



South West University "Neofit Rilski", Department  
of Medical-Social Sciences

# CAN surveillance in Bulgaria: current policies and practices

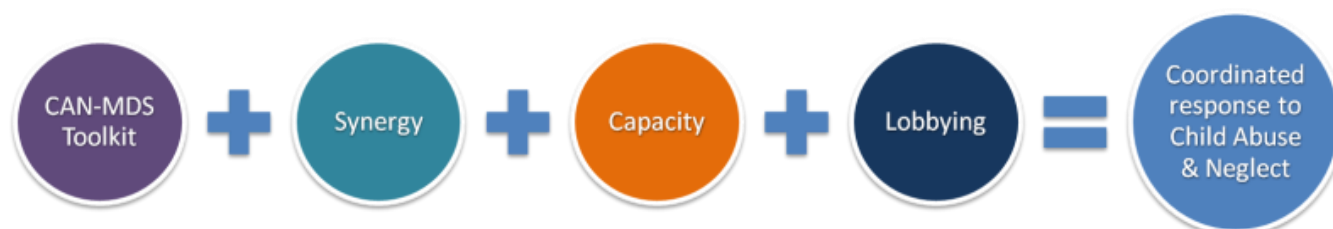
*Country Profile*

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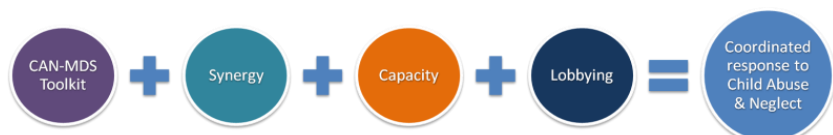
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## List of abbreviations

ASA	Agency for Social Assistance
CAN	Child abuse and Neglect
CPDs	Child Protection Departments
CoE	Council of Europe
CPA	Child Protection Act
CRC	Committee on the Rights of the Child
DCP	Department for Child Protection
MLSP	Ministry of Labour and Social Policy
NGO's	Non-governmental organisation
NSI	National Statistical Institute
SACP	State Agency for Child Protection
SAPI	Social Activities and Practices Institute

## 1. The rationale for a CAN-MDS in Bulgaria

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Worldwide practice shows that it is a long process for developing coordinated responses to prevention and interventions in the field of child abuse and neglect.

The system for monitoring of CAN cases in Bulgaria is still under development. Though the SACP try to develop a uniform recording system for CAN for more than 10 years, there are still some problems to be solved mainly connected with the coordination between different services, in-time send information and the lack of unified protocol for collection of information about CAN cases. The communication between agencies involved in the process of identification and record of CAN cases still lacks the needed efficiency.

In this regard, implementation of CAN-MDS in Bulgaria will support the improvement of already exsited case-based surveillance system and for sustainability of its effectiveness.

### 1.1. Aims & Objectives of developing a CAN-MDS at national level

The Daphne III programme, part of the General Programme “Fundamental Rights and Justice” aims to contribute to the protection of children, young people and women against all forms of violence and to attain a high level of health protection, well-being and social cohesion.

The Project “*Coordinated Response to Child Abuse and Neglect via Minimum Data Sets*”, co-funded by the EC under the Daphne III Programme, aims to contribute to the protection of maltreated children and children at risk and to improve child protection services by creating the scientific basis, necessary tools and synergies for establishing national child abuse and neglect (CAN) monitoring systems using minimum data sets (MDS). Such systems are expected to provide comprehensive, reliable and comparable case-based information at national level for children who have used child protection services. The data that will comprise the CAN-MDS could be used in multiple ways: for development of annual country profiles indicating current needs for services in the field, exploration of the relationship between specific factors and types of child maltreatment and as a point of reference indicating the priorities arising at local, national and international levels (benchmarking). Moreover, it could support development of CAN National Surveillance Mechanisms / improvement of the available mechanisms (*according to country specifics*). Lastly, CAN-MDS

data could be used as a baseline for services and interventions' effectiveness evaluation, identification of good practices and for planning future policies and legislation.

The need for working towards the development of such national systems derives from the current situation in the EU countries where CAN case-based data are derived from a variety of intersectoral sources and follow up of victims at local and national level is not sufficiently coordinated among the involved services. Specifically, the main barriers for effective CAN monitoring concern a. the lack of common operational definitions, b. the lack of common registering practices and c. the use of a variety of methods and tools for data collection and sharing among stakeholders.

The establishment of a CAN registration mechanism via MDS at national level could be part of the routine administrative process in all child protection services and the MDS could be uploaded in a single database operating via a restricted-access on-line network. National child protection services that would initially join these MDS collection/sharing of information would also be expanded to include more services, with an ultimate aim being to capture the entire EU area. Insofar efforts for unifying European CAN related information resources have focused mainly on judicial cases or cases involving authorities' involvement; this project targets at providing a common ground for CAN cases that do not involve legal or public order authorities as well and will be handled and managed by services in the health, welfare and educational sectors as evidence suggests that the vast majority of CAN cases fall into this particular category.

To this end, a Toolkit will be developed consisting of the necessary protocols, tools, a short-training module and a Guide for potential operators of a CAN-MDS system, namely professionals who will be in charge of collecting and registering data. Partners serve as national "focal points" who have undertaken the initiative to create and train their national "core" groups of operators (social/health/other professionals working in the field of child protection or with child victims) as well as to promote the Policy Manual for the establishment of national CAN-MDS systems.

