2026

Shadow Report to the UN Committee on the Rights of the Child

Denmark – Systemic Failures to Protect Children in Family Law Cases Involving Violence and Sexual Abuse.

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1. Introduction. When protection fails despite warning signs.

This report examines a recurring pattern within Danish family law in cases involving

- **Domestic violence**
- **Coercive control**
- **Sexual abuse**

Across documented cases, children are not left unprotected because warning signs are absent, but because those signs are not acted upon. Disclosures, behavioral changes, medical symptoms, and professional concerns are frequently present. However, they are not treated as decisive in legal assessments. Instead, situations involving violence are repeatedly reframed as matters of parental conflict. Within this interpretative framework, the focus shifts away from protection and towards cooperation. As a consequence, children remain in contact arrangements despite unresolved safety concerns, while protective actions taken by caregivers are often reinterpreted as obstruction.

This report argues that the issue is **structural** rather than incidental.

The findings in this report are based on documented individual cases and case-based experience. Anonymized documentation can be made available upon request.

This report should be read in light of Denmark's obligations under the Convention on the Rights of the Child (CRC), in particular:

- Articles 2 (Non-discrimination)
- Articles 3 (Best interests of the Child)
- Articles 9 (Family relations)
- Articles 12 (Right to be heard)
- Articles 19 (Protection from violence)
- Articles 34 (Protection from sexual abuse)
- Articles 39 (Rehabilitation)

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2. Structural Concern: Contact Over Safety.

Danish family law operates within a strong normative framework that emphasizes ongoing contact between the child and both parents. While this principle is intended to support the child's right to family life, it functions in practice as a presumption that is difficult to rebut. This presumption shapes decision-making.

Indicators that would ordinarily trigger protective concern are assessed through the lens of:

- Contact is treated as **a parental right**
- Restrictions require a high evidentiary threshold
- Allegations of violence and/or sexual abuse are reframed as **cooperation problems**
- Allegations of violence and/or sexual abuse are reframed as **parental alienation**

rather than risk.

Children who:

- Express fear
- Strongly opposes
- Exhibit a sudden and significant negative change in well-being and behavior
- Disclose violence or sexual abuse

are still required to:

- Participate in contact
- Maintain or increase interaction with the alleged perpetrator
- Move to the alleged perpetrator

As a result, the system tends to priorities continuity of contact over precaution. Protection becomes contingent on a level of proof that is rarely attainable in cases of violence, particularly where the child is young or where the abuse occurs in private settings. This creates a structural imbalance in which safety considerations are systematically subordinated.

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3. Institutional Fragmentation and Lack of Coordinated Risk Assessment

Responsibility for assessing and responding to child protection concerns is distributed across:

- Municipal authorities
- Family law institutions
- Courts
- Police

Each holds partial information, but no single authority is tasked with integrating these perspectives into a unified risk assessment.

In practice, this results in a fragmented system where:

- Information is dispersed across institutions
- Risk is underestimated
- Authorities rely on each other`s assessments
- Lack of coordinated protection
- Children fall between systems

This structural fragmentation allows risk to be underestimated without clear accountability

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4. Children`s Reactions Are Misunderstood.

Children’s responses to unsafe or distressing environments are not consistently recognized as indicators of harm.

Expressions of fear, resistance to contact, emotional withdrawal, or sudden behavioral changes are often attributed to **external influence, parental influence and conflict dynamics** rather than internal experience.

This interpretative approach risks misclassifying trauma responses as relational dynamics. The child's behavior is filtered through assumptions about parental influence, rather than understood considering potential exposure to violence.

The consequence is a systematic reduction in the evidentiary value assigned to the child's own reactions.

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5. Evidentiary Barriers and the "Evidentiary Paradox"

Across multiple cases, clear indicators of harm are present, including fear and resistance, trauma-related symptoms, visible physical injuries, and marked behavioural changes.

Despite this, such indicators are frequently not considered legally sufficient evidence. Violence is often disregarded in the absence of a criminal conviction, resulting in a disconnect between observed harm and legal recognition.

