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Women Against Violence Europe

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CHAPTER 01

1. INTRODUCTION

"Violence against women is perhaps the most shameful human rights violation. It knows no boundaries of geography, culture or wealth. As long as it continues, we cannot claim to be making real progress towards equality, development, and peace."

Kofi Annan, United Nations Secretary-General¹

Domestic violence is still a serious problem in the European Union countries, affecting hundreds of thousands of people, the majority of them women and children, every day.

Since the 1970s, help services for women and children victims of domestic violence have been developed and expanded in the Western European countries, thanks to the efforts of the women's movement against domestic violence and committed State authorities. In the 1990s, in the post-communist era, services for women and children victims of violence also emerged in Eastern European countries and what were to become the new member States of the European Union. Several countries introduced new laws to protect victims and prevent further violence. However, in none of the countries are the services available to victims sufficiently comprehensive and extensive. The situation is especially precarious in the new EU member States, where women's shelters are non-existent or too few (see CEDAW complaint against the State of Hungary)². Services are also lacking in other countries of the EU, with the consequence that women are often unable to leave a violent husband because there is no alternative available to them. Effective laws are still not in place in every country, or they are poorly implemented and fail to reach the goal of effectively protecting victims.

The situation is often especially dramatic for immigrant women whose residence status is linked to their violent husband under national law. Therefore, all EU member States should grant immigrant women residence and employment rights independently of their husbands so as to give them a real chance of a new life without violence.

In many European countries, we see an impressive commitment by women's initiatives to fighting violence against women. Also in the new member States of the EU, dedicated women have founded NGOs and are working on the elimination of violence against women. Deplorably, in many Eastern European countries and new EU member States, in particular, the financial support by governments for services provided by women's NGOs is inadequate.

A lot has been done towards eliminating violence against women and children, but there is still a lot to do before we can claim to "be making real progress towards equality, development, and peace", as Kofi Annan put it.

¹ <http://www.un.org/womenwatch/daw/followup/session/presskit/fs4.htm> (June 23, 2006)

² <http://www.un.org/womenwatch/daw/cedaw/committee.htm> (June 23, 2006)

About this Manual

The contents of this Manual evolved during the DAPHNE project BRIDGING GAPS, implemented by WAVE from April 2005 to March 2006. It is based on the contributions of project partners from 11 European countries and draws upon the work and experiences of many committed experts and academics in the field, such as the European Commission research project “Coordinated Action on Human Rights Violations” (CAHRV). Given the short timeframe of the project and the limited space available, it has not been possible to include all the work and projects in multi-agency cooperation that have been developed over the past decade. However, the editor hopes the exchange of ideas and experiences will continue in Europe in order to reach the common aim of eliminating all forms of violence.

As the title of this Manual indicates, good intentions are not enough to effectively tackle domestic violence against women and children; good practice and effective cooperation among all the agencies involved are also needed. Domestic violence is a serious problem; it harms victims in many different ways and also negatively affects communities and society as a whole. It is a dangerous problem. Women and children are regularly killed or severely injured, especially when the victims try to leave the violent partner. Therefore, it is one of the main goals of this Manual to focus on the protection and safety of victims. All agencies involved in the issue, especially the police and the justice system, have a responsibility to protect the victims, to prevent further violence and to provide the best and most effective services and interventions.

Coordinated interventions are needed to achieve the goal of preventing violence; no agency can succeed in isolation. Effective teamwork is needed rather than single players. This Manual aims at contributing to the development and improvement of effective multi-agency cooperation by providing background information as well as concrete guidance and recommendations.

Chapter 2 contains theoretical information about the prevalence, costs and definitions of violence and provides information about international documents and legal and social interventions that have been developed in European countries. Chapter 3 provides detailed background information about key issues in tackling violence against women and children which serves as an important basis for providing services and interventions: If we do not grasp the problem, we cannot successfully address it. Chapter 4 tries to sensitise readers to the needs of survivors of violence and the principles of help designed to avoid unhelpful or even hostile interventions.