Specific objectives of the project are:

- Development of the methodology for defining a minimum data set on child abuse and neglect (CAN-MDS)
- Mapping of national child protection related services, case-based follow up and CAN monitoring mechanisms

- Development of a CAN-MDS Toolkit and evaluation of its quality
- Formation of national core groups of professionals-potential operators of CAN-MDS
- Building the capacity of professionals working in child protection and CAN prevention related services for collecting and sharing CAN-MDS via a short-training course conducted by trained facilitators and Evaluation of trainings' effectiveness
- Creation of a Policy and Procedures Manual addressing policy makers and other related stakeholders towards the establishment of national CAN-MDS and adaptation of the Manual according to country specifics
- Conduction of a variety of dissemination and lobbying activities for the adoption of CAN-MDS in participating countries

For lobbying towards a uniform systematic registry and monitoring of abused children at local and national levels (also facilitating international comparisons), a *Policy & Procedures Manual* including ready-to-use tools is going to be created addressing policy makers and other related stakeholders.



## 1.2 Ethical Considerations

Child abuse and neglect is an extremely sensitive issue for dealing with all activities from the identification of child abuse and neglect and to the provision of services to affected children and their families or guardians.

Records of child abuse and neglect reports in Bulgaria are maintained by Ministry of Labor and Social Policy through the Agency for Social Support and its regional branches.

All professionals from their respective fields must preserve the confidentiality of all child abuse and neglect reports and records to protect the privacy rights of the child and of the child's parents or guardians, except in certain limited circumstances.

The Ethical Code for those who work with children (developed by National Council for Child Protection and accepted in 2003) sets out standards for the ethical behavior of professionals from the fields of: education, health care, social welfare, justice, internal affairs. In all cases, the best interests of the child must be protected (CPA, Art.8).

In most circumstances, information from child abuse and neglect records are not disclosed to the public. Only authorized persons can have access to information on personal data.

The confidentiality, secrecy of information and other issues connected with ethics in the process of identification, registration and monitoring CAN cases are discussed in the national legal framework in chapter 3.

## 2. Country Profile

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### 2.1. How well known is the CAN problem in the country?

In the last ten years child abuse and neglect has become a focus of national policies for children in Bulgaria.

The exact data on the magnitude of the violence against children in Bulgaria is not available.

The data from the existing sources (Annual reports of SACP, NSI, Reports of NGO's and other) show an increased number of child abuse and neglect cases.

Since its establishment in 2001, the State Agency for Child Protection collects information on the number and profile of child victims of violence. This allows it to monitor the CAN cases and identify the types of CAN, as well as approaches for the prevention (Annual Report of SACP, 2010).

Every year SACP reports about 1700 cases of CAN (i.e. cases that social workers are working with) based on the information collected from all respected authorities.

According to the annual reports of SACP (2010,2011,2012) the predominant place where violence happens is in the family and there is a tendency for there to be an increase in violence in children placed in their relatives care. The cases of neglect and physical abuse increase as well.

The following tables present information about the types of CAN, the place where abuse took place, their sex and ages.

Table 1. Types of CAN for the period 2009 - 2012 (Source: SACP,2012)

Year	Total	Psychological Violence	Physical Violence	Sexual Violence	Neglect
2009	1539	287 (19%)	477 (31%)	176 (11%)	599 (40%)
2010	2155	409 (19%)	691 (32%)	253 (12%)	802 (37%)
2011	2175	382 (17,6%)	711 (32,8%)	354 (16%)	726 (33,4%)
2012	2127	413 (19,4%)	781(36,7%)	324 (15,3%)	609 (28,6%)

Table 2. Division of CAN cases according place where abuse took place during 2011 (SACP, 2012)

<b>Place, where abuse took place</b>	<b>Number (%) of child victims of abuse</b>
Family	1563 (73,5%)
School	113 (5.3%)
Street	194 (9.1%)
Specialized institution	46 (2.2%)
Foster Family	3 (0.1%)
Relatives	97 (4.6%)
Public Place	111 (5.2%)
<b>Total</b>	<b>2127 (100%)</b>

Table.3 Division of CAN cases, according sex of the victims for 2011 (Source: SACP, 2012)

<b>Sex</b>	<b>Number of Children (%)</b>
Girls	1134 (53.3%)
Boys	993 (46.7%)
<b>Total</b>	<b>2127 (100%)</b>

Table. 4. Division of CAN cases, according age of the victims for 2011 (Source: SACP, 2012)

<b>Age</b>	<b>Number of Children (%)</b>
0 - 3	358 (16.8%)
4 - 7	380 (17.9%)
8 - 10	332(15.6%)
11 - 14	573 (26.9%)
15 - 18	484 (22.8%)
<b>Total</b>	<b>2127 (100%)</b>

**Child abuse and neglect became an issue of systematic scientific interest in the last ten years in Bulgaria.**

The main topics of research conducted by different state and non- governmental organizations are: public attitudes towards child violence, sexual violence, corporal punishment, violence against children in institutions, violence in schools, sensitivity of the system for identification, registration of cases of child abuse, child help line etc.

In the review of research on violence against children in Bulgaria for the period 1999 – 2009, D. Ruseva (2011) found 26 studies, which were classified into four groups.

**Group A** Violence as a problem

- violence against children in school, family and on the street -8 studies;
- public attitudes to child abuse - 4 studies;
- domestic violence against women and children – 3 studies;
- INTERNET abuse - 2 studies.

**Group B.** Sexual abuse against children- 2 studies**Group C.** Violence against children in institution - 3 studies**Group D.** Public systems in connection with violence against children – 4 studies

According to N. Petrova, (2008) "...data from recorded cases of violence against children show that it is difficult to say there is only one or two predominant types of violence. Further more – there is diversity of committed violence against children. ... the most frequently registered is severe physical violence (32.12%) and severe to moderate emotional/psychological violence (23.16%). The next place with high relative share takes "economic exploitation" of children".

In the analysis of situation of sexual abuse in Bulgaria, N.Petrova-Dimitrova (2005, 2009) mentioned serious problems between the child protection system and justice systems, as well as difficulties in working with child victims of sexual abuse.