In practice, significant barriers hinder both the collection and the assessment of relevant evidence. This is reflected in circumstances where:

- Witness statements are not systematically obtained or are given limited evidentiary weight
- The parent accused of violence may obstruct or delay the gathering of relevant information
- Access to professional records (e.g. healthcare providers) is restricted or not actively pursued
- Audio and video documentation is dismissed as evidence
- Young children, particularly those under the age of six, are generally not heard despite individual capacity
- Observations and statements from older half-siblings are inconsistently included

As a consequence:

- Relevant sources of information are excluded
- Patterns of violence remain insufficiently documented
- Children's lived experiences are not fully represented

Furthermore, documentation such as restraining orders and police involvement is often afforded limited weight. Stays at shelters are used against mothers, on unsubstantiated grounds, thereby undermining their credibility in proceedings concerning the child.

This leads to an evidentiary paradox:
Harm is observable, yet it is not translated into legally recognised evidence.

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6. Insufficient Safeguards and Lack of Immediate Protection for Children

In cases involving allegations of domestic violence, sexual abuse, or coercive control, children are often informed that their statements will be fully disclosed to one or both parents. Consequently, some children may withhold information or retract disclosures due to fear of repercussions.

There are no consistent safeguards in place to ensure:

- Safe conditions for children to disclose sensitive information
- Immediate protective measures following interviews or hearings

Children are expected to undergo evaluation without being provided with safety. In practice, this results in children being returned directly to environments they have identified as unsafe and being required to continue existing contact arrangements without any renewed risk assessment. Children are still compelled to have physical contact with the parent who is under accusation, and this parent can influence or intimidate the child prior to interviews.

A central issue lies in the mismatch between the nature of harm experienced by children and the evidentiary standards applied in family law proceedings. Harm is often cumulative and expressed through patterns over time, including behavioral changes, physical symptoms, and repeated expressions of fear. However, such indicators are rarely recognized as legally sufficient evidence unless supported by a criminal conviction.

Procedural limitations further reinforce this gap. Children are typically interviewed only once or a limited number of times, often under conditions that do not support safe and reliable disclosure. Early statements may be disregarded, and available documentation is not always fully incorporated into the overall assessment.

This fails to reflect trauma-informed knowledge that:

- Disclosures are often delayed
- Memory may be fragmented
- Children may require time and safe conditions to disclose

In some cases:

- The parent accused of violence or abuse may oppose or delay assessments
- Access to relevant information (e.g. from healthcare professionals) is restricted or not obtained

This creates a systemic failure to ensure child protection in high-risk cases.

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7. Misuse of Parental Alienation

In Danish family law proceedings, concepts such as “parental alienation” are frequently applied in cases involving allegations of domestic violence, sexual abuse, or coercive control.

In practice, this leads to a shift in focus:

- From investigation of potential violence
- To scrutiny of the protective parent’s behaviour

As a result:

- Allegations of violence remain insufficiently investigated.
- Children’s expressions of fear or distress are reinterpreted as signs of manipulation.
- Protective actions by a parent are reframed as “contact obstruction” and “**parental alienation”.**
- Premature conclusions of “parental alienation” without full investigation of violence.
- Reliance on assumptions rather than evidence.
- Failure to consider the evidentiary barriers inherent in cases of domestic violence.
- Children’s disclosures of violence or fear are dismissed or discredited.
- Children compelled to maintain contact with a parent they fear.
- Children experience confusion, anxiety, and trauma-related symptoms.
- Contact arrangements function as a mechanism for continued abuse.
- Children lose trust in authorities and support systems.

In more cases now:

- Children are placed in the care of a parent they have identified as unsafe.
- Contact with the protective parent is restricted or terminated.
- The protective parent loses custody.

This creates a serious risk that child protection obligations are undermined.

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8. Sanctioning of Protective Parents and transfer of residence and loss of custody.

