the use of the Toolkit?

**TOPIC 3: CAN-MDS variables** **[75 min]**

**CLARITY & PRECISION**

Instruction for the moderator: Please ask participants if there is any data element that it is not understandable and that it requires changes/modifications.

➔ *TIP: Use a table with the 18 data elements of the final CAN-MDS in order to record how many professionals indicate each individual variable*

**DISCUSSION PER Variable**

For each Variable, moderator will ask professionals the following questions:

1. In your opinion, is the data element related to the objectives of the CAN-MDS?
2. Are the instructions for the completion clear?
3. Do you think that you can collect data for this data element from the persons you work with?
4. Is there any particular reason you would choose not to ask for this data element?
5. Do you think that reporters of CAN cases are willing to provide information for this data element?
6. Do you think that, in general, the information needed is available to the reporters?

**TOPIC 4: Closing** **[15 min]**

1. In general, what's your opinion regarding the idea of developing a system, such as the CAN-MDS?
2. Do you think that your participation as a CAN-MDS operator is feasible?

**Management and processing of results:** From the focus groups' discussion a bulk of information is expected to result regarding participants' opinions and comments.

To this end, especially if the discussion has not been recorded by electronic means (video/tape), it is suggested that immediately after ending each group, the moderators to meet and consolidate what they record (such as excerpts) and summarize the main points of the discussion, potential patterns observed in the answers, by identifying the topics on which there was agreement or disagreement. They should also record all alternative proposals for improvement.

The answers (qualitative data) and words- or key-phrases should be recorded and grouped into categories under general headings corresponding to the topics included in the respective discussion guide for each group. Once completing the recording of answers, the different views and attitudes and the extent to which group members agreed (they actually had the same opinion) can then be separated. Combining the common responses will result in the general pattern of responses, which will determine whether the material requires further modifications or not.

To facilitate and systematize this process, a template can be used as in the example below, in which the Discussion Guide's topics are recorded in the first column and participants' answers can be recorded in the second column.

**Keeping notes from FGs.** Template for the systematization of answers from a focus group with professionals

| TOPIC 1: CONTENT OF the Toolkit | Comments (initials of professional's name based on the attendance list) |
|---|---|
| Do you think that the way the content is presented meet the objectives of the CAN-MDS? | e.g. AB: |
| As for the content of the Toolkit, is there any point that you don't agree with? | A.B. |

| TOPIC 2: STRUCTURE & FUNCTIONALITY OF Toolkit | Comments (initials of professional's name based on the attendance list) |
|---|---|
| In general, how would you evaluate the structure of the Toolkit? | e.g. AB: |
| Do you think that the Toolkit would be useful for you as an operator of a future CAN-MDS System? | A.B. |
| Is there anything that you don't understand regarding the instructions for the use of the Toolkit? | |

| TOPIC 3: CLARITY AND PRECISION PER DATA ELEMENT | Comments (initials of professional's name based on the attendance list) **DE:** |
|---|---|
| In your opinion, is the data element related to the objectives of the CAN-MDS? | e.g. AB: |
| Are the instructions for the completion clear? | |
| Do you think that you can collect data for this data element from the persons you work with? | |
| Is there any particular reason you would choose not to ask for this data element? | |
| Do you think that reporters of CAN cases are willing to provide information for this data element? | |
| Do you think that, in general, the information needed is available to the reporters? | |

| TOPIC 4: CLOSING | Comments<br>(initials of professional's name based on the attendance list) |
|---|---|
| In general, what's your opinion regarding the idea of developing a system, such as the CAN | e.g. AB: |
| Do you think that your participation as a CAN | A.B. |

# Working file 13: Correspondance of CAN-MDS codes/subcodes with existing systems (DSM-V, ICD-10 and ICD-9)

**DSM-5 Diagnoses and ICD-9-CM and ICD-10-CM Codes, Numerical ICD-10-CM Listing and CAN-MDS coding**
This is a listing of the DSM-5 diagnoses with ICD-10-CM codes and ICD-9-CM codes (this listing includes the corrections dated 6/20/13)
DSM-IV-TR codes are (a subset of) ICD-9-CM codes and so can probably be found in the ICD-9-CM column.