In a study of the forensic medicine archives in 15 regional centers in Bulgaria, R. Miteva aimed to find the identity of perpetrators. A total of 2227 cases of girls under the age of 18 years, victims of sexual abuse were documented. In 1426 (64.03%) cases the perpetrators were familiar to victims, in 5.88% - relatives and in 2.42% - the father was responsible. In 8.72% of cases the examination was performed to determine the presence of virginity at the request of the victim's parents. In 1.40% of cases the perpetrators were multiple – relatives, familiar and unfamiliar persons. In 0.31% of cases, no data about the perpetrator were available (R.Miteva, 2008).

In an analysis of statistical data for child abuse in Bulgaria, D.Koleva (2011) pointed out that although the protection of children from all forms of abuse and the development and maintenance of a national Information System in the field of child protection are priorities in the National Strategy for the Child (2008-2018), the responsible institutions continue to use different methodologies for collecting information. This creates difficulties in keeping track of developmental processes, trend shaping and implementing adequate measures for the

prevention of violence. One of the main recommendations, based on the above mentioned analysis, is for an overview and analysis of indicators, used by different organizations in the collection of information about violence against and between children, in accordance with European practices, and the development of a unified SACP information system.

One of the largest studies and the first epidemiological one in the CAN area, to be conducted in Bulgaria is the “Balkan Epidemiological Study on Child Abuse and Neglect” (BECAN) in the frame of FP7 of the European Commission. All Balkan countries participated in the study. The coordinator was the Institute of Child Health, Athens, Greece.

The total sample for Bulgaria includes 3619 pupils (11,13,16 year olds). The research tool used was the ICAST-CH questionnaire, translated and validated into the Bulgarian language. The survey was conducted simultaneously in 3 stratified regions.

The results of the study indicated:

- A high prevalence rate of psychological (69,51%) and physical (62,21%) violence. Urbanicity has a significant effect on the prevalence of psychological ( $p < 0,002$ ) and sexual ( $p < 0,02$ ) violence and positive & non violent parenting ( $p < 0,0001$ ), as well as on the incidence of psychological violence ( $p < 0,02$ ), neglect ( $p < 0,015$ ), and positive & non-violent parenting ( $p < 0,001$ ).
- Gender and grade have a significant 2-way interaction and the main effect on the prevalence of psychological violence in 13 year old children ( $p < 0,02$ ) and on prevalence of physical violence in 11 year old children (0.001); on the incidence of psychological violence (0.002) and the incidence of physical violence (0.01) in 16 year old children from vocational school.

The other part of the BECAN study was a case-based surveillance study on CAN .

Files of 103 recorded CAN cases of children of 11, 13 and 16 years old age groups were analyzed. For registered cases, four out of 1000 children (3.77/1000) were victims of some of the types of abuse. The most common form of maltreatment is the **physical abuse** (2.31/1000), followed by the **psychological abuse** (1.17/1000). Sexual abuse (0.77/1000) and care neglect (0.70/1000) share nearly equal presentation. The tendency for the same age groups in all the three stratified regions is equal.

The largest percentage of registered cases presented with a single form of abuse (75.7%), and this is common for all age groups in the three stratified regions.

In the most of the cases, the perpetrators were middle aged and familiar to the child. In some cases the father and mother were indicated as perpetrators. The school teacher was appointed as a perpetrator in 27,7% of registered cases with sexual violence.

The incidence rate for child abuse and neglect, based on the information from the recorded cases is lower in comparison with this in main epidemiological study. The highest incidence rate was for the physical abuse in the CBSS, while for the main epidemiological study the highest incidence was for the psychological form of abuse.

## **2.2. Critical review of the available data**

Based on the results of the studies and an overview of the existing data, the conclusion is that there is a gap between child maltreatment occurring in the community and that reported by official statistics. The system for identifying and reporting CAN cases in Bulgaria is still in the process of being developed. There is still a lot of unrecognised cases of CAN, which urges for the improvement of the system for identifying children at risk of CAN, as well as for professionals having additional training in order to fulfil their duties in the broader field of CAN.

Coordination between policy makers, agencies and services providers is still insufficient. The other weak features of the system are a fragmentation of existing data about the magnitude of CAN, turnover of leading experts/managers in child protection at national and regional levels and limited feedback on the collected information about CAN

The coordination mechanism for identification and actions with children at risk, established in 2010, has been a step ahead in improving the system for the registration and agreed actions in the favour of the child victim of abuse. Unfortunately the mechanism still is not implemented effectively in some fields (e.g. health care).

Based on an analysis of the existing sources of information and published articles about the system of identification, registration and monitoring of child abuse and neglect in Bulgaria, we shall also point to some strong points.

There is a developed system for child protection, with clearly delineated responsibilities at national and regional levels, and a well equipped and functioning 24-hour Child Help line.

There is a unified operative definition for child abuse and neglect, structured forms for the collection of information on CAN cases, a written model for the coordination of different institutions in the process of identifying and registering CAN cases at regional and national levels.

Strong and active NGOs and the delegation of services (incl. CAN) to them are one of the advantages in the process of improving the child protection system in Bulgaria.

### **The rationale for a CAN-MDS in Bulgaria**

The opportunities offered by the implementation mechanism and tools, developed within the framework of the DAPHNE Project using a minimum data set will support the establishment of national CAN monitoring systems in Bulgaria, mainly through:

- Improving coordination and unidirectional collection of information about CAN data.
- Provision of tools and a methodology, which will improve existing ones in Bulgaria.
- Unification of efforts at national and international levels will provide opportunities to improve existing practices.
- Provision of aggregated data collection and analysis, addressing data gaps for the development of evidence-based policy and strategy.
- Bulgaria may contribute with its experience and will have a chance to be part of a European platform for CAN-MDS.

