

*Permanent Mission of Estonia
Geneva*

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The Permanent Mission of the Republic of Estonia to the United Nations Office and Other International Organisations in Geneva presents its compliments to the Office of the High Commissioner for Human Rights and in response to the Latter's letter from 31 March 2015, has the honour to forward the reply of the Government of Estonia in reference to the questionnaire prepared by the Special Rapporteur on the sale of children, child prostitution and child pornography to assess the assistance and rehabilitation programmes for child victims of sale and exploitation, including sexual exploitation in accordance with Human Rights Council resolution 7/13 of 27 March 2008.

The Permanent Mission of Estonia in Geneva avails itself of this opportunity to renew to the Office of the High Commissioner for Human Rights the assurances of its highest consideration.

Geneva, 30 April 2015



Enclosure: 4 pages

Office of the High Commissioner for Human Rights
GENEVA

OHCHR REGISTRY

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Recipients : *S.P.O.*

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Enclosure
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Questionnaire on assistance and rehabilitation programmes for child victims of sale and exploitation, including sexual exploitation

Reply of the Government of Estonia

Ms Maud de Boer-Buquicchio

Estonia would like express support for this questionnaire and thank the Special Rapporteur in highlighting this particular topic. The need to reform the current regulation and practice on assistance and rehabilitation programmes for child victims, especially for victims of child sexual abuse, is one of the priorities for Estonia. In the light of the need of reforms, support, recommendations and sharing of good practices are highly appreciated.

Estonia's answers are the following:

1. The law provides for the establishment of a network of victim support centers in all counties. Based on the agreement between the Social Insurance Board and the Police and Borderguard, victim support centres are mostly located in local police stations, as a policeman is in his work the first who comes into contact with the victim to crime and he also has all the information on his region. Based on the cooperation agreement, police will provide information about crimes of violence to victim support workers.

After crime or misdemeanour comes to light, the primary form of assistance is national victim support service (Victim Support Act (<https://www.riigiteataja.ee/en/eli/517062014014/consolide>)). Victim support service is ensured by the Estonian National Social Insurance Board, which is governed by the Ministry of Social Affairs. Victim Support Service is funded annually from the State Budget.

A person has the right to receive victim support service aiming at maintaining or enhancing the ability to cope of persons who have fallen victim to negligence, mistreatment or physical, mental or sexual abuse.

Victim support centres employ at least one in every county and all together 21 victim support coordinators who have undergone two-month training to obtain systematic knowledge and skills in victim support work so as to be able to organise the provision of victim support services to victims and be able to incorporate the regional victim support system into the nationwide network. A task of victim support workers is to form a regional network for rendering victim support services comprising: police, emergency medical aid, medical professionals, social workers, rescue service, neighbour watch, various extra-governmental organizations etc. Victim support worker must be able to evaluate the situation and send the victim after the primary interview to a regional family centre, psychologist, support group, self-assistance group or other organizations who are competent to render qualified assistance to the victim.

The Estonian National Social Insurance Board concludes partnership contracts with service providers, whether NGOs or private practices. When a child victim of sale or sexual

exploitation/his or her legal representative has applied for victim support, the victim support coordinator conducts an assessment and then directs the child to appropriate service(s). This action serves as a guarantee for the service provider that the Victim Support pays for the service.

Main services provided are counselling of victims, assisting victims in communicating with state and local government authorities and legal persons, ensuring safe accommodation, ensuring catering, ensuring access to necessary health services, providing necessary material and psychological assistance, enabling necessary translation and interpretation services for receiving the services provided within the framework of victim support services and providing other services necessary for physical and psycho-social rehabilitation of victims (Victim Support Act § (3) 2)). If a child is a secondary victim, the right to services, counselling in particular, extends to them.

Victims of human trafficking and sexually abused minors have the right to receive the abovementioned services until the need for the services ceases to exist. If minor victims of human trafficking, sexually abused minors need safe accommodation, substitute home service or foster care may be provided.

The following persons have the right to receive the services prescribed for victims of human trafficking and sexually abused minors:

- 1) if the Social Insurance Board has doubts that a criminal offence provided for in §§ 133 to 133³, 138 to 140 or 175 of the Penal Code has been committed against the person and the Social Insurance Board has submitted a report on a criminal offence to an investigative body or prosecutor's office for deciding on the commencement of criminal proceedings;
- 2) if the Social Insurance Board has doubts that a criminal offence provided for in §§ 141 to 145¹, 175¹ or 178 to 179 Penal Code has been committed against the person and the Social Insurance Board has submitted a report on a criminal offence to an investigative body or prosecutor's office for deciding on the commencement of criminal proceedings;
- 3) the person himself or herself or another person has submitted a report on a criminal offence to an investigative body or prosecutor's office and the content thereof is a criminal offence provided for in the sections specified in clauses 1) and 2) of this section and Border Guard Board has submitted a respective report on the person to the Social Insurance Board.

