Romania

19,506
Population (thousands)

6%
Population below international poverty line

76 YEARS
Average life expectancy at birth

7
Under 5 mortality rate (per 1,000 births)

$239,553
Gross national product (millions)

99%
Literacy rate for male youth (15-24)

99%
Literacy rate for female youth (15-24)

Behaviors and Conditions Generally Viewed as Child Maltreatment

Age an individual is legally considered an adult [Q9]

- 14

Forms of acceptable punishment [Q11]

- Hitting a child on the buttocks with an open hand
- Hitting a child on the buttocks with an open hand
- Hitting a child on the buttocks with an object (e.g., shoe, belt)
- Hitting a child on the head or face with an open hand,
- Hitting a child anywhere else on the body with an open hand
- Locking a child in a small space, such as a closet

Actions considered forms of child maltreatment: Affecting children's safety, health, or development [Q12]

- Physical beating of a child by any adult
- Prostituting a child
- Infanticide
- Female circumcision/female genital mutilation
- Child serving as soldier
- Child labor – under age 12
- Slavery
- Internet solicitation for sex
- Child marriage
- Torture for political reasons

In the following places [Q13]

- School or educational training center
- Psychiatric institution

Involving a parent or caregiver [Q14]

- Failure to provide adequate food, clothing, medical care, education, or shelter (neglect)
- Failure to seek medical care for any reason
- Sexual abuse (e.g., incest, sexual touching)
- Exposing child to pornography
- Commercial sexual exploitation
- Failure to seek medical care for child based on religious beliefs
- Child is exposed to (witnesses) intimate partner (or domestic) violence
- Child exposed to parent's substance use

Official Documentation on Child Maltreatment

Government agency maintains official record/count of all suspected CM reported to authorities [Q15]	Yes
Agencies that maintain these records [Q16] • Courts	
The level at which records are maintained [Q17] • National	
Multiple agencies have interconnected recordkeeping systems [Q18]	No
How long this counting system has been in place [Q19]	Less than 5 years
Types of CM and intimate partner violence used to classify reports [Q20]	
Physical abuse	Yes
Sexual abuse	Yes
Neglect	Yes
Emotional (psychological) maltreatment	No
Exposure to intimate partner violence (IPV)	No
Change in the past 4 years in the number of reports for the following types of CM [Q21]	
Physical abuse	Fewer cases
Sexual abuse	Fewer cases
Neglect	More Cases
Emotional (psychological) maltreatment	N/A
Exposure to intimate partner violence (IPV)	N/A
Subgroups of children are systematically excluded from the reporting system [Q22]	No
Subgroups of children are included in this reporting system [Q24]	No
Country or most states/provinces have a law mandating reporting of suspected CM [Q26]	Yes
Year law too take effect [Q27]	After 2005
Law applies to [Q28] • Physical abuse • Sexual abuse • Neglect	

National Statistics

Percentage of reports of suspected CM that are responded to/investigated by social services [Q30]	30%
Percentage of all reports investigated that are substantiated or "proven" [Q31]	31-45%

The rate of proven CM per 1,000 children Q32	10
Year and period this rate applies to Q33	January
Official count represents number of children or number of responses Q34	Response count
One child or household can be counted more than once Q35	Yes
Percentage of responses/investigations for each of the following types of CM Q36	
Physical abuse	46-60%
Sexual abuse	0-15%
Neglect	61-75%
Emotional (psychological) maltreatment	0-15%
Street children	31-45%
Abandoned children	31-45%
Exposure to IPV	31-45%
Percent of substantiated reports that result in Q37	
Result in the perpetrator being removed from the home	16-30%
Lead to prosecution of the alleged perpetrator	16-30%
Result in the child being removed from the home	61-75%
Number of children removed from home living in: Q38	
Kinship care (with a family member)?	46-60%
Non-relative family foster care	16-30%
Residential care/orphanages	16-30%

Child Fatalities

An autopsy is required by law when a child's death Q39	
Is unexpected	Yes
Has an unclear cause	Yes
The autopsy is conducted by Q40	
• Hospital	
There is a specific protocol Q41	Yes
My country has child death/fatality review teams Q42	Yes
These teams are trained in recognizing child abuse and neglect Q43	No
These teams are required by law Q44	No
These teams are Q45	Local
An official annual count of deaths due to child abuse or neglect is maintained by a government agency Q46	No
The annual rate of child deaths attributed to CM Q47	1-2 in 100,000
Time period that this annual rate applies to Q48	January 2018
Percentage of child deaths that involves Q49	
Physical abuse	46-60%
Neglect	31-45%
Sexual Abuse	0-15%
Emotional Abuse	0-15%
Intimate Partner Violence	Don't know
In the past 10 years, the number of reported deaths due to CM Q50	Increased