## 2. Legal framework

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The main responsibilities for child protection in Bulgaria are delegated to the State Agency for Child Protection and Departments for Child Protection, managed by the Agency for Social Support to The Ministry of Social Welfare. The other child protection bodies (Child Protection Act, Art, 6 and Art. 6a) are: Social Assistance Directorates, the Minister of Labour and Social Policy, the Minister of the Interior, the Minister of Education and Science, the Minister of Justice, the Minister of Foreign Affairs, the Minister of Culture, the Minister of Health care and the Mayors of the municipalities.

The main obligations of above mentioned bodies for child protection (Art. 6a/CPA) are connected with the development and implementation of National Policy, National Strategy and the National Programme for Child Protection, as well as providing a coordinating mechanism for interaction in accordance with their competences in the field of child protection.

The participation of Not-for-Profit Legal Entities in child protection activities shall cooperate with state and municipal bodies in child protection activities (Article 9).

### 3.1. Legislation, policies and mandates for reporting and recording of CAN cases in different professional fields

The main activities and responsibilities for the protection against violence against children are delineated in Child Protection Act (2000).

#### **Obligation to Cooperate (Art. 7/CPA)**

*(1) Persons, who become aware of the existence of a child in need of protection, shall immediately report the case to the Social Assistance Directorate, the State Agency for Child Protection or the Ministry of the Interior.*

*(2) The same obligation shall be undertaken by all persons, who become aware of the said situation in the course of exercising their profession or occupation, irrespective of them being bound by an occupational secret.*



*(3) Upon submission of a report to the State Agency for Child Protection that a child needs protection, the chairman thereof shall immediately forward the said report to the Child Protection Department of the Social Assistance Directorate at the child's current address.*

*(4) Upon receipt of information under Paragraph (1) relating to the activity of another institution, the information shall be sent to that institution on grounds of competence.*

*(5) Central and regional bodies of the executive power, as well as the specialised institutions for children in view of their official duties shall render timely assistance and provide information to the State Agency for Child Protection and to the Social Assistance Directorates under terms and according to a procedure established by the Personal Data Protection Act.*

### **Protection against Violence (Article 11).**

*(1) Every child has a right to protection against involvement in activities that are harmful to his or her physical, mental, moral and educational development.*

*(2) Every child has a right to protection against all methods of upbringing, that undermine his or her dignity; against physical, psychical or other types of violence; against all forms of influence, which go against his or her interests.*

*(3) Every child has a right to protection against the use of children for purposes of begging, prostitution, dissemination of pornographic material, receipt of unlawful pecuniary income, as well as protection against sexual abuse.*

*(4) Every child has a right to protection against forcible involvement in political, religious and trade union activities.*

The other important step in legislation in the field of child abuse and neglect is the amendment of the Law on Protection against Domestic Violence (2005): Art. 2 (2) *Domestic violence committed in the presence of a child is considered as psychological and emotional violence against the child herself/ himself.*

In 2009 the changes in Health Act (Art. 125a) postulates that medical specialists are obliged to report to Social Assistance Directorate all risk cases for child abuse and neglect.

*The agencies maintained archives for CAN cases in Bulgaria are: Agency for Social Assistance, SACP, Ministry of Interior, structures of Ministry of Health, Social services Providers for children and families, Court, Prosecution offices.*

The big step ahead towards improvement of the system for identification, registration and monitoring of CAN cases is Coordination Mechanism for Children at Risk (2010). This piece of legislation delineates:

- Clear responsibilities of national bodies for child protection
- Clear responsibilities of representatives of local bodies for child protection
- Procedure for crisis intervention
- Cooperation between professionals.

In the later chapters more details on the Coordination Mechanism will be presented.

Two years after acceptance of the Coordination Mechanism, a Mechanism against school bullying between children and pupils in school was signed.

The Mechanism is developed by Ministry of Education, Youth and Science with the participation of MLSP, ASA, SACP, Ministry of Interior, CCAAAM (ЦКБППМН) and nongovernmental organisations: National Network for Children, Foundation “Steps for Invisible Children in Bulgaria”, Animus Foundation Association, Psychology Society in Bulgaria and UNICEF. **The aim is to provide a uniform mechanism for acting against bullying to assist schools in their efforts to deal with this phenomenon.**

The content of this document includes: explanations of the terms “violence” and “bullying”, mandatory elements of a mechanism for combating school bullying, delineation of main resources that schools and the Ministry of Education, Youth and Science must ensure for effective actions against school bullying.

### **3.2. Legal provisions concerning the administration of sensitive personal data**

The administration of sensitive personal data is based mainly on the **Child Protection Act (Art. 7(5), 11a, 16(1,2,3))** and **Law for Protection of Personal data (Art.5)**.

#### **Child Protection Act**

##### **Protection of the Child's Personality**

**Article 11a.** (New, SG No. 14/2009) (1) *No information or data about a child may be disclosed without the consent of his/her parents or legal representatives save in the cases pursuant to Article 7 (1).*

*(2) In cases when a measure for the protection of a child has been taken, no information or data about a child may be disclosed without the written consent of the child protection body taking the measure.*

*(3) When the child has reached the age of 14, his/her consent for the disclosure of information or data shall also be required.*

Confidentiality of information in administrative and judicial proceedings affecting the child is described in article 16 from CPA (Amended-SG, 14/2009).