Chapter 5 gives an overview of the services and interventions for victims that are needed as a prerequisite for multi-agency cooperation. If basic services for victims are not available, multi-agency cooperation easily becomes inefficient or meaningless. For example, if a doctor in a health service is sensitised to the problem and realises that a victim is in acute danger, but cannot refer the victim to a safe shelter, preventive work is impossible. Chapter 6 contains basic standards for all agencies. Good cooperation is based on good practice in all the agencies involved. If good practice is missing in our own agency, it is likely that this will show up in multi-agency work and will present an obstacle to good cooperation. For example, if we do not have clear guidelines for our staff on how to deal with domestic violence against women and children, our agency's response will be inconsistent. Our partners in cooperation will sense that and will become insecure about what they can expect from us. Chapter 7 tries to provide some basic guidelines for specific agencies. Chapter 8 deals with a core issue in violence prevention, namely, danger assessment and safety planning. Safety planning is addressed in other parts of the Manual as well. This redundancy is justified by the fact that many victims of domestic violence run a high risk of being exposed to violence again and that agencies can only be successful in preventing violence if they pay the greatest attention to the safety of victims. Chapter 9 gives a little theoretical background regarding multi-agency cooperation. Chapter 10 gives recommendations as to which actors could be involved in multi-agency cooperation, and Chapter 11 focuses on the participation of a very important group of actors, often neglected by agencies: the survivors themselves.

Chapters 12 and 13 provide practical information on how to initiate and organise multi-agency cooperation. Chapters 14 and 15 present concrete models of cooperation. Multi-agency cooperation is not an easy task; if experts with very different backgrounds, approaches and cultures try to work together, conflicts and problems can hardly be avoided. Therefore, it is essential that we learn how to deal with them in a productive way, and even learn how to have fun working together!

In order to check whether we have been successful in reaching our goals and achieving change, regular evaluation is necessary; the last chapter provides some information on that.

The guidelines and recommendations presented in this Manual are based on research and empirical findings as well as on practice, and the authors try to provide sound and evidence-based background to multi-agency cooperation. Recommendations are often presented in the form of checklists in order to make the Manual user-friendly and to make it possible to compare one's own services and standards with the standards presented in the Manual. Multi-agency cooperation in the field of domestic violence is still very much "a work in progress" and relatively new. Therefore, of course, nobody can claim to have found the "magic bullet". WAVE, as the editor of this Manual, as well as the authors will be grateful for critical feedback and additional recommendations.

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CHAPTER 02

2. THEORETICAL BACKGROUND

2.1. PREVALENCE OF VIOLENCE AGAINST WOMEN AND CHILDREN

According to the Multi-country Study on Women's Health and Domestic Violence against Women by the World Health Organization (2005), home is not a safe haven for many women in the world. Women are more at risk of experiencing violence in intimate relationships than anywhere else. The children of women experiencing violence are always affected, directly or indirectly. In many cases, children are also abused by their father and in every case of violence against their mother, children are victimized by witnessing the violence, by hearing their mother crying, by seeing her injuries, by watching their father beating their mother or threatening to kill her. Thus, violent husbands or partners are also violent fathers; children living with a violent father are not safe and often violence against children continues after the separation (Hester/Radford 1998; Eriksson et al 2005). Women and their children are the biggest groups of victims in domestic violence cases. According to Viennese police statistics, about 95% of the victims in domestic violence interventions are women and children; approximately 95% of the perpetrators are male family members, most often husbands or common-law partners (Wiener Interventionsstelle gegen Gewalt in der Familie 2004).