Responses to Child Maltreatment

My country has an identified government agency (or agencies) at the national, state, or local levels that is mandated to respond to reports of CM Q51	Yes

Primary investigations are conducted by Q52
- Social services

Laws and Policies Responding to Child Maltreatment

My country has national laws or policies implemented at the state/provincial/territorial level regarding CM Q53	Yes
These laws were established Q54	After 2000
The following elements are specified in laws or policies Q55	
Mandated periodic training for professionals who may encounter maltreated children	Yes
Mandated reporting of suspected CM for specific groups of professionals or individuals	Yes
Mandated reporting of suspected CM for all adults	Yes
Provisions that allow for voluntary reporting of suspected CM by any professional or individual	No
Requirement that reports be investigated within a specific time period (e.g., 24 hours)	No
Requirement that the investigation be a coordinated intersectoral response	Np
Requirement that the child(ren)'s and family's needs be assessed	Yes
Provisions for removing child from his or her parents/caretakers to ensure the child's safety	Yes
Provisions for removing the alleged perpetrator from the home	Yes
Requirement that background checks be conducted for employees who work with children (e.g., teachers, day care workers, etc.)	Yes
Specific criminal penalties for maltreating a child	No
Requirement that all victims receive some form of service or intervention	Yes
Requirement that all perpetrators receive some form of service or intervention	No
Requires the development of specific prevention services	Yes
Requires that a separate attorney or advocate be assigned to represent the child's interests	No
Penalties for professionals who fail to report CM	No
Provision of immunity from liability when reports are made in good faith	No
Provide a specific budget for preventing CM	No
Clear definition of child neglect	Yes
Clear definition of child physical abuse	Yes
Clear definition of child sexual abuse	Yes
Clear definition of child emotional/psychological abuse	No

The sectors that are required to be included in the response Q56
- Child protection
- Law enforcement (police)
- Health (e.g., forensic doctor or pediatrician)

The extent to which these laws or policies are being enforced Q57	
Mandated periodic training for professionals who may encounter maltreated children	Inconsistently
Mandated reporting of suspected CM for specific groups of professionals or individuals	Inconsistently
Mandated reporting of suspected CM for all adults	Inconsistently
Provisions that allow for voluntary reporting of suspected CM by any professional or individual	Inconsistently
Requirement that reports be investigated within a specific time period (e.g., 24 hours)	Inconsistently
Requirement that the investigation be a coordinated intersectoral response	Inconsistently

Requirement that the child(ren)'s and family's needs be assessed	Widely
Provisions for removing child from his or her parents/ caretakers to ensure the child's safety	Widely
Provisions for removing the alleged perpetrator from the home	Inconsistently
Requirement that background checks be conducted for employees who work with children (e.g., teachers, daycare workers, etc.)	Inconsistently
Requirement that all victims receive some form of service or intervention	Widely
Requirement that all perpetrators receive some form of service or intervention	Inconsistently
Requirement that the development of specific prevention services	Widely
Requirement that a separate attorney or advocate be assigned to represent the child's interests	Inconsistently
Penalties for professionals who fail to report CM	Almost never
Provision of immunity from liability when reports are made in good faith	Almost never
Provision of a specific budget for preventing CM	Inconsistently

The adequacy of government resources for implementing these laws or policies [Q58]	
Mandated periodic training for professionals who may encounter	Somewhat inadequate
Requirement that reports be investigated within a specific time period (e.g., 24 hours)	Somewhat inadequate
Requirement that an investigation be a coordinated intersectoral response	Somewhat inadequate
Requirement that the child(ren)'s and family's needs be assessed	Adequate
Provisions for removing child from his or her parents/ caretakers to ensure the child's safety	Adequate
Provisions for removing the alleged perpetrator from the home	Somewhat inadequate
Requirement that all victims receive some form of service or intervention	Somewhat inadequate
Requirement that all perpetrators receive some form of service or intervention	Somewhat inadequate
Requirement that a separate attorney or advocate be assigned to represent the child's interests	Somewhat inadequate
Provision of a specific budget for preventing CM	Somewhat inadequate

Services

Child abuse and neglect services available and to what extent [Q59]	
Therapy for those who neglect a child	Occasionally
Therapy for neglected children	Moderately
Therapy for those who physically abuse a child	None
Therapy for physically abused children	Occasionally
Therapy for those who sexually abuse a child	None
Therapy for sexually abused children	Moderately
Case management support services to meet a family's basic needs	Occasionally
Home-based services to support parents and family	Occasionally
Foster care with official foster parents	Occasionally
Group homes for maltreated children	Occasionally
Public shelters for maltreated children	Moderately
Public shelters for victims of domestic violence and their children	Moderately
Financial and other material support	Moderately
Hospitalization for mental illness for adults	Occasionally
Hospitalization for mental illness for children	Occasionally
Substance abuse treatment for parents	None
Substance abuse treatment for children	None
Centers for parents to share experiences/concerns	None
Universal home visits for all new parents	Occasionally
Targeted home visits for new parents at-risk	Occasionally
Free/highly subsidized child care	Occasionally
Universal health screening for children	Occasionally
Universal, mostly free medical care for children	Occasionally
Universal, mostly free medical care for all citizens	Moderately