**Article 16.(1)** *All information, obtained through administrative or judicial proceedings and concerning a child shall not be disclosed without the parents' consent and without the child's consent where the child has reached the age of 10.*

**(2)** *The court may permit the bodies under this Act to use information pursuant to para 1 without the consent of persons under para 1, should it become necessary in view of the child's interests or for purposes of undertaking child protection measures.*

*(3) Social workers and officials who become aware of personal data when implementing their duties are obliged to keep the legal provisions regarding the protection of personal data as well as to respect the personal dignity.*

### **Law for Protection of Personal data**

Art. 5. (amend. – SG 103/2005)

*(1) It shall be prohibited to process personal data which:....*

*3. refer to health, sexual life or human genome.*

*(2) Para. (1) shall not apply when:*

*3. processing is necessary in order to protect the life and health of the individual to whom such data refer, or of another person, and the physical condition of such individual makes him or her incapable of giving his/her consent, or there are legal impediments to doing so;*

*4. (b) the data are not disclosed to a third party without the consent of the individual to whom such data refer;*

*5. 6. processing of the data is required for the purposes of preventive medicine, medical diagnostics, the provision or management of health-care services provided that such data are processed by a medical professional who is bound by law to professional secrecy, or by another person under a similar obligation of secrecy;*

Rules for the structure and activity of homes for the upbringing of children deprived of parental care, issued by the Minister of Education and Science:

*14. provides procedures designed to protect personal information about children under the Law for protection of personal data and in cases under item 2 of the Standard 8 from the Annex № 3 to Art. 48 of the Ordinance on the Criteria and Standards for social services for children;*

**In the recent years key strategic policy documents in the field of CAN have been developed by the leadership of the State Agency for Child Protection.**

National Strategy for the Child (2008 – 2018), which includes measures and activities for the prevention of all forms of violence against children.

Each year SACP adopts a national program for child protection and each municipality develops its local strategy. Prevention of CAN has been a permanent priority in the National Programs for Child Protection since 2002.

In accordance with the recommendations of the CRC committee after the 2<sup>nd</sup> Periodical report of the Republic of Bulgaria for implementation of the Child Rights Convention, a National Plan for Prevention of Violence (2012-2014) was developed by the specialized group “Prevention of violence and exploitation of children “ (affiliated to the National Council for Child Protection). One of the strategic goals in the plan is: Increasing effectiveness of the measures for child protection from violence by:

- Maintaining a database of cases of child victims of violence
- Reviewing and analysing needs, and harmonizing the indicators for information collected from different institutions
- Monitoring of the implementation of Coordination Mechanism for cooperation in cases of child maltreatment and interaction in crisis situation.

In last ten years Bulgaria has undertaken a number of measures for improving the child protection system. Each year an amendment to the key legislation concerning CAN is made. But still there are many unresolved problems with the implementation of legislation in practice.

## 4. Brief overview of child maltreatment prevention & child protection

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### Legislative framework and practice for child maltreatment prevention and child protection

The principal legislative instrument regulating child protection is the Child Protection Act. The CPA regulates the rights, principles and measures for child protection, the responsible authorities at national and regional levels and their interaction/cooperation in the implementation of activities for child protection, and the participation of legal and natural persons in the above mentioned activities.

The key agencies, professionals and their responsibilities for child maltreatment prevention and child protection are clearly defined in the Child Protection Act, Regulations for Implementation of the Child Protection Act and Coordination Mechanism for children at risk.

#### 4.1. Roles and responsibilities

The key professionals working in the field of child maltreatment prevention and child protection are: social workers, psychologists, social pedagogues, medical doctors (pediatricians, child psychiatrists, obstetricians) and nurses.

**Department for Child Protection. Directorate for Social assistance** – perform the current practical work of child protection in the region. When a child is in need of social services, a direction is made to the service's provider.

**Health services, Regional Center for Health (Regional Health Inspection), child's general practitioner, Emergency Department** – provide/ enable accessible and quality health care. In cases of child maltreatment, a free (of charge) medical examination is provided by the Department of Forensic Medicine, in order to complete a forensic medical certificate /с оглед изготвяне на съдебно-медицинско удостоверение.

**Municipalities** are responsible for:

- Unification and coordination of the policies for child protection;
- Development of the municipal strategy for child protection. Parts of this are activities and measures for protection and support to children, victims of maltreatment and activities for child abuse prevention at a municipal level.

**Regional inspectorates for Education, Schools' Principals, Kindergartens's Principals, Class Teachers, and School Psychologists** – inform the Department of Child Protection and/or Police in a case of maltreatment in school or suspected cases for physical and emotional maltreatment. Assist in the course of work on the case.

**NGOs** - When an NGO is a service provider it provides specialists with the aim of psychological and/ or social support to child victims of violence; timely provision of respected services to the child (including a residential service\_in the case of accommodation outside the family as a protective measure);

When the signal is directed to NGOs, the Department of Child Protection relevant to the permanent address of the child must be informed.

The State Agency for Child Protection was established in 2000 under the Law on Child Protection (LCP) by Council of Ministers Decree No. 226/30.10.2000. In accordance with the LCP the Agency is a specialized body of the Council of Ministers for guiding, coordinating and monitoring the implementation of the state policy for child protection. There is also a National Council on the Child Protection headed by the Agency's Chairperson. (see Chapter III. Section D below.)

Since 2003 prevention of violence against children has been among the priorities of state policy for the protection of children. The realisation of this priority is within the competence of various central and local authorities, the main coordinating role being given to the Child Protection State Agency and the Ministry of Interior.

The NGOs have also a fundamental role in initiatives addressing violence against children. There are approximately 130 non-governmental organisations (NGOs) in Bulgaria, actively working on children's issues, some of which are specialised in various aspects of violence against children. Their main activities are focused on the prevention of violence, information campaigning and some also provide recovery and reintegration services for children victims of violence. Animus Association have the leading role.

The developed by SACP **Agreement for cooperation and coordination of the work of regional structures for child protection with children, victims or at risk of abuse and for crisis intervention (2010)** is one of the main achievements in the coordination of activities and sharing responsibilities in child abuse and neglect prevention.

There is clear delineation of the actions of the teams working with cases of child victims or children at risk of abuse.