| CAN-MDS-related | Sub-code | DSM-5 diagnoses: Disorder, condition, or problem | ICD-10-CM | ICD-9-CM |
|---|---|---|---|---|
| I3_B_2.01<br>I3_A_2.2 | I3_B_2.01<br>I3_A_2.2.03<br>I3_A_2.2.09 | Overweight or obesity | E66.9 | 278.00 |
| I3_A_1 | I3_A_1.02 | *Alcohol use disorder mild* | *F10.10* | *305.00* |
| | I3_A_1.02 | *Alcohol use disorder moderate or severe* | *F10.20* | *303.90* |
| | I3_A_1.02 | *Amphetamine-type substance use disorder, Mild* | *F15.10* | *305.70* |
| | I3_A_1.02 | *Amphetamine-type substance use disorder, Moderate or Severe* | *F15.20* | *304.40* |
| | I3_A_1.02 | *Cannabis use disorder, Mild* | *F12.10* | *305.20* |
| | I3_A_1.02 | *Cannabis use disorder, Moderate or severe* | *F12.20* | *304.30* |
| | I3_A_1.02 | *Cocaine use disorder, Mild* | *F14.10* | *305.60* |
| | I3_A_1.02 | *Cocaine use disorder, Moderate or severe* | *F14.20* | *304.20* |
| | I3_A_1.02 | *Inhalant use disorder, Mild* | *F18.10* | *305.90* |
| | I3_A_1.02 | *Inhalant use disorder, Moderate or severe* | *F18.20* | *304.60* |
| | I3_A_1.02 | *Opioid use disorder, Mild* | *F11.10* | *305.50* |
| | I3_A_1.02 | *Opioid use disorder, Moderate or severe* | *F11.20* | *304.00* |
| | I3_A_1.02 | *Other (or unknown) substance use disorder, Mild* | *F19.10* | *305.90* |
| | I3_A_1.02 | *Other (or unknown) substance use disorder, Moderate or severe* | *F19.20* | *304.90* |
| | I3_A_1.02 | *Other hallucinogen use disorder, Mild* | *F16.10* | *305.30* |
| | I3_A_1.02 | *Other hallucinogen use disorder, Moderate or severe* | *F16.20* | *304.50* |
| | I3_A_1.02 | *Other or unspecified stimulant use disorder, Mild* | *F15.10* | *305.70* |
| | I3_A_1.02 | *Other or unspecified stimulant use disorder, Moderate or severe* | *F15.20* | *304.40* |
| | I3_A_1.02 | *Phencyclidine use disorder, Mild* | *F16.10* | *305.90* |
| | I3_A_1.02 | *Phencyclidine use disorder, Moderate or severe* | *F16.20* | *304.60* |
| | I3_A_1.02 | *Sedative, hypnotic, or anxiolytic use disorder, Mild* | *F13.10* | *305.40* |
| | I3_A_1.02 | *Sedative, hypnotic, or anxiolytic use disorder, Moderate or severe* | *F13.20* | *304.10* |