Protective actions from parents to protect children from violence and/or sexual abuse, are often reclassified as:

- Contact obstruction.
- **Parental alienation.**

Consequences include:

- Coercive enforcement
- Transfer of residence
- Loss of custody for the protective parent
- Daily penalties
- Imprisonment
- Loss of contact

This creates a deterrent effect, forcing compliance despite safety concerns. Parents feel compelled to comply with contact despite fear for the child´s safety. These decisions are made without full investigation of violence and without parental capacity assessments.

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9. Children with Vulnerabilities

Authorities:

- Enforce transitions between parents without preparation or support
- Involve police in the transfer of children
- Place children in unsafe, distressing or unfamiliar environments

These practices can cause severe psychological harm and result in unequal protection of children. Children with disabilities or vulnerabilities, including autism, trauma-related conditions, or developmental disorders, are at heightened risk within the current system.

A further concern arises in relation to access to assessment and diagnosis. In a number of cases:

- A parent accused of violence or abuse can oppose or delay psychological or developmental assessments of the child
- Municipal authorities may fail to initiate or support necessary assessments, despite clear indicators of need
- Protective parents who seek assessment or clarification of the child's condition risk being sanctioned or characterised as conflict-driven

This is particularly problematic in situations where an assessment could help clarify whether a child's reactions are linked to trauma, neurodevelopmental conditions, exposure to violence and abuse or a combination.

Instead, responsibility for the child's distress is at times attributed to the protective parent, with assumptions that the child's symptoms are a result of the parent's emotional state or alleged projection, rather than being properly investigated.

As a consequence:

- Children may be denied necessary diagnosis and support
- Indicators of trauma or abuse remain unexamined
- Opportunities to substantiate or refute concerns about violence are missed

This contributes to a system where vulnerable children are not adequately understood, protected, or supported.

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10. Lack of Access to Effective Remedies

Children and protective parents face:

- Limited access to legal aid and qualified legal representation
- Restricted or delayed access to psychological support and trauma-informed services
- Financial, procedural, and structural barriers to representation
- Lack of accessible, independent, and effective complaint mechanisms

In practice, this means that violations are rarely investigated or remedied in a timely and adequate manner. Decisions with serious consequences for children often cannot be effectively challenged, and available complaint systems lack independence, transparency, and enforceability.

Furthermore:

- There is no systematic follow-up to assess harm caused by decisions or procedures

- Authorities are rarely held accountable for errors or rights violations
- Complaints processes are often prolonged, complex, and without suspensive effect
- Children's perspectives are not adequately included in remedial processes

As a result:

- Children do not receive appropriate rehabilitation or trauma support
- Harm is neither formally acknowledged nor documented
- No compensation or restorative measures are provided
- Violations risk being repeated without consequence

This undermines both the child's right to protection and the fundamental right to an effective remedy.

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11. Insufficient consideration of siblings and family context

Decisions in Danish family law cases tend to focus narrowly on the individual child's contact with each parent, without adequately taking into account the child's broader relational and family context.

This includes insufficient consideration of:

- Sibling relationships
- The overall family environment and dynamics

As a consequence:

- Children may lose meaningful and ongoing contact with their siblings
- Children experience distress linked to instability, separation, and disrupted attachments
- Children may feel compelled to engage in contact with a parent they associate with fear or harm

This creates an inherent and unacceptable trade-off between:

- Maintaining contact with a parent linked to distress or risk
- Preserving essential sibling relationships

Sibling relationships are not consistently recognised as independent and fundamental to the child's well-being and development.

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12. Methodological Flaws and Bias in Child Expert Assessments

Child expert assessments are frequently based on limited and methodologically insufficient foundations. They often rely on a narrow set of interviews, exclude critical documentation, and fail to adequately assess violence, coercive control, and patterns of abuse.

Assessments are typically conducted under artificial and controlled conditions, where the dynamics observed do not reflect the child's actual lived experience. In such settings, a parent accused of violence or abuse is unlikely to display harmful behavior during supervised interactions.