One month after signing the Agreement in every municipality, interdepartmental teams have been established to take prompt, adequate and coordinated measures in cases of child victims or children at risk of abuse. The teams organise their common activities to guide the entire process of working on a particular case.

The responsibility for setting up the teams is assumed by the Child Protection Department of the Social Assistance Directorate at the current address of the child with the support of municipal mayors. Their work is governed by the Law of Child Protection and the Law on Domestic Violence while respecting the principle of the best interests of the child and ensuring an effective system to prevent and control the observance of his/her rights.

One of the main activities of the teams is to identify potential hazards to life and health of the child and to designate ways of working and sharing tasks among other institutions.

The Mechanism is developed together with a scheme for the actions of the teams during an alert for a child at risk or threatened by an act of violence. The signal can be sent out at the Social Assistance Directorate, the State Agency for Child Protection or the Ministry of Interior. If the signal is received by any of the above agencies, the State Agency for Child Protection and the Ministry of Interior are required to transfer it to the Social Assistance Directorate.

One of the most important requirements concerning the time limits within which those responsible for the departments should respond to a signal. Within an hour after receiving the signal, the Department of Child Protection should assign a responsible social worker to the case. Furthermore, within the next 24 hours the signal is checked. If there is a risk, then they open a case and report the results of the inspection. Copies of this report are sent onto the other involved institutions and soon a team meeting is organised to make a plan about the case. The meeting establishes a joint action plan according the commitments of the relevant authorities. Mandatory participants in the meeting are social workers from the Child Protection Department at the Social Assistance Directorate, representatives of the mayor and the Regional Management of the Ministry of Interior. If the child's state requires it, the team will work together with general practitioners. Doctors must report an act of violence or threat of violence, as must the Regional Education Inspectorate, the Director of

the school or kindergarten, class teachers or educators, school psychologists, a local commission to combat delinquency of minors and the District Attorney.

In discussing the cases, associations and external consultants working on the problems of children are involved. They determine the appropriate measures to prevent risk factors for the child, to assess the need for removal of the child from his/her family and to be placed in another location when all the possibilities have been exhausted. If there is a court order to remove the child from family, the teams co-operate with directors of social institutions, transitional homes, etc. The experts shall together determine the abilities and needs of the child, and where he/she will be accommodated at a suitable place. They develop plans to work with the child, with his/her own family or with the family, which he/she lives temporarily, as the case continues to be monitored.

The teams coordinate and determine actions, when there is harm to the child of a mixed marriage and/or Bulgarian origin abroad, or when violations of a child has a foreign character.

In cases when the signal concerns a child serving a sentence of imprisonment, the signal is sent to the Ministry of Justice.

#### **Team actions in crisis situation**

The actions in crisis situations in which children are involved are clearly defined in the Mechanism. The procedure is applied in the occurrence of a critical event or situation, characterized by high death rate, a great number of injured or perished people, severe traumas, acts of violence or terrorism, natural disaster, serious road accidents etc. In these cases, there is a high public interest, which adds to the effect on children's mental health. They are confused, feel anxiety, depression, fear, grief and close themselves off. That is why it is extremely important to make contact with these children as fast as possible, to decrease the impact of the traumatic stress, to accelerate the recovery of their normal pace of life and to continue working with those who need follow-up help.

In such serious situations the head of the Child Protection Department at the Social Assistance Directorate must within an hour inform the State Agency for Child Protection of any tragic circumstances and organize a group for crisis intervention. It includes a duty police officer, a duty judge, a duty municipal official and a headmaster or the head teacher of the child. The first goal of the team is to find a suitable place to accommodate the child.



During a crisis the local team develops a plan with tasks and deadlines and sets short-term goals and simplified actions. One of the most important actions is enabling the child to contact with relatives, friends, or classmates, that is, people whom they trust and in front of whom they would reveal their thoughts and feelings.

The State Agency for Child Protection provides a group of psychologists, whose aim is to prevent the effect of the experience and to allow the children to free themselves from the emotional stress and the negative memories as quickly as possible.

According to the Agreement for “hot cases”, the work of the team continues after the working hours, in non-working days and on holidays. Then, a social worker from the Child Protection Department will be available, as well as a duty municipal official, a duty doctor etc.

### ***Role of NGOs***

The old system for social protection and care didn't respond adequately to fulfilling the needs of marginalized children in the new context. The development of civil society organizations was perceived as having great potential to promote changes in this field. With international support and funding, good initiatives to meet the needs of children and families were developed.

The leading non-profit organizations in the field of child abuse and neglect are Foundation Association Animus, SAPI, Centre Nadia, Bulgarian Gender Studies, Save the children, European Children Trust, Gavroche, Big Brother/big sister, etc.

With external support the Foundation Association Animus has developed a range of services, both supporting victims of violence and attempting to develop some measures of prevention. Their work “has earned the respect of other organizations both in Bulgaria and abroad, which has led to increasing requests and pressure to participate in their activities such as training of other NGOs, participation in conferences and seminars and further develop certain services”.

Centre Nadia started its activities at nearly the same time as Foundation Association Animus did. A preventive consultancy centre and help line for children were developed.

The SAPI play very active role in the different areas of CAN: identification, intervention and prevention. The team of the SAPI participated in various national and international projects

in the aboved mentioned fields and make a great contributon to the development of effective policies and practices.

The other strong actor in supporting and developing an effective system for child protection in Bulgaria is The National Network for Children.

### ***Helplines***

For the last 15 years the numerous helplines for children have been developed. In 2005, within the framework of the project co-funded by the European Commission (Programme Safer Internet) the Bulgarian Safer Internet Hotline was created.

