

# Workbook to Accompany

“Multidisciplinary Collaboration in Combatting Child Sexual Abuse, Exploitation and Trafficking: A Guide for Professionals.”

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# Workbook

This workbook accompanies the online training module titled, “Multidisciplinary Collaboration in Combatting Child Sexual Abuse, Exploitation and Trafficking: A Guide for Professionals.” It is best used in conjunction with that module, as well as with the [“Framework for Multidisciplinary Collaboration on the Response to Child Sexual Abuse, Child Sexual Exploitation and Child Trafficking in Human Beings”](#) (hereafter referred to as the ‘Framework’). You may want to listen to the online module (which takes approximately 1 hour) and then address the workbook exercises, or stop periodically during the online module to address each exercise as it comes up. The workbook may be used by individuals or groups of professionals participating in the training and is designed to foster consideration and discussion of topics that are important in the development of a multidisciplinary team protocol for cases of child trafficking in human beings, child sexual abuse and child sexual exploitation (THB/CSA/CSE). The results of exercises and discussions may be used to adapt the Framework’s multidisciplinary team protocol template to create a protocol that meets the needs of target communities as they strive to codify collaborative practices.



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# Workbook Exercises

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## Exercise 1:

Police learn of a 10-year-old girl who is suspected to be the victim of child sexual abuse and production of child sexual abuse material (CSAM). Graphic photos of the child are discovered on the father's computer.

**How would this case be handled in your community?** Consider the process sequentially.....

- a) Who is initially notified about the case?
- b) What initial steps do police take, in terms of communicating with the prosecutor's office?
- c) Will the child be referred for a forensic medical evaluation?
- d) What agencies/organizations will be involved in assessing the needs and providing services for this child and family?

## Exercise 2:

- a) What **types of multidisciplinary collaboration are practiced in your community** when addressing THB/CSA/CSE?
- b) Of all the agencies/organisations participating in the investigation and service provision, **which ones communicate with each other and share information?** What information do they share?
- c) **Is there a formal protocol**, memorandum of understanding or other written document outlining the process of collaboration?

## Exercise 3:

What barriers exist in your community that inhibit multidisciplinary collaboration when addressing THB/ CSA/CSE, including information-sharing and joint participation in activities?

## Exercise 4:

MDTs may focus on a variety of child protection activities. Some include all types of child sexual abuse, for example, while others confine their work to online child sexual exploitation cases; and others focus on child sex trafficking. The area of jurisdiction also varies: some MDTs may serve a community while others serve a state or even an entire country.

What is/will be the **scope** of your MDT? What is/will be **the geographic distribution** of your target area?

## Exercise 5:

A 'goal' defines a broad, long-term outcome that is achievable but can be intangible and non-measurable. It has a relatively wide range.

In contrast an 'objective' describes a measurable strategy to achieve an overall goal; it has a discrete and tangible outcome. It implies deliverables that help to reach the overall goal.

What are/will be the **goals** of your multidisciplinary team (MDT)?

## Exercise 6:

What are/will be the **objectives** of your multidisciplinary team (MDT)?



# Exercise 7:

What are/will be the **activities** of your multidisciplinary team (MDT)?

## Exercise 8:

**Who should be on your MDT? Make a list** of organizations/agencies.

Ideally, an MDT has representatives from all stakeholder organizations and agencies that work with children who have experienced or are at risk of THB/CSA/CSE. However, you need to determine what is feasible in your jurisdiction. You may decide to have a core group of essential members who routinely interact on cases, and an adjunct group that is available for consultation on any given case, as needed. For ideas about who should be on the MDT, please see the “Framework,” [“MDT Composition” on page 15.](#)

## Exercise 9:

Create a community map of the government agencies involved in addressing THB/CSA/CSE and available NGO/INGO's that serve those who experience abuse or are at risk (for example, law enforcement, child welfare office; domestic violence shelter; substance misuse rehabilitation center; medical clinic; immigration assistance, housing). Include the following information for each organisation:

- Name of agency/organisation
- Phone number
- Email contact
- Address
- For NGO/INGO's: include a brief description of services provided and target population. Additional information may be helpful, such as hours of operation; any fees required for services, etc.

Where are there gaps in services? How can you address these gaps?

# Exercise 10:

## **What are 5 of the most important elements to include in your MOU?**

Consider the organisations involved, and the information and type of collaboration that are needed from each organisation. Keep in mind that you may add organisations to an existing MDT MOU, as you grow your team. And the MOU is a dynamic document that should be reviewed and updated periodically to meet the changing needs of the MDT and community.