| | | | | |
|---|---|---|---|---|
| | I3_A_1.02 | *Tobacco use disorder, Mild* | *Z72.0* | *305.1* |
| | I3_A_1.02 | *Tobacco use disorder, Moderate or severe* | *F17.200* | *305.1* |
| I3_A_1 | I3_A_1.01 | Anorexia nervosa, Restricting type | F50.01 | |
| | I3_A_1.01 | Anorexia nervosa, Binge-eating/purging type | F50.02 | |
| | I3_A_1.01 | Bulimia nervosa | F50.2 | 307.51 |
| | I3_A_1.01 | Avoidant/restrictive food intake disorder | F50.8 | 307.59 |
| | I3_A_1.01 | Binge-eating disorder | F50.8 | 307.51 |
| | I3_A_1.01 | Other specified feeding or eating disorder | F50.8 | 307.59 |
| | I3_A_1.01 | Unspecified feeding or eating disorder | F50.9 | 307.50 |
| DE_F3 | F3_03 | Gender dysphoria in adolescents and adults | F64.1 | 302.85 |
| DE_C2 | C2_03 | Gender dysphoria in children | F64.2 | 302.6 |
| DE_C2<br>DE_F3 | C2_03<br>F3_03 | Other specified gender dysphoria | F64.8 | 302.6 |
| DE_C2<br>DE_F3 | C2_03<br>F3_03 | Unspecified gender dysphoria | F64.9 | 302.6 |
| I3_A_3.1 | I3_A_3.1.05 | Exhibitionistic disorder **(of perpetrator)** | F65.2 | 302.4 |
| I3_A_3.1 | I3_A_3.1.07 | Voyeuristic disorder **(of perpetrator)** | F65.3 | 302.82 |
| I3_A_3.1 | I3_A_3.1.88 | Pedophilic disorder **(of perpetrator)** | F65.4 | 302.2 |
| I3_A_2.3 | I3_A_2.3.01<br>I3_A_2.3.02<br>I3_A_2.3.03 | Frotteuristic disorder **(of caregiver)** | F65.81 | 302.89 |
| I3_A_2.3 | I3_A_2.3.01<br>I3_A_2.3.02<br>I3_A_2.3.03 | Factitious disorder **(of caregiver)** | F68.10 | 300.19 |
| I3_B_4.04 | I3_B_4.04 | Intellectual disability (intellectual developmental disorder), Mild | F70 | 317 |
| I3_B_4.04 | I3_B_4.04 | Intellectual disability (intellectual developmental disorder), Moderate | F71 | 318.0 |
| I3_B_4.04 | I3_B_4.04 | Intellectual disability (intellectual developmental disorder), Severe | F72 | 318.1 |
| I3_B_4.04 | I3_B_4.04 | Intellectual disability (intellectual developmental disorder), Profound | F73 | 318.2 |
| I3_B_4.04 | I3_B_4.04 | Unspecified intellectual disability (intellectual developmental disorder) | F79 | 319 |
| I3_B_4.04 | I3_B_4.04 | Speech sound disorder | F80.0 | 315.39 |
| I3_B_4.04 | I3_B_4.04 | Childhood-onset fluency disorder (stuttering) | F80.81 | 315.35 |
| I3_B_4.04 | I3_B_4.04 | Social (pragmatic) communication disorder | F80.89 | 315.39 |
| I3_B_4.04 | I3_B_4.04 | Language disorder | F80.9 | 315.39 |

