

POLAND STEERING COMMITTEE

Analysis of the existing practices on the initial and ongoing training programs dedicated to professionals intervening in the take in charge and the collection of the evidence of children, victims of sexual violence

The members of Steering Committee from Mederi Foundation analyzed information on the training programs in Poland on the subject of child abuse, specially sexual abuse. The information was obtained from the National Institute for Public Health, Postgraduate Medical Training Institute, Blue Line (Poland-wide hotline for victims of domestic violence) and Medical University of Warsaw.

This analysis was also done during local conferences in different cities (Białystok, Kraków, Bydgoszcz, Warszawa, Lublin) on the subject of interdisciplinary cooperation in child abuse between medical staff, police, court, social workers, psychologists. It was possible, because Mederi Foundation is situated in the biggest pediatric hospital in Poland, which is at the same time a postgraduate medical educative center belonging to the Ministry of Health.

In summary, initial training on the field of child abuse and neglect including sexual abuse: [1] compulsory for medical students: 2 hours in the sixth year of study at the University (Public Health), [2] obligatory for every doctor who wants to specialize in every field of medical sciences - Course of Public Health - duration of the course is 5 days, problems of domestic violence including child abuse - 4 hours. In general there is an initial training about child abuse with a section about sexual violence against children (part of general training) and obligatory course of Medical Law is dedicated to persons who want to specialize in every field of medical sciences – 3 days duration, but only 1 hour for child abuse.

Training for doctors should be permitted by Ministry of Health. Such permission is given to the medical Universities (for students) and postgraduate educative centers (Child Health Center with Mederi Foundation, other university hospitals). They are obligatory,



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uniform for all Poland, but only last 4 hours on the field of child abuse including sexual abuse. Initial training for doctors, especially a training for gynecologists (there is no specialization for pediatric gynecology) only general gynecology and special courses for doctors working with children: each year 1 five days course in a pediatric center with gynecology (it is not obligatory but it is recommended).

Ongoing training include interdisciplinary meetings and conferences (f.ex. five national conferences organized by Mederi Foundation in Child Health Center): they are not obligatory but doctors receive usually 10 to 13 educational points.

In Poland, obligatory and well-known program of relevant services in domestic violence cases is Blue Cards Procedure. Blue Card Procedure needs an obligatory and initial training. State Agency for Prevention of Alcohol Related Problems (Ministry of Health) is implementing and coordinating the Safety in the Family Program. Goals of this program are: reduce the scale of domestic violence problem; increase the effectiveness and availability of assistance and support for victims of domestic violence in families with alcohol-related problems; increase the number and efficiency of interventions against the perpetrators of domestic violence; boost the availability of education and corrective programs for perpetrators of violence; change public attitude towards domestic violence. Since 1995, Agency has commissioned the running of the School on Counteracting of domestic Violence; 120 hours of training prepares for work in the field of domestic violence prevention. The interdisciplinary training is addressed at social workers, employees of health service, education, judiciary, police and other public services. The Agency also stages interdisciplinary, ongoing training for probation officers, judges in family cases, health services etc. all these trainings are initial trainings with 2-3 hours about sexual abuse of children.

Since 1998, the police has put to use the Blue Cards Procedure in case of domestic violence. Since 2004, pursuant to the act on social welfare, the application of the procedure has also been obligatory for social workers. Main objectives of the Procedure are: stopping domestic violence; organized collection of information on the situation of each individual family; providing support to victims of domestic violence on possibilities for seeking assistance; taking intervention measures against the perpetrators of violence; making the diagnosis of family situation and preparing support plan that caters for the needs of all family members; launching local family support system based on the cooperation of individual



services. Policemen are trained in this procedure, but they lack a real training in case of sexual abuse, especially children.

In the city of Warsaw project “Creation of the domestic violence response system in Warsaw” has been created with cooperation of Social Policy Department and Oslo-based Welfare Agency specialists to present the Norwegian system for counteracting violence and sexual abuse of children. Initial and ongoing training (120 hours for each level) for different professional has been prepared – total number of participants is 750 persons including psychologists 249, pedagogues 212, social workers 144, teachers 46, nurses 21, physicians 8, policeman 29, custodians 40. The trainings improved the level of knowledge for identifying the acts of violence, its scale, circumstances (domestic violence, violence against women, children and elders) and the self-government's cooperation with the police and non-governmental organizations (Blue Line, Nobody Children Foundation, Mederi Foundation, Intervention Center for mother and child “Home”). The objective of the training programs was to prepare the employees of the institutions for counteracting violence to jointly create a municipal system for counteracting domestic violence and specifically to create local interdisciplinary teams for counteracting the violence phenomenon in a comprehensive way. Currently, no violence response systems of this type exist due, inter alia, to the lack of the persons competent enough in the field of organizing interdisciplinary work for counteracting violence and the lack of participants willing to work as team members.

Based on the conducted diagnosis and the outsourced research of training needs, a framework and a training schedule was prepared; the appointed team of lecturers will focus on creating an integrated domestic violence response and cooperation system. A series of trainings have been provided on the three following levels: basic training in first contact with violence victims, understanding violence, its implications and consequences for the quality of life, short diagnosis and fast intervention skills, special type training for the persons working directly with violence victims, including a long-term cooperation with the victims, a violence victim therapy, family consulting, work with children and a training on the integrated system and its functions. The training involved the participation of 750 persons (NGO's and City Council) of which at least 675 will acquire new knowledge and skills upon completion. New frameworks of cooperation between JSTs and NGOs shall be developed in the field of



project-related issues, a new system and three training programs shall be implemented and created.

As a steering committee we agree, that the initial and ongoing training programs are insufficient in Poland.

We would recommend a special training about sexual violence for medical professionals with differences about adult and adolescent protocols. We would consider the initial training for medical staff:

- Exam and evidence collection procedures adapted to patients needs and circumstances, evidence collection, storage policies, documentation of evidence, medical and mental health interventions,
- STI evaluation and care
- Pregnancy risk evaluation and care
- Medical discharge procedures and follow-up care.

The ongoing compulsory training should be devoted to the Medical Judicial Units to take into consideration the child's suffering on the medical, psychological, and social fields by looking to the needs of the interview and/or pre-trial investigation. This training should include the possibility of the organization of friendly interviewing room situated in the hospital. This training should be obligatory, because it should lead to develop national medical procedure (medical Blue Card) in the take in charge and the collection of the evidence of children, victims of sexual violence. We would consider the ongoing training for medical staff:

- Medical Judicial Unit
- Friendly interviewing room
- Medical Blue Card as the whole procedure

The professionals involved in the training would be magistrates, pedopsychiatrists and psychologists, police officers, doctors, social services, and the associations for childhood protection and victims' assistance. Our own experience is, that the Medical Judicial Units could improve significantly the situation of children, victims of sexual abuse and also improve the cooperation of different professionals. There is a great need to develop trainings about this topics.