Recurring patterns in these assessments include:

- Minimization or exclusion of violence and/or sexual abuse
- Attribution of the child's distress to the protective parent
- A presumption that continued contact with the other parent is inherently beneficial

Supervised contact is frequently applied not as a protective measure, but as a step toward expanding contact. The absence of observable abuse during supervision is often interpreted as evidence of no risk, despite well-established knowledge that trauma responses and harmful dynamics frequently manifest outside of observed settings. In addition, there is often a lack of specialized knowledge and expertise in domestic violence, trauma, and coercive control among professionals conducting these assessments.

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13. Systemic Inconsistencies and Lack of Interagency Coordination

The Danish system for handling family law cases involving violence is marked by a lack of coordination and inconsistent approaches across key authorities, including the Family Court, the Danish Family Law Agency, and the police.

Parents are often instructed in family law proceedings to disregard past violence or abuse and instead "focus on the future". Violence against a parent is treated as separate from parental capacity, allowing a parent who has committed violence to still be assessed as a suitable caregiver

This approach is deeply problematic, as research consistently demonstrates that:

- Exposure to domestic violence is harmful to children
- Witnessing violence can have psychological effects comparable to direct victimization

As a result, the significance of violence is systematically minimized and risk assessments fail to reflect the child's lived reality. Protective parents who act in accordance with police guidance (e.g. limiting contact due to safety concerns) may be characterized as uncooperative or conflict-driven and subjected to sanctions, including coercive measures or loss of custody. Even ongoing police investigations into violence or abuse are not consistently taken into account, with family law decisions being made while criminal proceedings remain unresolved. Meaning a precautionary approach is not applied

This leads to:

- Contradictory expectations placed on protective parents
- Fragmentation of responsibility between authorities
- Decisions based on incomplete or unresolved evidentiary foundations
- A weakening of child protection obligations

- Inadequate risk assessment, resulting in children being exposed to harm despite active and ongoing concerns

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14. Barriers to Police Access and Child Interviews

In cases involving reports or notifications of violence or abuse, the police do not consistently have direct and timely access to interview the child. Initial contact is often carried out by municipal caseworkers, which raises significant concerns:

- Municipal caseworkers typically lack specialised training in forensic interviewing and trauma-informed questioning
- Early interactions may not meet appropriate evidentiary standards

As a consequence:

- Children may be asked leading or inappropriate questions
- Children may become confused, distressed, or reluctant to disclose further information
- Subsequent police interviews may be compromised or not conducted at all, with cases instead remaining within the municipal system without a formal police interview of the child

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15. Shelters, credibility, and gaps in child protection

Access to shelter protection is not ensured for children as independent rights holder. Children do not have an independent right to access shelter services but access is contingent on a parent being admitted, after which the child may be included. This creates a structural gap in protection for children exposed to violence.

At the same time, public and political discourse in recent years has increasingly suggested that shelters are misused—primarily by mothers—to gain advantage in custody disputes. Such claims are not supported by evidence however, this narrative has gained influence in practice

As a result:

- the credibility of protective parents is undermined
- disclosures of violence risk being reframed as conflict
- cases are redirected towards allegations of “parental alienation”

Despite shelters possessing specialized expertise in domestic violence, their assessments are not consistently given decisive weight. They are not systematically included in multidisciplinary collaboration with authorities such as municipalities or police. This leads to underutilization of relevant expertise and decisions being made without full consideration of risk

In addition there are no clear or consistent standards regarding who is qualified to conduct safety assessments within shelters. This creates a risk that safety assessments may be carried out without sufficient professional expertise and children may not receive adequate protection.
These factors collectively contribute to a gap in protection, where children exposed to violence are not adequately safeguarded, and where relevant expertise is insufficiently integrated into decision-making processes.

16. Case Examples

Case 1 – Coercive enforcement of contact despite absence of relationship and indicators of harm

Background:
Child aged 3.5 lived with the mother since birth. The father initially refused to acknowledge the child and had no contact during the first 3 years. The child was raised with the mother's partner, whom the child considers and refers to as his father. The child showed stable development and well-being, with no prior concerns. The mother resided in a shelter and had a documented history of exposure to violence and dead threats from the child´s father.