For a long time, the extent of this violence could only be estimated, as the cases of violence that become known to the public are only the tip of the iceberg. In the past decade, the extent of violence against women has been revealed by large-scale studies carried out in several European countries. In the first representative study conducted in Germany, with more than 10,000 women respondents, it was found that approximately one out of four women (i.e., 25%) had experienced physical or sexual violence from a partner (Federal Ministry for Family Affairs, Senior Citizens, Women and Youth BMFSFJ 2004). According to an investigation in the framework of the British Crime Survey, 21% of all women become victims of physical violence or threats by a partner at least once in their lives (Walby/Allen 2004). In a prevalence study conducted in Finland (Heiskanen/Piispa 1998), 20% of all women living in a relationship responded that they had experienced violence by a partner.

A methodology for carrying out inter-country and comparative research on domestic violence and violence in intimate relationships is currently being developed by the research project CAHRV (Co-ordination Action on Human Rights Violations) (CAHRV 2004-2007). The research team concludes in its report that, "notwithstanding the methodological differences between studies, there is consistency in the fact that physical, sexual and psychological violence by men against women is very high in all contexts and in all countries" (Martinez/Schröttle et al 2006).

There is still a lack of statistics and data collection in many countries, which makes it difficult to effectively evaluate and assess developments and changes. Data collection, together with qualitative research and analysis on violence against women and their children, can be a form of prevention and intervention. Experts stated in the report on the UN in-depth study on all forms of violence against women that such research and data collection “must be geared towards action: insights gained must form the basis for and serve as an important tool for policy development and implementation, as well as the provision of support and services to victims of violence.” (United Nations/Division for the Advancement of Women 2005). In the report, the experts provide a number of recommendations regarding effective data collection.

2.2. COSTS OF VIOLENCE

Apart from causing immense suffering, violence against women also results in costs for the victims and for society (Walby 2004; World Health Organization 2004). In the course of her study, Walby found that the costs of domestic violence in England and Wales are an estimated 23 billion British pounds annually.

2.3. DEFINITIONS

A clear and comprehensive definition of violence against women is a prerequisite for the development and implementation of effective interventions. One obstacle to developing measures to combat violence against women lies in the tendency to overlook the gendered nature of the problem and to apply generalizing terms like “violence in the family” or “domestic violence”. In order to be successful in violence prevention, it is important to address the causes of violence against women and to pay attention to the specific historical and social context. Definitions from the UN Declaration on the Elimination of Violence against Women (1993) and other UN documents should serve as a basis for preventive measures:

“The term ‘violence against women’ means any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life....

“Violence against women shall be understood to encompass, but not be limited to, the following:

- (a) Physical, sexual and psychological violence occurring in the family, including battering, sexual abuse of female children in the household, dowry-related violence, marital rape, female genital mutilation and other traditional practices harmful to women, non-spousal violence and violence related to exploitation;
- (b) Physical, sexual and psychological violence occurring within the general community, including rape, sexual abuse, sexual harassment and intimidation at work, in educational institutions and elsewhere, trafficking in women and forced prostitution;
- (c) Physical, sexual and psychological violence perpetrated or condoned by the State, wherever it occurs.”

Concerning the causes of violence against women, the UN Declaration states that:

“...violence against women is a manifestation of historically unequal power relations between men and women, which have led to domination over and discrimination against women by men and to the prevention of the full advancement of women...”

This definition clearly analyses the power imbalance between men and women as a root cause of violence against women. Children are especially vulnerable to violence because of their dependence on their parents.

2.4. INTERNATIONAL OBLIGATIONS TO PREVENT VIOLENCE AGAINST WOMEN AND CHILDREN

Violence against women and children in families is not a “private affair”, but a public and political problem. Acts of violence constitute human rights violations and States are bound under international as well as under national law to take action. They have the duty to exercise due diligence to prevent, prosecute and punish acts of violence against women, whether those acts are perpetrated by the State or by private persons (World Health Organization 2005). Some important international documents concerning violence against women and children are described below:

UNITED NATIONS

The UN Declaration on the Elimination of Violence against Women (1993) requires that,

“States should condemn violence against women and should not invoke any custom, tradition or religious consideration to avoid their obligations with respect to its elimination. States should pursue by all appropriate means and without delay a policy of eliminating violence against women and, to this end, should:

- (a) Consider, where they have not yet done so, ratifying or acceding to the Convention on the Elimination of All Forms of Discrimination against Women or withdrawing reservations to that Convention;
- (b) Refrain from engaging in violence against women;
- (c) Exercise due diligence to prevent, investigate and, in accordance with national legislation, punish acts of violence against women, whether those acts are perpetrated by the State or by private persons....” (United Nations 1993, article 4).