| | | | | |
|---|---|---|---|---|
| I3_B_4.04 | I3_B_4.04 | Unspecified communication disorder | F80.9 | 307.9 |
| I3_B_4 | I3_B_4.04 | Specific learning disorder, With impairment in reading | F81.0 | 315.00 |
| I3_B_4 | I3_B_4.04 | Specific learning disorder, With impairment in mathematics | F81.2 | 315.1 |
| I3_B_4 | I3_B_4.04 | Specific learning disorder, With impairment in written expression | F81.81 | 315.2 |
| I3_B_4<br>I3_B_3 | I3_B_4.04<br>I3_B_3.02 | Developmental coordination disorder | F82 | 315.4 |
| I3_B_4<br>I3_B_3 | I3_B_4.04<br>I3_B_3.02 | Autism spectrum disorder | F84.0 | 299.00 |
| I3_B_4<br>I3_B_3 | I3_B_4.04<br>I3_B_3.02 | Global developmental delay | F88 | 315.8 |
| I3_B_4<br>I3_B_3 | I3_B_4.04<br>I3_B_3.02 | Other specified neurodevelopmental disorder | F88 | 315.8 |
| I3_B_4<br>I3_B_3 | I3_B_4.04<br>I3_B_3.02 | Unspecified neurodevelopmental disorder | F89 | 315.9 |
| I3_B_4<br>I3_B_3 | I3_B_4.04<br>I3_B_3.02 | Attention-deficit/hyperactivity disorder, Predominantly inattentive presentation | F90.0 | 314.00 |
| I3_B_4<br>I3_B_3 | I3_B_4.04<br>I3_B_3.02 | Attention-deficit/hyperactivity disorder, Predominantly hyperactive/impulsive presentation | F90.1 | 314.01 |
| I3_B_4<br>I3_B_3 | I3_B_4.04<br>I3_B_3.02 | Attention-deficit/hyperactivity disorder, Combined presentation | F90.2 | 314.01 |
| I3_B_4<br>I3_B_3 | I3_B_4.04<br>I3_B_3.02 | Other specified attention-deficit/hyperactivity disorder | F90.8 | 314.01 |
| I3_B_4<br>I3_B_3 | I3_B_4.04<br>I3_B_3.02 | Unspecified attention-deficit/hyperactivity disorder | F90.9 | 314.01 |
| I3_B_4<br>I3_B_3 | I3_B_4.04<br>I3_B_3.02 | Conduct disorder, Childhood-onset type | F91.1 | 312.81 |
| I3_B_4<br>I3_B_3 | I3_B_4.04<br>I3_B_3.02 | Conduct disorder, Adolescent-onset type | F91.2 | 312.82 |
| I3_B_4<br>I3_B_3 | I3_B_4.04<br>I3_B_3.02 | Oppositional defiant disorder | F91.3 | 313.81 |
| I3_B_4<br>I3_B_3 | I3_B_4.04<br>I3_B_3.02 | Other specified disruptive, impulse-control, and conduct disorder | F91.8 | 312.89 |
| I3_B_4<br>I3_B_3 | I3_B_4.04<br>I3_B_3.02 | Conduct disorder, Unspecified onset | F91.9 | 312.89 |
| I3_B_4<br>I3_B_3 | I3_B_4.04<br>I3_B_3.02 | Unspecified disruptive, impulse-control, and conduct disorder | F91.9 | 312.9 |