It accepts and fills in an online form on the website of the hotline all reports for illegal and harmful content and behaviour on the internet: The Internet Hotline - Child sexual abuse images; Soliciting and grooming of minors through online channels for involvement in virtual sex or with the purpose of sexual abuse; Trafficking of children; Violence against children; Submission of pornographic material to minors; Pornography, easily accessible to minors; Extreme violence and brutality; Racism, xenophobia, fueling ethnic and racial enmity; Propaganda or sale of drugs; Propaganda of harmful behavior - suicide, self-harm, anorexia, bulimia.

After receiving the report, an operator verifies the reported content, makes an initial assesement about whether it is illegal or harmful for minors and takes appropriate actions, which include notifying the hosting company or organisation and/or competent authorities.

The hotline acts also as a source of information for Internet users and especially carers, teachers and children by providing links to information and advice on the Safer Internet Centre portal site about the prevention of online risks for children, possible technical tools (for filtering and monitoring online content) and measures to combat illegal and harmful content on the Internet undertaken by national authorities, the EC, other countries, international governmental and non-governmental organisations. The Internet hotline – abbreviated as SAFE-NET BG – became a member of the International Association of Internet Hotline Operators INHOPE supported by the European Commission.

One year after its establishment the Bulgarian Hotline has become a member of the International Association of Internet Hotlines INHOPE.

The biggest achievement in the recent years is the *National Help Line for Children*.

The creation of a National Hot Line for Children is accepted as a great public necessity (UNICEF, 2008) and the expectancy for its effectiveness was great.

In March 2010 the web page of the National Helpline was created ([www.116111.bg](http://www.116111.bg)) and it operated with the harmonised European number 116 111. The Line provides free of charge, 24 hours 7 days of week, services for the whole country: counseling, information and help for children and adolescents, their parents, relatives, other adults who are concerned for the problems of a child.

The Helpline is financed and monitored by SACP and is currently run by the Animus Association Foundation after winning the national competition opened by SACP under the Public Procurement Act to provide the service of a National Helpline for Children 116 111.

A team of specially trained counselors answer the calls on the Helpline and help the callers by offering emotional support, space for sharing freely about their hard feelings and sources of difficulties, crisis intervention, information about the available resources and ways of dealing with various problems.

The Helpline also has the goal of identifying at-risk children and referring such cases to the child protection services quickly and effectively (most often, the child protection departments and the Police) and also of providing both children and concerned adults with the opportunity to give signals for at-risk children, which is especially important for those who have no direct access to the child protection services due to location, financial or social limitations.

According to SACP in the year of 2010, 66 366 calls were accepted by the operators of National Hot Line and 11645 consultations were provided to children. Most of the calls (79 %) were from children aged over 12 years.

For the period 2009-2012 there were 810 signals for children at risk.

#### **4.1.1. Agencies mandated with the recording of child abuse and neglect cases**

*The agencies maintaining archives for CAN cases in Bulgaria are: Agency for Social Assistance, SACP, Ministry of Interior, structures of Ministry of Health, Social Services Providers for children and families, Court and Prosecution offices.*

Cases of CAN have been reported by the National Information System (NIS), which has been created and maintained by the State Agency for Child Protection in accordance with Art. 17a, para 9 of the Child Protection Act (CPA).

SACP also analyses data from the National Child Hotline (NCH) 116111 and some of it, for a number of incidents, is included in the overall data because it is used by the CPDs.

Since its establishment in 2001, the State Agency for Child Protection (SACP) has collected information on the number and the profile of child victims of violence.

In 2003 SACP developed an Information Card for reporting registered CAN cases (2003, SACP).

- New variables were added to the used in 2001 - number of cases of violence against children and the protective measures undertaken.
- The card is filled by each department of child protection. The SACP collects the information from the child protection departments in a regular three month period.
- The SACP collects and summarizes the data from all institutions (police, health care, educational setting, social institutions, NGOs).
- Twice a year information about CAN cases is presented on the web page of SACP.

Topics, included in the information card are:

- *Information about the Child (age, sex)*
- *Period, when violence is conducted: reported period, previous period*
- *Type of Violence: physical, mental/psychological, sexual, neglect*
- *Perpetrator: parent (mother, father), relative, teacher, familiar person (neighbor), unfamiliar person, other child, unknown person, others*
- *Person, reported signal for CAN: mother, father, grandparents, relatives, neighbor, teacher, the child, victim of CAN; policeman, anonymous person, medical professional, other*
- *Implemented procedure according to Coordination Mechanism*
- Every three months SACP collects information from the Departments for Child Protection.

In order to study the difficulties, needs and recommendations of staff in the process of work with abused cases, SACP collects information from the professionals involved in a six month period .

Simultaneously, but independently by SACP, Agency for Social Assistance collects information about CAN cases through its regional Child protection departments (the same as SACP uses for information), but in a different format and frequency.

Every month ASA collects information from Departments for Child Protection in four structured tables:

- Child (sex, age group)
- Type of CAN: physical, mental/psychological, sexual, neglect +exploitation of child labor, children, victims of trafficking
- Type of provided social and psychological support
- Specialized support outside the family

The Police also collect and maintain information about CAN cases, but this mainly relates to the details of perpetrators and place of committed violence.

The Police are obliged to report identified cases to SACP.

### **Procedure for registration of CAN cases**

The identification of child abuse and neglect is regulated by the Law of Child Protection and its implementation mechanisms. A relevant signal must be sent to the regional Departments of Child Protection or to the Police. It is mandatory for the police and other health organizations to notify the Departments of Child Protection about relevant activities with a particular child at risk, victim of abuse or neglect. Social workers are responsible for collecting all the information about a child, victim of abuse or care neglect coming from any possible source - family, relatives, school/kindergarten, GP's and others. Within a period of up to ten days, they must complete the evaluation of the signal to the Department of Child Protection and the final evaluation of each case must be finalized in 4 weeks. On the basis of this evaluation, an Action plan for the welfare of the relevant child is developed. The parents or the legal guardians of the child are consulted about the Action plan.