In its article 19, the legally binding United Nations Convention on the Rights of the Child (1989) establishes the obligation of the States parties to protect children from all forms of physical, mental or sexual abuse and other forms of violence and neglect.

The United Nations Convention on the Elimination of all Forms of Discrimination against Women (United Nations, CEDAW, 1979) and its recommendations commit the Member States to implementing effective measures to end all forms of violence and discrimination against women. The CEDAW Convention was substantially reinforced by its Optional Protocol (United Nations 1999), giving individual women as well as women's organizations the right to file complaints. In 2003, Ms. A.T., a Hungarian woman who had experienced violence by her husband for many years, filed a complaint to the CEDAW Committee, claiming the Hungarian Government had violated her rights by failing to protect her from further violence and to provide adequate help (United Nations 2005). In its decision, the CEDAW Committee came to the conclusion that the Hungarian Government had indeed violated the rights of Ms. A.T. and obliged the State to take immediate action to protect and support Ms. A.T. and her two children, as well as other women and their children in similar situations (United Nations 2005, CEDAW Decision).

In the Platform for Action, which is the programme to implement the results of the Fourth World Conference on Women, which took place in Beijing 1995, the theme of violence against women was included as one of twelve critical areas for concern. According to this document, “violence against women is an obstacle to the achievement of the objectives of equality, development and peace”, and the States adopted a catalogue of measures to eliminate all forms of violence against women. (United Nations 1996, The Beijing Declaration and the Platform for Action (BPFA). In the Ministerial Declaration of the Conference of Ministers of Gender Equality (Luxembourg, February 2005), the importance of implementing the Platform for Action was reiterated, and the necessity of preventing all forms of gender-based violence was stressed. Thus, the EU Member States renewed and reaffirmed their determination to implement the Beijing Platform for Action (BPFA) in its entire scope (Luxembourg, February 2005).

THE EUROPEAN CONVENTION ON HUMAN RIGHTS AND THE COUNCIL OF EUROPE

The European Convention on Human Rights (Council of Europe 1950) guarantees all people the right to life, health and freedom and prohibits torture or any other form of inhuman or degrading treatment. This key Convention thus obliges the signatory States to take action to combat violence against women and children and to protect them from violence. Ms. M.C. from Bulgaria brought her case before the European Court of Human Rights and complained that Bulgarian law and practice did not provide effective protection against rape and sexual abuse, as only cases where the victim resisted actively were prosecuted. In its decision, the Court determined that, under Articles 3 and 8 of the Convention, Member States had a positive obligation both to enact criminal legislation to effectively punish rape and to apply this legislation through effective investigation and prosecution, and that the Bulgarian State had failed to do so (European Court of Human Rights 2003).

The Council of Europe has issued a number of important recommendations relating to violence against women and domestic violence. In Council of Europe Recommendation Rec(2002)5 on the protection of women against violence, governments of Member States are advised to:

- “ I. Review their legislation and policies with a view to:
1. guaranteeing women the recognition, enjoyment, exercise and protection of their human rights and fundamental freedoms;
 2. taking necessary measures, where appropriate, to ensure that women are able to exercise freely and effectively their economic and social rights;
 3. ensuring that all measures are co-ordinated nation-wide and focused on the needs of the victims and that relevant State institutions as well as non-governmental organisations (NGOs) be associated with the elaboration and the implementation of the necessary measures, in particular those mentioned in this recommendation;
 4. encouraging at all levels the work of NGOs involved in combating violence against women and establishing active co-operation with these NGOs, including appropriate logistic and financial support;
- II. Recognise that States have an obligation to exercise due diligence to prevent, investigate and punish acts of violence, whether those acts are perpetrated by the State or private persons, and provide protection to victims;
- III. Recognise that male violence against women is a major structural and societal problem, based on the unequal power relations between women and men and therefore encourage the active participation of men in actions aiming at combating violence against women;
- IV. Encourage all relevant institutions dealing with violence against women (police, medical and social professions) to draw up medium- and long-term co-ordinated action plans, which provide activities for the prevention of violence and the protection of victims;
- V. Promote research, data collection and networking at national and international level;
- VI. Promote the establishment of higher education programmes and research centres, including at university level, dealing with equality issues, in particular with violence against women;
- VII. Improve interactions between the scientific community, the NGOs in the field, political decision-makers and legislative, health, educational, social and police bodies in order to design co-ordinated actions against violence;
- VIII. Adopt and implement the measures described in the appendix to this recommendation in the manner they consider the most appropriate in the light of national circumstances and preferences, and, for this purpose, consider establishing a national plan of action for combating violence against women;
- IX. Inform the Council of Europe on the follow-up given at national level to the provisions of this recommendation.” (Council of Europe 2002)

At the Third Summit of Heads of State and Government of Council of Europe Member States in Warsaw on 16 and 17 May 2005, the Council of Europe adopted an Action Plan including a Pan-European Campaign to Combat Violence against Women, including Domestic Violence, to be launched in 2006. A Task Force to Combat Violence against Women composed of eight international experts in the field of preventing and combating violence against women was set up in 2006. The Task Force will be in charge of evaluating progress at the national level and establishing instruments for quantifying developments at the pan-European level, with a view to drawing up proposals for action.

THE EUROPEAN UNION AND VIOLENCE AGAINST WOMEN

In the Treaty of Amsterdam, equality between women and men was established as a crosscutting goal of all EU policy. Recent developments point to a trend towards extending the EU mandate in the field of gender equality policy (Walby 2003). Measures against violence and sexual harassment in the workplace are already part of the EU mandate and are regulated in the relevant legal documents. Similarly, legal regulations to combat trafficking of women already exist. In the field of domestic violence, no legally binding measures have yet been adopted, but the activities of the EU to combat violence against women and children are expanding. Since the mid-1990s, the EU has introduced several initiatives such as the DAPHNE programme or the zero-tolerance campaign on violence against women in the EU. These initiatives show that the issue of violence against women and children is of growing importance in the European Union. Even if the initiatives to combat violence against women are currently only "soft law"³ and not legally binding, the developments in recent years indicate that the issue will be on the agenda also in the future. An important and legally binding instrument of the EU concerning women and children victims of violence is the Council framework decision on the standing of victims in criminal proceedings (2001), establishing minimum rights of victims (European Union 2001).

In February 2006, the European Parliament adopted a resolution on the current situation in combating violence against women and any future action.

The resolution: "Recommends, as regards men's violence against women, the Commission and the Member States:

- a) to regard it to be a violation of human rights, reflecting unequal gender power relations and to adopt an all-encompassing policy approach to combat it, including effective methods of prevention and punishment;
- b) to adopt a framework for cooperation between governmental and non-governmental organisations (NGOs), with a view to developing policies and practices to combat domestic violence;
- c) to formulate a zero-tolerance policy as regards all forms of violence against women;
- d) to adopt a framework for cooperation between governmental and non-governmental organisations (NGOs), with a view to developing policies and practices to combat domestic violence". (European Parliament 2006).

The resolution calls on the Member States to take appropriate measures to ensure better protection and support of victims and those who are at risk of becoming victims of violence against women by, among other measures:

- Recognising the importance of providing support to victims, whether women or children, to help them become financially and psychologically independent from the perpetrator;
- Adopting a proactive, preventive and penal strategy towards the perpetrators of violence against women in order to reduce recidivism, and providing advisory services for access by the perpetrators, either on their own initiative or under a court order; always carrying out adequate risk assessments in order to ensure the safety of women and any children in the process;
- Providing all necessary assistance, including transitional housing, to women and their children in cases of separation or divorce;
- Treating women who are victims of gender-based violence as a category entitled to priority access to community-housing projects;

³ i.e. Recommendations, promotion of best practice models and transfer of know-how within the framework of community programmes such as DAPHNE.