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| I3_B_4<br>I3_B_3 | I3_B_4.04<br>I3_B_3.02 | Separation anxiety disorder | F93.0 | 309.21 |
| I3_B_4<br>I3_B_3 | I3_B_4.04<br>I3_B_3.02 | Selective mutism | F94.0 | 313.23 |
| I3_B_4<br>I3_B_3 | I3_B_4.04<br>I3_B_3.02 | Reactive attachment disorder | F94.1 | 313.89 |
| I3_B_4<br>I3_B_3 | I3_B_4.04<br>I3_B_3.02 | Disinhibited social engagement disorder | F94.2 | 313.89 |
| I3_B_4<br>I3_B_3 | I3_B_4.04<br>I3_B_3.02 | Provisional tic disorder | F95.0 | 307.21 |
| I3_B_4<br>I3_B_3 | I3_B_4.04<br>I3_B_3.02 | Persistent (chronic) motor or vocal tic disorder | F95.1 | 307.22 |
| I3_B_4<br>I3_B_3 | I3_B_4.04<br>I3_B_3.02 | Tourette's disorder | F95.2 | 307.23 |
| I3_B_4<br>I3_B_3 | I3_B_4.04<br>I3_B_3.02 | Other specified tic disorder | F95.8 | 307.20 |
| I3_B_4<br>I3_B_3 | I3_B_4.04<br>I3_B_3.02 | Unspecified tic disorder | F95.9 | 307.20 |
| I3_B_4<br>I3_B_3 | I3_B_4.04<br>I3_B_3.02 | Enuresis | F98.0 | 307.6 |
| I3_B_4<br>I3_B_3 | I3_B_4.04<br>I3_B_3.02 | Encopresis | F98.1 | 307.7 |
| *I3_A_1* | *I3_A_1.01* | Rumination disorder | F98.21 | 307.53 |
| *I3_A_1* | *I3_A_1.01* | Pica, In children | F98.3 | |
| I3_A_4.3 | I3_A_4.3.01.2 | Spouse or partner neglect, Confirmed, Initial encounter | T74.01XA | 995.85 |
| I3_A_4.3 | I3_A_4.3.01.2 | Spouse or partner neglect, Confirmed, Subsequent encounter | T74.01XD | 995.85 |
| I3_B | | Child neglect, Confirmed, Initial encounter | T74.02XA | 995.52 |
| I3_B | | Child neglect, Confirmed, Subsequent encounter | T74.02XD | 995.52 |
| I3_A_4.3 | I3_A_4.3.01.2 | Spouse or partner violence, Physical, Confirmed, Initial encounter | T74.11XA | 995.81 |
| I3_A_4.3 | I3_A_4.3.01.2 | Spouse or partner violence, Physical, Confirmed, Subsequent encounter | T74.11XD | 995.81 |
| I3_A_2 | | Child physical abuse, Confirmed, Initial encounter | T74.12XA | 995.54 |
| I3_A_2 | | Child physical abuse, Confirmed, Subsequent encounter | T74.12XD | 995.54 |
| I3_A_4.3<br>I3_A_3.1 | I3_A_4.3.01.2<br>I3_A_3.1.10 | Spouse or partner Violence, Sexual, Confirmed, Initial encounter | T74.21XA | 995.83 |

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| I3_A_4.3<br>I3_A_3.1 | I3_A_4.3.01.2<br>I3_A_3.1.10 | Spouse or partner Violence, Sexual, Confirmed, Subsequent encounter | T74.21XD | 995.83 |
| I3_A_3 | | Child sexual abuse, Confirmed, Initial encounter | T74.22XA | 995.53 |
| I3_A_3 | | Child sexual abuse, Confirmed, Subsequent encounter | T74.22XD | 995.53 |
| I3_A_4.3 | I3_A_4.3.01.2 | Spouse or partner abuse, Psychological, Confirmed, Initial encounter | T74.31XA | 995.82 |
| I3_A_4.3 | I3_A_4.3.01.2 | Spouse or partner abuse, Psychological, Confirmed, Subsequent encounter | T74.31XD | 995.82 |
| I3_A_4 | | Child psychological abuse, Confirmed, Initial encounter | T74.32XA | 995.51 |
| I3_A_4 | | Child psychological abuse, Confirmed, Subsequent encounter | T74.32XD | 995.51 |
| I3_A_4.3 | I3_A_4.3.01.2 | Spouse or partner neglect, Suspected, Initial encounter | T76.01XA | 995.85 |
| I3_A_4.3 | I3_A_4.3.01.2 | Spouse or partner neglect, Suspected, Subsequent encounter | T76.01XD | 995.85 |
| I3_B | | Child neglect, Suspected, Initial encounter | T76.02XA | 995.52 |
| I3_B | | Child neglect, Suspected, Subsequent encounter | T76.02XD | 995.52 |
| I3_A_4.3 | I3_A_4.3.01.2 | Spouse or partner Violence, Physical, Suspected, Initial encounter | T76.11XA | 995.81 |
| I3_A_4.3 | I3_A_4.3.01.2 | Spouse or partner Violence, Physical, Suspected, Subsequent encounter | T76.11XD | 995.81 |
| I3_A_2 | | Child physical abuse, Suspected, Initial encounter | T76.12XA | 995.54 |
| I3_A_2 | | Child physical abuse, Suspected, Subsequent encounter | T76.12XD | 995.54 |
| I3_A_4.3 | I3_A_4.3.01.2 | Spouse or partner Violence, Sexual, Suspected, Initial encounter | T76.21XA | 995.83 |
| I3_A_4.3 | I3_A_4.3.01.2 | Spouse or partner Violence, Sexual, Suspected, Subsequent encounter | T76.21XD | 995.83 |
| I3_A_3 | | Child sexual abuse, Suspected, Initial encounter | T76.22XA | 995.53 |
| I3_A_3 | | Child sexual abuse, Suspected, Subsequent encounter | T76.22XD | 995.53 |
| I3_A_4.3 | I3_A_4.3.01.2 | Spouse or partner abuse, Psychological, Suspected, Initial encounter | T76.31XA | 995.82 |
| I3_A_4.3 | I3_A_4.3.01.2 | Spouse or partner abuse, Psychological, Suspected, Subsequent encounter | T76.31XD | 995.82 |
| I3_A_4 | | Child psychological abuse, Suspected, Initial encounter | T76.32XA | 995.51 |
| I3_A_4 | | Child psychological abuse, Suspected, Subsequent encounter | T76.32XD | 995.51 |
| I3_B_4 | I3_B_4.88 | Academic or educational problem | Z55.9 | V62.3 |
| I3_B_2 | I3_B_2.04 | Homelessness | Z59.0 | V60.0 |
| I3_B_2 | I3_B_2.04 | Inadequate housing | Z59.1 | V60.1 |
| I3_B_5 | I3_B_5.01.2 | Discord with neighbor, lodger, or landlord | Z59.2 | V60.89 |
| I3_A_2 | I3_A_2.1 | Problem related to living in a residential institution | Z59.3 | V60.6 |