If criminal proceedings are not commenced in the abovementioned cases, services shall be provided to persons until the Social Insurance Board is notified of refusal to commence criminal proceedings by an investigative body or prosecutor's office.

Besides the Victim Support Service, the Child Mental Health Care Centers provide care that constitutes under medical service and is funded by the Health Insurance Fund. If the child has been diagnosed and received a treatment plan, the child is entitled to services that are on the Health Insurance Fund's list.

2. For a comprehensive and rights-based care and recovery system of child victims of sale and exploitation, including sexual exploitation, the core elements are the following: quality and effective services, geographically equally available services (reach-out service if needed), active case manager and systematic and segregated data collection.

Quality and effective services can be guaranteed by setting minimum standards of service providers and description of the service. Child victims of sale and sexual exploitation need very specific care and treatment and the persons that are to provide the victims recovery services, need to have an appropriate training and they need to follow a certain set of procedures.

Geographically equally available services grant that victims have the possibility to acquire recovery services as close to them as possible. Services also need to have certain mobility if the case so requires. Also, the local government and the Victim Support need to cooperate in order to ensure that the child reaches the service (transport, support person etc).

Systematic and segregated data collection is necessary to evaluate the victim support system and to plan relevant policies. Data should be segregated by the nature of offence (type of child victim), age, sex, period of recovery service(s) obtained, amount paid by the victim Support for the recovery service(s), whether first time applicant or repeated applicant and average distance to relevant service provider(s).

3. We would appreciate any good practices in this field.

4. As explained under question 2, we have identified many deficiencies and shortcomings, especially in the delivery of efficient services. The abovementioned Victim Support Act dates back to 2003, therefore the regulation of quality criterias and availability of the services are obsolete and need substantive reform. Recovery services (such as psychological counselling and psycho-social therapy) for sexually abused children and child victims of sale are mostly available in the bigger cities, meaning that child victims who live in the countryside are in a disadvantaged position in reaching the service and in regularly attending the service, therefore the child victim might not receive the service that is needed.

5. As we foresee the need to reform the current victim support system regarding child victims, we would greatly appreciate any good practices in this field.

6. The practice differs among different local municipalities and victim support coordinators. Although there is no legal obligation for the victim support coordinator to co-operate with the local child protection specialist, there are certain regions where this practice occurs. The child protection specialist makes necessary preparations to help the child reach the service (compensates the transport, organises child day-care for other child(ren) when the parent has to accompany the child victim to service etc). However, since this practice is solely dependent on individual cases, the responsibilities and co-operation of different stakeholders need to be regulated more presicely. Currently, it may happen that the victim support coordinator has information about a child victim but does not actively help the child to get the services, but

rather waits passively for the victim/his or her representative to apply for the services. Even if that application has been presented, the victim support co-ordinator only mediates the service provider and the victim but is not responsible, and neither is the local government's child protection worker, to make all the relevant efforts to help the child reach the services. Solving this issue is a challenge.

7. We would appreciate any good practices in this regard.

8. The Government has approved the strategy for preventing violence for 2015-2020. The Strategy encompasses violence between children, child abuse, domestic violence (intimate partner violence), sexual violence and trafficking in human beings. The violence prevention Strategy addresses broader aspects of violence prevention on three levels: firstly, public outreach and awareness raising, secondly focusing on persons who are at risk of victimization or committing an offense, and thirdly dealing with the consequences of violence, providing support to victims and intervention measures for perpetrators. The Strategy is based on the World Health Organization's approaches that risk factors of violence are societal (regulations in favor of violence, gender inequality), community based (inadequate victim's assistance services), relationship based (poor parenting skills) and individual (mental and behavioral disorders, substance abuse) and that in all those aspects the prevention of violence must be carried out.

Estonia is currently creating an integrated system to respond to violence against children, namely preparing to implement the Nordic model, the so called children's houses model in order to ascertain child abuse, to grant a child friendly criminal procedure and provide adequate and sufficient treatment and care.

The Development plan for Children and Families for 2012-2020 has set the support of positive parenting as an important strategic goal and provides for a number of activities aimed at more efficient supporting of parenting. Among the most important activities is the piloting of a program intended for parents of pre-school children under the evidence-based parenting program Incredible Years. This includes preliminary and follow-up studies, training for group leaders and implementation of the program. The evidence-based parenting program is implemented within the framework of the pre-determined project "Support System Development for Children and Youth at Risk" under the European Economic Area financial mechanism grants program "Children and Youth at Risk".

Estonian Ministry of Social Affairs is preparing draft legislation for mandatory home visitations of new-born babies.

Estonian Ministry of Social Affairs is currently preparing instructions for the specialists working with children in alternative care, in order to prevent violence against and between children in alternative care.