- Providing safe shelters including sufficient financial resources;
- Conducting specific employment action programmes for the victims of gender-based violence, so as to enable them to enter the labour market and achieve financial independence;
- Planning services and centres for the care and support of children of women who are victims of violence;
- Providing social and psychological support to children who have witnessed domestic violence;
- Providing proper protection for immigrants, especially single mothers and their children, who often have inadequate means of defence or knowledge of available resources to counter domestic violence in Member States (European Parliament 2006).

As demonstrated, international communities have worked intensively in the last decades to eliminate violence against women and children. While the legal base is clear and sufficient, there is often a lack of implementation at the national level. Thus, strong and joint efforts to improve implementation are the most important tasks for the coming years.

2.5. SUPPORT SERVICES AND LEGAL PROTECTION

In Western Europe, violence against women was turned into a social issue by the new women's movement in the 1970s. In 1972, the first women's shelter was opened in London, (Logar et al 1995; Hagemann-White 2002). In the course of the 1970s and 1980s, especially in the countries of Northern and Western Europe, women's groups established a great number of women's shelters. In the early 1990s, the first women's shelter in an Eastern European country was opened in Zagreb, still under the communist regime (Verein Autonome Österreichische Frauenhäuser 2004). In some countries, e. g., Germany and the UK, women's shelters have been able to establish a network of help services, while in other countries, especially in the new Member States of the European Union, but also in Southern European countries such as Greece or Portugal, women's shelters are as yet very few and far between.

Since the 1970s, help services for women and children affected by male violence have been expanded and steadily improved in almost all the EU countries. Women's shelters, counselling services and regional or national help lines exist in many EU countries. Still, in none of them is the service provision sufficiently comprehensive and extensive. The situation is especially precarious in the new EU Member States, where women's shelters are non-existent or too few. Services for survivors of violence are also lacking in other countries of the EU, especially in Southern Europe, with the consequence that women are often unable to leave a violent husband because there is no alternative available to them.

The United Nations Beijing Platform for Action (1996) requires that States should "provide well-funded Shelters and relief support for girls and women subjected to violence, as well as medical, psychological and other counselling services and free or low-cost legal aid, where it is needed, as well as appropriate assistance to enable them to find a means of subsistence". Governments are also urged to establish "linguistically and culturally accessible services for migrant women and girls, including women migrant workers, who are victims of gender-based violence". The Platform for Action further requires that States should "support initiatives of women's organizations and non-governmental organizations all over the world to raise awareness on the issue of violence against women and to contribute to its elimination" (United Nations 1996, The Beijing Declaration and the Platform for Action BPFA, para. 125).

In its final report, the Council of Europe Group of Specialists recommended that one refuge place should be available per 7,500 inhabitants (Council of Europe/Group of Specialists for Combating Violence against Women 1997). In 1987, the European Parliament's Committee on Women's Rights recommended that one women's refuge place should be available per 10,000 inhabitants.

Legal protection has been improved in several countries in the last years by such measures as police barring orders and court restraining orders (Federal Ministry for Family Affairs, Senior Citizens, Women and Youth BMFSFJ 2004; Logar 2005; Humphreys/Carte et al 2000). However, many countries still lack effective laws or do not adequately implement existing laws (United Nations/Division for the Advancement of Women 2005; Council of Europe/Equality Division Directorate General of Human Rights 2006).