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| I3_A_3<br>I3_A_4<br>I3_B | I3_A_2.5<br>I3_A_2.88<br>I3_A_3.88<br>I3_A_4.88 | | | |
| I3_B_2 | I3_B_2.01 | Lack of adequate food or safe drinking water | Z59.4 | V60.2 |
| I3_B | | Extreme poverty | Z59.5 | V60.2 |
| I3_B | | Low income | Z59.6 | V60.2 |
| I3_B_2<br>I3_B_3 | I3_B_2.88<br>I3_B_3.88 | Insufficient social insurance or welfare support | Z59.7 | V60.2 |
| I3_B_2 | I3_B_2.04 | Unspecified housing or economic problem | Z59.9 | V60.9 |
| I3_B_6<br>I3_B_7 | I3_B_6.88<br>I3_B_7.88 | Problem related to living alone | Z60.2 | V60.3 |
| I3_B_4 | I3_B_4.88 | Acculturation difficulty | Z60.3 | V62.4 |
| I3_A_4.1 | I3_A_4.1.07 | Social exclusion or rejection | Z60.4 | V62.4 |
| I3_A_4.1 | I3_A_4.1.01<br>I3_A_4.1.02<br>I3_A_4.1.03 | Target of (perceived) adverse discrimination or persecution | Z60.5 | V62.4 |
| I3_A_4.1 | | Unspecified problem related to social environment | Z60.9 | V62.9 |
| I3_B_7 | | Upbringing away from parents | Z62.29 | V61.8 |
| I3_A_2 | | Personal history (past history) of physical abuse in childhood | Z62.810 | V15.41 |
| I3_A_3 | | Personal history (past history) of sexual abuse in childhood | Z62.810 | V15.41 |
| I3_A_4 | | Personal history (past history) of psychological abuse in childhood | Z62.811 | V15.42 |
| I3_B | | Personal history (past history) of neglect in childhood | Z62.812 | V15.42 |
| I3_B_1<br>I3_A_4.1 | I3_B_1.01<br>I3_B_1.02<br>I3_B_1.03<br>I3_B_1.88<br>I3_A_4.1.88 | Parent-child relational problem | Z62.820 | V61.20 |
| I3_A_4.3<br>I3_A_4.1 | I3_A_4.3.01<br>I3_A_4.1.88 | Sibling relational problem | Z62.891 | V61.8 |
| I3_B | | Child affected by parental relationship distress | Z62.898 | V61.29 |
| I3_A_4 | I3_A_4.88 | Disruption of family by separation or divorce | Z63.5 | V61.03 |
| I3_A_4 | I3_A_4.88 | High expressed emotion level within family | Z63.8 | V61.8 |
| I3_B | I3_B_1 | Problems related to unwanted pregnancy | Z64.0 | V61.7 |