Although the system for recording CAN cases has existed for more than 10 years, there are still some problems to be solved, mainly connected with coordination between different services, timely sending of information and the use of a unifying protocol for the collection of information about CAN cases. Communication between agencies involved in the process of

identification and record of CAN cases still lacks the needed efficiency. There is a definite need for developing a screening policy for children at risk, victims of abuse and neglect.

*The system for monitoring of CAN cases in Bulgaria is still under development*

For its implementation there are various requirements:

- Development of current unifying methodology for the collection of information, including certain indicators and variables in each organization in the field of child abuse and neglect.
- Implementation of common definitions and terminology for child abuse and neglect and their forms.
- Development of standards for work with children, victims of abuse and their families.
- Permanent specialized training of personnel from all Mechanisms in charge of protecting children at risk, victims of abuse and care neglect should be a matter of constant organization.
- Multisectorial approach should be used as a instrument for realization of effective policies and practices for prevention at all levels in the field of child abuse and neglect.
- There is a need for regular survey about the effectiveness of the common practices in the field of child abuse and neglect in order to develop evidence-based, and child friendly policies and interventions.

#### 4.2.1 - Creating synergies: *Who could participate in the CAN-MDS? Core and extended national CAN-MDS groups*

**A. State Agency for Child Protection (SACP)**

**B. Social work**

- Ministry of Labor and Social Policy– central governmental organization
- Agency for Social Assistance (ASA)
- General Directorates for Social Assistance and Child Protection
- Social Service Departments (approx. 1000 including all cities and municipalities)
- Licensed NGOs

**C. Health care**

- Ministry of Health
- Regional Centers for Health care
- Pediatric Hospitals
- Emergency Departments
- Medical Universities
- Professional Associations of Family Doctors

**D. Education**

- Ministry of Education
- Regional Inspectorates for Education (28)

**E. Law enforcement**

- Ministry of Interior
- Police Directorates

**F. Justice**

- Ministry of Justice
- Courts

## 5. Advocating towards the adoption of a CAN-MDS

### 5.1 - Recent and on-going developments

The implementation of the CAN-MDS in Bulgaria could be supported by recent developments in the field of priorities, pointed out in the documents and strategic goals of SACP and respective agencies:

- National Action Plan for Prevention of Child abuse and neglect (2012-2014)
- National Program for Child Protection (2008-2018).

One of the seven strategic priorities in the National Program for Child Protection, 2012 is increasing the effectiveness of measures to protect children from violence, abuse and other forms of exploitation.

The main goal in the above mentioned priority is an Introduction of a system for early identification, registration, referring and cooperation in work signals and cases of child maltreatment in all institutions and organizations working with children.

The project activities are in accordance the objectives of the first operational strategic goal of the Plan: Increasing effectiveness of the measures for child protection from violence. Mainly in the implementation of the written tasks for the maintenance of a database of cases of child victims of violence and review and analysis of needs and harmonization of the indicators for collected information from different institutions.

The DAPHNE project “Coordinated response to child abuse and neglect via minimum data set” might be contribute to the enrichment of results and effectiveness of the Project of MLSP BG 51PO001 – 6.1.02, “Development of integrated information system in MLSP”, where the SACP is a partner.



## CONCLUSION

For the past ten years there have been increased efforts of the State, NGOs and society in the Republic of Bulgaria to act against all forms of child abuse but there are still many things that should be done in this field. Various legislative statements, strategies, action plans etc. have been accepted, providing a good basis for the realization of activities for the primary, secondary and tertiary prevention of child abuse and neglect in all its forms. Now it is a time for a concentration of all efforts to develop and implement mechanisms for the effective implementation of current legislation.

What is necessary is the sustainability and dissemination of good practices that address the problems presented by all kinds of child abuse, as well as integration of a multidisciplinary approach within current practices for child protection and intervention for child victims of all kinds of abuse. The development of a national register for children at risk for all kinds of abuse, based on an appropriate information system between all ministries, national and local authorities in the field of child protection, will support the efforts of specialists and optimize the system of care.

Moreover there is a need for additional training of specialists from the helping professions for effective work with children at risk and child victims of abuse, and their families. The following is recommended as an effective way for filling the gaps in the training of professionals: development of special modules about child abuse and neglect in the curriculums of helping professions - doctors (especially pediatricians, psychiatrists, general practitioners, obstetricians), nurses, social workers, psychologists, teachers and lawyers; development of interdisciplinary and continuing education for practitioners working with children and families.

To be successful all of the above mentioned activities should be evidence based, responding to the specific needs of children and their families, and be carried out by well-trained specialists.

All mentioned above can be supported by the implementation of core activities of the project "Coordinated response to child abuse and neglect via minimal data set", co-financed by the Daphne III Programme (2007-13) of the European Commission - DG Justice, Freedom & Security.

The good practices and successes of other partners in the project should be shared and adapted for practical use in Bulgaria, and the possibilities for evidence-based cross country comparisons will be enabled.

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## **Annex. List of Agencies and NGO's working in the fields of child abuse and neglect prevention and child protection (potential allies for the CAN-MDS)**

### **A. AGENCIES**

1. Agency for Social Assistance (Regional Departments for Child Protection)
2. State Agency for Child Protection
3. Ministry of Health (Regional Centers for Health Information)
4. Ministry of Education (Regional Inspectorates for Education)
5. National Centre for Public Health Protection and Analysis
6. Ministry of Interior (Regional Directorates)
7. Ministry of Justice

### **B. NGO's**

1. UNICEF, Bulgaria
2. Social Activities and Practices Institute
3. Animus Association Foundation
4. National Network for Children
5. Gavrosh Association, Varna
6. Opportunity and Protection Association
7. Family Center, Varna