Introduction of supervised contact and immediate distress:
- The child showed clear fear and resistance following disclosures from an older sibling about violence by the same father
- The child cried, screamed, and refused to enter contact sessions
- The child was repeatedly pressured to participate despite refusal
- The mother was threatened with consequences through the child if contact was not enforced
- The child displayed acute distress, including urinating during contact

Despite these reactions, contact was not reduced or suspended. Instead, it was expanded to unsupervised weekly overnight arrangements after only 5 sessions.

Escalation and coercive enforcement following the expansion of contact:
- The child developed regressive and self-harming behavior
- The child expressed fear and anxiety related to contact
- The child refused handovers on multiple occasions

This resulted in:
- Repeated enforcement proceedings and forced' transfers with police involvement where during one enforcement the father, who is a police officer, presented his badge. The child subsequently developed fear of the police

Indicators of harm and lack of response:
The child returned from contact with physical marks and reported being subjected to violence.
- Injuries were documented in emergency care
- Reports were made by healthcare professionals and the mother

Despite this:
- Contact orders remained in place
- No effective investigation or protective measures were implemented
- The child was not interviewed by police

Sanctioning of the protective parent:
The mother, who had a documented history of exposure to violence and dead threats, resided in a shelter, attempted to protect the child.
- She was subjected to enforcement measures, fines, and arrest warrants
- She was characterised as uncooperative and accused of "parental alienation"
- She lost both residence and parental authority

Current situation:
- The child continues to report violence following contact professionals, including shelters and healthcare providers, have raised concerns.
- The father has withheld the child and restricted contact with the mother
- The mother has been pressured to leave the shelter as a condition for contact

Conclusion:
This case demonstrates a **systemic failure** in which:
- Contact is enforced despite absence of relationship and clear indicators of harm
- Protective actions are penalized
- Allegations of violence are not effectively investigated.
- Resulting in a child being left without protection.

Case 2 – Failure to protect despite documented violence, sexual abuse concerns, and systemic exclusion of risk factors

Background:
Child aged 7, resided primarily with the mother, who had been the primary caregiver during the child's first five years of life. Contact with the father had previously been suspended for one year, during which the child showed signs of improved well-being. When contact with the father was reintroduced:

- The child's condition deteriorated immediately.
- The child exhibited signs of distress and regressive behavior.

Known risk factors and prior incidents:

- Sexual abuse had previously been identified within the father's household, involving a half-sibling.
- Concerns regarding the child's vulnerability had been present since early childhood.
- Professionals and the mother had raised concerns about developmental conditions, including possible autism since birth.

Disclosure and response:
Age 5 the child disclosed being subjected to sexual abuse in the father's home. In response:

- The mother withheld the child to ensure protection.
- The child was placed in play therapy to assess and address the reported abuse.

Contradictory legal response:

- The mother was ordered to transfer the child for contact with the father on a bi-weekly basis.
- Contact continued in the same environment where the alleged abuse occurred.
- Despite recommendations from relevant professionals, necessary diagnostic assessments were not conducted.
- Potential neurodevelopmental conditions were not investigated and access to possible medical treatment was not facilitated.
- The father opposed further assessment, and the municipality refused to support the collection of relevant health-related information.

Sanctioning of the protective parent:

- The mother's efforts to maintain cooperation with healthcare professionals and ensure appropriate assessment and protection were interpreted as non-cooperation.
- Authorities branded the mother as uncooperative and reported to the court that she failed to follow instructions.
- At the same time the father and authorities attributed the child's difficulties to the mother despite available documentation indicating otherwise.