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| | I3_B_2<br>I3_B_3<br>I3_B_5<br>I3_B_7<br>I3_B_88 | | | |
| I3_B | I3_B_88 | Problems related to multiparity | Z64.1 | V61.5 |
| S2_A | S2_A_02<br>S2_A_04 | Discord with social service provider, including probation officer, case manager, or social services worker | Z64.4 | V62.89 |
| I3_A_4.2 | I3_A_4.2.01<br>I3_A_4.2.05 | Conviction in civil or criminal proceedings without imprisonment | Z65.0 | V62.5 |
| *I3_A_1* | *I3_A_1.88* | Imprisonment or other incarceration | Z65.1 | V62.5 |
| *I3_A_1* | *I3_A_1.88* | Problems related to other legal circumstances | Z65.3 | V62.5 |
| I3_A_2<br>I3_A_3<br>I3_A_4 | I3_A_2.3 | Victim of crime | Z65.4 | V62.89 |
| I3_A_2.5 | | Victim of terrorism or torture | Z65.4 | V62.89 |
| I3_A_4.3 | I3_A_4.3.02<br>I3_A_4.3.88 | Exposure to disaster, war, or other hostilities | Z65.5 | V62.22 |
| I3_A_4.3 | I3_A_4.3.88 | Other problem related to psychosocial circumstances | Z65.8 | V62.89 |
| I3_A_4.2 | I3_A_4.2.06 | Religious or spiritual problem | Z65.8 | V62.89 |
| I3_B_5 | I3_B_5.02<br>I3_B_5.88 | Unspecified problem related to unspecified psychosocial circumstances | Z65.9 | V62.9 |
| S2_01.03 | S2_1.3.01<br>S2_1.3.03 | Other circumstances related to child neglect, Encounter for mental health services for victim of child neglect by parent | Z69.010 | V61.21 |
| S2_01.03 | S2_1.3.01<br>S2_1.3.03 | Other circumstances related to child physical abuse, Encounter for mental health services for victim of child abuse by parent | Z69.010 | V61.21 |
| S2_01.03 | S2_1.3.01<br>S2_1.3.03 | Other circumstances related to child psychological abuse, Encounter for mental health services for victim of child psychological abuse by parent | Z69.010 | V61.21 |
| S2_01.03 | S2_1.3.01<br>S2_1.3.03 | Other circumstances related to child sexual abuse, Encounter for mental health services for victim of child sexual abuse by parent | Z69.010 | V61.21 |
| S2_01.03 | S2_1.3.02<br>S2_1.3.03 | Other circumstances related to child neglect, Encounter for mental health services for perpetrator of parental child neglect | Z69.011 | V61.22 |
| S2_01.03 | S2_1.3.02<br>S2_1.3.03 | Other circumstances related to child physical abuse, Encounter for mental health services for perpetrator of parental child abuse | Z69.011 | V61.22 |
| S2_01.03 | S2_1.3.02<br>S2_1.3.03 | Other circumstances related to child psychological abuse, Encounter for mental health services for perpetrator of parental child psychological abuse | Z69.011 | V61.22 |