Prevention

The involvement of the following sectors in providing CM prevention services before CM has occurred [Q60]	
Hospitals/medical centers	Minimal
Mental health agencies	Minimal
Businesses/factories	Minimal
Schools	Moderate
Public social service agencies	Very
Community-based NGOs	Moderate
Religious institutions	Minimal
Voluntary civic organizations	Minimal
Courts/law enforcement	Moderate
Universities	Minimal
The level of involvement for the following sectors in providing CM treatment services after CM has occurred [Q61]	
Hospitals/medical centers	Moderate
Mental health agencies	Moderate
Businesses/factories	Minimal
Schools	Minimal
Public social service agencies	Very
Community-based NGOs	Moderate
Religious institutions	None
Voluntary civic organizations	None
Courts/law enforcement	Moderate
Universities	None
The extent to which government and non-governmental agencies fund CM prevention services [Q62]	
Government	Minimal
Non-government	Moderate
The extent to which government and non-governmental agencies fund CM treatment services [Q63]	
Government	Moderate
Non-government	Minimal
The effectiveness of these strategies in preventing CM [Q64]	
Nurse Family Partnership	Not effective
Home-based services and support for parents at risk	Seems effective
Media campaigns to raise public awareness	Not effective
Risk assessment methods	Not effective
Increasing individual responsibility for child protection	Not effective
Prosecution of child abuse offenders	Not effective

Universal home visitation for new parents	Not effective
Improving/increasing local services	Seems effective
A system of universal health care and access to preventive medical care	Not effective
Professional training	Not effective
University programs for students	Not effective
Advocacy for children's rights	Not used
Improving the basic living conditions of families (e.g., housing, access to clean water).	Seems effective
Mental health services	Not effective
Substance abuse services	Not used
Services for victims of domestic violence	Not effective
Child death review teams	Not Used
Trauma-Focused Cognitive Behavioral Therapy	Not used
Multi-Systemic Therapy	Not effective
Triple P Positive Parenting Program	Not used
Safe Care parenting program	Not effective
The importance of the following barriers in limiting efforts to prevent CM Q65	
Limited resources for improving the government's response to CM	Quite
Lack of specific laws related to CM	Quite
Lack of system to investigate reports of CM	Quite
Lack of trained professionals	Quite
Public resistance to supporting prevention efforts	Somewhat
Extreme poverty	Somewhat
Decline in family life and informal support systems for parents	Somewhat
Strong sense of family privacy and parental rights to raise children as they choose	Somewhat
General support for the use of corporal punishment/physical discipline of children	Somewhat
Lack of commitment or support for children's rights	Somewhat
Overwhelming number of children living on their own	Somewhat
Generally inadequate and poorly developed systems of basic health care or social services	Quite
Political or religious conflict and instability	Somewhat
Lack of access to mental health services	Somewhat
Lack of substance abuse treatment	Somewhat
Lack of laws allowing sharing of information among professionals	Quite

Child Sexual Exploitation

The following questions pertain to child sex exploitation (CSE), defined as: the recruitment, harboring, transportation, trafficking, provision, or obtaining of a person under 18 for the purpose of a commercial sex act -- by force, fraud, or coercion.

The extent to which my country has laws concerning CSE Q66	Somewhat
The extent to which my country has programs to combat CSE Q67	Somewhat
The extent to which agencies collaborate to stop CSE Q68	Somewhat
The extent to which clear policies exist for reporting CSE to a public agency or NGO Q69	Not really
My country keeps official records on CSE Q70	Yes
Commercial sex work is legal in my country Q71	No
The extent to which CSE victims receive mental health care Q73	Sometimes
The extent to which my country prosecutes citizens who engage in CSE Q74	Mostly
The extent to which my country prosecutes citizens who engage in CSE abroad Q75	Sometimes
The extent to which my country prosecutes foreigners who engage in CSE within my country Q76	Sometimes
The extent to which my country arrests children who are exploited sexually Q77	Sometimes
There have been arrests in my country in the past year of persons who sexually exploit children Q78	Yes
There have been arrests in my country in the past year of persons for the possession or production of child pornography Q79	Yes

Resources

The extent to which the UNCRC has helped improve CM policies and programs Q80	Somewhat