Outcome:

- The mother lost both residence and parental custody
- The child was removed from the therapeutic process intended to assess abuse
- No full investigation of the allegations was completed
- The child was not assessed for suspected developmental conditions
- Following the transfer the child's condition deteriorated further
- The child continued to express concerns about violence and professionals responded to these concerns however contact with the mother was again restricted and undocumented allegations of "parental alienation" were raised.
- The child remains without effective protection, despite repeated disclosures, documented vulnerability and ongoing concerns raised by professionals.

Legal implications:
This case raises serious concerns regarding non-compliance with:

- **Article 3 CRC** – decisions were made without a fully informed assessment of the child's best interests
- **Article 19 CRC** – failure to protect the child despite credible indicators of violence and abuse
- **Article 12 CRC** – the child's disclosures were not given due weight
- **Article 2 CRC** – unequal protection despite significant and repeated risk indicators
- **Article 34 CRC** – Inadequate protection from sexual abuse

Case 3 – Failure to protect despite documented violence, child distress and multidisciplinary concern

Background:
A child (born 2019) has resided with the mother since birth as the primary caregiver. In 2022, the mother fled with the child to a shelter following prolonged exposure to physical, psychological, economic, and digital violence, as well as coercive control and isolation by the father. At the time of admission, the child presented with significant distress and developmental concerns, including severe language delay. During a four-month stay at the shelter, the child showed marked improvement and signs of recovery.

Course of events and child reactions:
Following the closure of a police investigation, supervised contact was established. From the outset:
- The child demonstrated clear resistance and distress.
- The child exhibited physical and psychological reactions, including stomach pain, emotional outbursts, withdrawal, and sleep disturbances.

In 2023, renewed concerns regarding violence against the child led to a multidisciplinary response involving municipal authorities, police, healthcare professionals, and the Children's Centre. Despite this:
- Supervised contact was reintroduced.
- The child repeatedly refused participation.
- Contact was briefly suspended but subsequently enforced despite continued distress.

Professionals assessed that the child had been exposed to violence and required increased protection.

System response:
- multidisciplinary concerns were not given decisive weight
- the child's persistent distress and resistance were not recognised as indicators of risk
- the focus shifted from safety concerns to scrutiny of the mother

The mother's protective actions were characterised as:
- contact obstruction
- "parental alienation"

A court-ordered child expert assessment was conducted:

- without balanced or comparable observation settings
- without adequate consideration of violence or the child's distress

The absence of observed inappropriate behaviour during limited observation was interpreted as absence of risk.

Outcome despite:
- consistent concerns from multiple professionals
- prior supervised contact arrangements
- the child's persistent distress and resistance

residence was transferred to the father.

Following the decision:
- the child was removed directly from school without preparation
- the child was not given the opportunity to say goodbye to the mother

Current situation:
- The child presents increasing signs of distress
- The child is described as emotionally withdrawn and disengaged
- The child shows reduced emotional expression and functioning

Conclusion:
This case demonstrates a **systemic failure** in which:
- documented violence and multidisciplinary concerns do not result in protective measures
- the child's distress and resistance are disregarded
- protective actions are penalised and reframed as parental alienation

Resulting in decisions that do not adequately safeguard the child and leave the child in a situation of unresolved risk.

Case 4 – Failure to protect despite disclosure of sexual abuse, documented indicators of harm, and systemic exclusion of evidence

Background
Child aged 4–5, resided primarily with the mother, who had been the primary caregiver. Concerns were raised by the mother and professionals. Prior to formal disclosure, the child showed documented signs of distress in kindergarten, including:

- behavioral changes
- Sexualized behavior
- Repeated urinary tract infections

Disclosure and initial response
At age 4, the child disclosed sexual abuse by the father.
The disclosure occurred prior to involvement from authorities and was documented by the mother (including transcription and audio material). In response:

- The mother sought protection
- The child was later interviewed at the Children's House

System response and evidentiary limitations
Despite multiple indicators of harm:

- The initial disclosure was not included or given weight in the Children's House assessment
- The child was interviewed only two times, which is insufficient in cases involving trauma
- The interviews took place after contact with the father had been reintroduced, allowing potential influence
- The child showed partial disclosure but overall withdrawal and avoidance, consistent with trauma responses

The Children's House recommended psychological support, which has not been granted, including more than two years later.
The police investigation was discontinued due to lack of evidence.