2.6. FROM NO RESPONSE TO “INTERVENTION CHAINS” – DEVELOPMENT OF MULTI-AGENCY APPROACHES IN EUROPE

We have come a long way from treating violence as a private matter, with “no intervention” being the most common response by the police and justice system, to treating it as a public concern and a political problem, with State authorities accountable for protecting victims from all forms of violence in the public and private spheres. More holistic approaches and joint actions have been developed, recognizing that single-agency interventions are less effective in preventing violence than coordinated community responses. This development is by no means linear or consistent with the “old” ways of reacting to violence against women and children that still predominate in many countries and regions, and this creates a very inhomogeneous situation between countries but also within countries. The situation has undoubtedly improved a lot for many survivors, but by no means for all of them. Many countries are still struggling to provide quality services to all victims of domestic violence and have not yet reached this goal.

In the USA, multi-agency initiatives, known as coordinated community response, evolved in the beginning of the 1980s (Shepard/Pence 1999). The term “multi-agency work” developed in the UK, the country with the longest tradition in this field in Europe. Hundreds of domestic violence forums dealing with violence in the family against women and their children have emerged over the last ten or fifteen years (Hague/Malos/Dear 1996; Humphreys et al 2000). It is not a coincidence that countries with a long history of women's services like the UK, Germany, Austria and others are at the vanguard in providing these new kinds of services. It was the women's movement against violence that lobbied for a stronger commitment and accountability of State authorities and agencies to end and prevent violence against women and children.



CHAPTER 03

3. ACKNOWLEDGING THE PROBLEM: KEY ISSUES FOR TACKLING VIOLENCE AGAINST WOMEN AND CHILDREN

In order to provide quality services for women and children who have become victims of domestic violence, all the agencies involved must establish a common understanding and know-how regarding the problem. To develop a common knowledge and understanding of the problem is also crucial for multi-agency co-operation, especially in the field of danger assessment and safety planning. It can be fatal for victims if agencies underestimate the dangerousness of perpetrators. Unfortunately, too many women and children who are victims of violence continue to be killed by their husbands or fathers, although previous violent acts and threats were known to the authorities and indicated the danger. The signs and factors indicative of dangerousness were not taken seriously. On 1 September 2003, Fatima was murdered in Vienna in the street on her way home, by her husband, whom she was trying to divorce. The perpetrator had repeatedly threatened to kill her, and Fatima had reported every incident to the police. However, the prosecutor did not take it seriously and did not arrest the perpetrator.⁴ We can do better! We can prevent further violent acts against women and children if we learn to read the signs of dangerousness, if we listen to the victims, if we take action and give priority to the protection and safety of victims.

The following chapter highlights important issues for tackling violence against women and children.

3.1. WHY IS IT IMPORTANT TO HAVE EXACT KNOWLEDGE ABOUT POSSIBLE KINDS AND EFFECTS OF VIOLENCE?

If you are a victim of domestic violence, you will often find it difficult to talk about abuse. You are ashamed and do not tell anybody about the violence you have suffered, or you only mention what is obvious, e.g., a bruise, but not other forms of violence, such as sexual abuse. The intervening support agencies have to know which forms violence may take, what the dynamics of violent relationships are and what effects violence has, in order to be able to provide effective help to victims.

The workers at agencies that deal with the problem of domestic violence must also be aware of the way that violence may affect them: Abusers have repeatedly committed acts of violence against the staff of institutions,

⁴ Fatima was a client of the Domestic Abuse Intervention Centre in Vienna. In cooperation with the Frauenschutzfond / Women's Legal Protection Fund, the Domestic Abuse Intervention Centre brought a complaint before the CEDAW Committee in 2004, claiming that Fatima's right to be protected from violence had been violated by the Government. The case is still pending.

attempted to put pressure on them, to intimidate and threaten them. Attacks and massive violence against police officers and the staff of women's shelters, as well as hostage-taking, are not unusual in the context of domestic violence.

Example: In one of the women's shelters in Austria, a violent husband killed a police officer by shooting him with a rifle. Beforehand, he had threatened to place a bomb in the shelter. The police evacuated the house and searched the building. The perpetrator seems to have entered the shelter through an unsecured back door during the search, and waited inside until the police declared the house safe and led the women and children back inside. Then he started to shoot his rifle, killed a policeman and seriously wounded a woman and her son.