# Exercise 11:

Make a list of possible strategies for collaboration. Consider what is feasible in your **current situation**, but also consider the **'ideal' situation** in which you would be permitted to exchange information with other professionals. What types of collaboration would you envision if there were no obstacles to information-sharing?

**Potential Collaboration Strategies for Current Situation:**

**Potential Collaboration Strategies If Information-Sharing Was Permitted:**

# Exercise 12:

**What information from other MDT members is important for your work?**

What are the current challenges to sharing information with professionals from external organisations/agencies?

**What are possible solutions to these challenges?**

## Exercise 13:

It is extremely important for MDT members to establish an agreed upon safe, secure method of communicating case information with one another, and storing case data. No matter what system is used, it is important for the child and the caregiver to understand the details of the information-sharing process. For example, you may want to obtain a signed release of information from the caregiver, with explanations of the nature of the MDT; who will have access to what information; and how that information will be protected. The release should have a specific time limit. The information sharing and dating protection procedures should be explained to the child (as developmentally appropriate) and caregiver in a way they can understand, using professional interpreters as needed. The procedures must be consistent with legal, ethical, and professional standards of practice, as well as with existing laws regarding data protection. Potential strategies for sharing information may entail online password protected databases located on a secure server; encrypted email; etc. The exact strategies used will depend on the resources, relevant laws, and other local factors.

**Describe the process for safe information sharing and storage you envision for your MDT.** Be specific (e.g.,: include details about how information will be communicated among MDT members, who will obtain the consent to release information, and how child and family confidentiality and privacy will be ensured.)

# Exercise 14:

**Describe the process you envision for cross-reporting** of new cases of suspected THB/CSA/CSE. Consider the following questions.

- What are the multiple pathways for entry into the system?
- Who needs immediate notification of a new case?
- Who needs nonemergent notification?
- How will you notify the right agencies at the right time?



## Exercise 15:

**Create a flow diagram** that outlines the entire process for MDT collaboration for a case of suspected THB/CSA/CSE. Begin with a new case being reported to authorities. Indicate the points of entry into the system, and how MDT members interact with one another during the initial contact, the immediate needs assessment and early service provision, the criminal investigation and prosecution. End with the point at which the case is closed.

# Exercise 16:

**If you plan to hold MDT meetings, consider the following questions:**

- How frequently will you meet?
- Where will the meetings be held?
- What will be the structure and the goals of the meetings?
- Who will organize and facilitate the meetings?

# Exercise 17:

Working with children who have experienced THB/CSA/CSE is highly stressful so conflict among MDT members is inevitable. While many conflicts may be resolved informally, or with involvement of MDT agency supervisors, some may be relatively complicated and may require involvement by leadership of the MDT. It is important to have a formal conflict resolution process in place that is familiar to all team members and rigorously followed. This process should describe the activities, roles, and responsibilities of relevant members as they review, discuss, resolve, and document conflicts.

**Describe how you envision a formal conflict resolution process for your MDT.**

# Exercise 18:

Training of MDT members is critical for successful team collaboration and good outcomes. Consider the following questions:

- Who needs training?
- What topics should be covered in your training? (for example, THB, the MDT protocol, strategies for improving teamwork, the trauma-informed and rights-based approach)
- How will you provide the training (e.g., online, in-person)
- How often will you require training of MDT members? (it is important to have continuing education, so the quality of work continuously improves)
- Who will provide the training? Are there local NGO's that can do this?

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# Exercise 19:

A protocol is only useful if MDT members know about it, have been trained on it, and have easy access to it during their work. It is critical to determine whether the protocol is effective and is leading to improved case outcomes. This requires monitoring and periodic evaluation, which may direct necessary adjustments to the protocol. Consider the following questions:

- How will you disseminate your protocol to MDT members and their leaders?
- How will you monitor compliance with the procedures outlined in the protocol, and measure impact? (For example, surveys of children/families? Surveys of MDT members? Review of case records?)
- Who will oversee the essential processes of monitoring and evaluation and who will review the results and institute appropriate measures to address gaps in MDT functioning?

## Exercise 20:

Review the section on “Successful MDT Collaboration” in the introduction of the Framework. Which of the items listed do you think are important to the success of your MDT? Make a list, and include this in your protocol.

# Exercise 21:

Now that you have completed the online module, what are 3 ways you can improve multidisciplinary collaboration NOW, in your current situation?

What are 3 steps you can take to build the foundation for improved information-sharing and collaboration in the future?

# Congratulations!

You have completed this workbook and the ideas you have created will be extremely useful as you build your MDT protocol. Much of the work you have done here can be incorporated into the Framework template as you design your written protocol. Good luck!