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| S2_01.03 | S2_1.3.02<br>S2_1.3.03 | Other circumstances related to child sexual abuse, Encounter for mental health services for perpetrator of parental child sexual abuse | Z69.011 | V61.22 |
| S2_01.03 | S2_1.3.01<br>S2_1.3.03 | Other circumstances related to child neglect, Encounter for mental health services for victim of nonparental child neglect | Z69.020 | V61.21 |
| S2_01.03 | S2_1.3.01<br>S2_1.3.03 | Other circumstances related to child physical abuse, Encounter for mental health services for victim of nonparental child abuse | Z69.020 | V61.21 |
| S2_01.03 | S2_1.3.01<br>S2_1.3.03 | Other circumstances related to child psychological abuse, Encounter for mental health services for victim of nonparental child psychological abuse | Z69.020 | V61.21 |
| S2_01.03 | S2_1.3.01<br>S2_1.3.03 | Other circumstances related to child sexual abuse, Encounter for mental health services for victim of nonparental child sexual abuse | Z69.020 | V61.21 |
| S2_01.03 | S2_1.3.02 | Other circumstances related to spouse or partner abuse, Psychological, Encounter for mental health services for victim of spouse or partner psychological abuse | Z69.11 | V61.11 |
| S2_01.03 | S2_1.3.02 | Other circumstances related to spouse or partner neglect, Encounter for mental health services for victim of spouse or partner neglect | Z69.11 | V61.11 |
| S2_01.03 | S2_1.3.02 | Other circumstances related to spouse or partner violence, Physical, Encounter for mental health services for victim of spouse or partner violence | Z69.11 | V61.11 |
| S2_01.03 | S2_1.3.02 | Other circumstances related to spouse or partner abuse, Psychological, Encounter for mental health services for perpetrator of spouse or partner psychological abuse | Z69.12 | V61.12 |
| S2_01.03 | S2_1.3.02 | Other circumstances related to spouse or partner neglect, Encounter for mental health services for perpetrator of spouse or partner neglect | Z69.12 | V61.12 |
| S2_01.03 | S2_1.3.02 | Other circumstances related to spouse or partner violence, Physical, Encounter for mental health services for perpetrator of spouse or partner violence | Z69.12 | V61.12 |
| S2_01.03 | S2_1.3.02 | Other circumstances related to spouse or partner violence, Sexual, Encounter for mental health services for perpetrator of spouse or partner violence | Z69.12 | V61.12 |
| S2_01.03 | S2_1.3.02 | Other circumstances related to spouse or partner violence, Sexual, Encounter for mental health services for victim of spouse or partner violence | Z69.81 | V61.11 |
| S2_01.03 | S2_1.3.01 | Sex counseling | Z70.9 | V65.49 |
| S2_01.03 | S2_1.3.01<br>S2_1.3.02<br>S2_1.3.03 | Other counseling or consultation | Z71.9 | V65.40 |
| I3_B_6 | I3_B_6.02.88 | Tobacco use disorder, Mild | Z72.0 | 305.1 |
| *I3_A_1* | *I3_A_1.88* | Child or adolescent antisocial behavior | Z72.810 | V71.02 |

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| *I3_A_1* | *I3_A_1.88* | Problem related to lifestyle | Z72.9 | V69.9 |
| S2_A | S2_A_03<br>S2_A_05 | Unavailability or inaccessibility of health care facilities | Z75.3 | V63.9 |
| S2_A | S2_A_03<br>S2_A_05 | Unavailability or inaccessibility of other helping agencies | Z75.4 | V63.8 |
| I3_B_3 | I3_B_3.01<br>I3_B_3.02<br>I3_B_3.05<br>I3_B_3.88 | Nonadherence to medical treatment | Z91.19 | V15.81 |
| *I3_A_4* | | Other personal history of psychological trauma | Z91.49 | V15.49 |
| *I3_A_1* | *I3_A_1.04* | Personal history of self-harm | Z91.5 | V15.59 |
| I3_B_6 | I3_B_6.01<br>I3_B_6.88 | Wandering associated with a mental disorder | Z91.83 | V40.31 |
| *I3_A_1* | *I3_A_1.88* | Other personal risk factors | Z91.89 | V15.89 |