Contradictory legal response
Despite:

- Direct disclosure of sexual abuse
- Documented behavioural and physical indicators (including sexualised behaviour and recurrent infections)
- Professional concern
- Recommendation for further psychological assessment

The court:

- Maintained and enforced contact
- Did not await the Children's House report before decision-making
- Did not apply precautionary measures

Impact on the child
The child continues to:

- Show signs of distress and ongoing vulnerability
- Resist and protest contact with the father
- Remain without access to recommended psychological support

The child is required to maintain contact despite unresolved allegations and ongoing indicators of harm.

Systemic patterns reflected in the case

- Failure to recognize cumulative indicators of harm as evidence
- Over-reliance on criminal standard of proof in child protection cases
- Insufficient and non-trauma-informed interviewing practices
- Failure to ensure safe conditions for disclosure
- Failure to provide recommended treatment and follow-up
- Continuation of contact despite unresolved risk

Legal implications
This case raises concerns regarding non-compliance with:

- Article 3 CRC – Best interests not based on full risk assessment.
- Article 12 CRC – Child's voice not adequately captured
- Article 19 CRC – Failure to protect despite multiple indicators of harm
- Article 34 CRC – Inadequate protection from sexual abuse
- Article 39 CRC – Lack of recovery and rehabilitation support

17. Legal Assessment

The practices described raise significant concerns in relation to Denmark's obligations under international law. The Convention on the Rights of the Child requires that the best interests of the child are a primary consideration, that children are protected from violence, and that they have access to recovery and rehabilitation.

The Istanbul Convention further requires that violence is considered in decisions concerning custody and contact, that protective measures are applied without delay, and that responses are grounded in an understanding of the dynamics of violence.

The patterns described in this report indicate a gap between these obligations and their implementation in practice.

- **Article 2 CRC** – Unequal protection
- **Article 3 CRC** – Best interests not a primary consideration
- **Article 12 CRC** – Lack of meaningful participation
- **Article 19 CRC** – Failure to protect from violence
- **Article 34 CRC** – Inadequate protection from sexual abuse
- **Article 39 CRC** – Lack of rehabilitation

Additionally:

- Potential violations of **ECHR Articles 3 and 8**

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18. Recommendations

The cases underlying this report illustrate recurring dynamics rather than exceptional circumstances.

Across cases, similar patterns emerge. Indicators of harm accumulate without leading to decisive intervention. Violence is reframed as conflict. Protective actions are reinterpreted as obstruction. Children's disclosures are treated with caution rather than as signals requiring immediate response. Most notably, contact arrangements are maintained even where risk has not been resolved. These patterns suggest systemic deficiencies rather than isolated failures.

Therefore, the Committee is respectfully requested to recommend that Denmark:

1. Ensure immediate protective measures following any disclosure of harm or risk
2. Prohibit contact arrangements in cases where risks of violence and/or sexual abuse remain unresolved
3. Establish procedures that guarantee safe and child-sensitive conditions for hearings
4. Recognize violence as a primary and decisive legal factor in family law proceedings
5. Ensure the implementation of mandatory and coordinated risk assessments across all relevant authorities
6. Require comprehensive parental capacity assessments in high-risk cases

7. Require the mandatory collection of information from all relevant professionals with direct knowledge of the child and family, including healthcare providers
8. Ensure that courts, family law authorities, and other professionals do not apply or rely on concepts such as “parental alienation” in cases involving allegations of violence, sexual abuse, or coercive control, unless such allegations have been fully and properly investigated
9. Reform the methodologies applied in expert assessments to ensure objectivity and reliability
10. Guarantee effective access to justice and the availability of adequate remedies
11. Provide appropriate rehabilitation, support, and follow-up for affected children
12. Strengthen accountability mechanisms and oversight of relevant authorities

Kind regards

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