Unfortunately, such scenes are not rare occurrences, and that shows how important it is to know what form violence may take, what the dynamics of violent relationships are and which risk factors have to be considered. Perpetrators may paralyse the intervening agencies and people who help victims, and keep them from taking action. Therefore, it is indispensable to discuss and reflect on the effects of violence in order to prevent us from becoming helpless helpers.

3.2. FORMS OF VIOLENCE

Domestic violence against women and children does not consist of individual acts of violence. It is a pattern of physical, psychological, sexual and social/financial violence.

PHYSICAL VIOLENCE

Physical violence ranges from "just a slap in the face" to manslaughter, attempted murder and murder. It includes any form of abuse, such as pushing, kicking, beating, pulling the victim's hair, burning her, pushing her out of the window, abusing her with objects, wounding her with weapons, etc. This may cause injuries such as bruises, contusions, lacerations, teeth knocked out, fractures or cuts, which may be life-endangering and lead to permanent impairment. Women are abused by violent partners also during pregnancy, which may result in complications or miscarriage. Injuries due to abuse are often found on the head, neck, throat, breast and lower abdominal regions.

PSYCHOLOGICAL VIOLENCE

This includes:

- Isolation;
- Threats, bullying and intimidation;
- Harassment, persecution, terror;
- Coercion, use of force;
- Insults, humiliation, defamation;
- Economic violence, abuse of dependence situations;
- Damage to property, cruelty to the victim's pets, etc.

Isolation is a central strategy that violent partners use in order to maintain control over their victims, to weaken them and to prevent them from seeking help. Typical methods of isolation include denying a woman any contact with her relatives or friends, shutting her in at home, forbidding her to leave the house alone, forbidding her to use the phone, taking away her mobile phone, cancelling phone contracts, taking away the car, etc.

Threats, bullying and intimidation are frequent forms of psychological violence. Typically, threats and bullying include statements such as: I'll kill you if you leave me; I'll kill the whole family if you call the police; you'll pay dearly if you tell anybody; I'll take the children away; the welfare officer will take the children away from

you; nobody will believe you anyway; if you call the police you will be deported; etc. Abusers may also threaten to injure third persons (children, relatives) or to torment pets in order to get what they want. Threats and intimidation even make physical violence unnecessary, so to speak, because the fear of it is frightening enough. As a result, the victims live in constant fear.

Control, harassment and psychological terror, such as repeated phone calls, phone calls during the night, threatening letters, spying on the victim and persecution of her at work and at home: Such forms of violence are also referred to as stalking. They are used both within relationships in order to maintain control over the victim and to intimidate her, and also during the separation stage or after separation. Victims are often persecuted, harassed and threatened for months or even years after the end of the relationship.

Insults, humiliation and defamation aim to destroy the victim's self-confidence and mental health. In the course of time, the woman concerned will cease to have faith in herself, her worth and her identity and will no longer believe that she has any rights and may take decisions herself. This kind of violence includes exposing the victim to ridicule and making insulting comments about her appearance or her character. Typical humiliating statements are that the woman is mad or mentally ill, that she is making things up or that she is in danger of committing suicide. Abusers often say this to distract others from their deeds and to present the woman herself as a problem.

Economic violence refers to inequality in the access to and control of the family's resources. This may mean that the husband's maintenance payments are insufficient and/or that he makes a secret of his income, his property and his expenses.

SUMMARY

It is difficult to talk about violence one has had to suffer, in particular sexual violence. Agencies that provide help must be aware of this and cannot take it for granted that victims will readily talk about their abuse or even go into great detail. It is essential to be sensitive towards victims, to acknowledge the fact that they did decide to take steps for themselves, and to encourage them to talk about violence. This requires a relationship of trust. The women concerned must be sure that the information they provide will not be misused or even used against them.

3.3. PATTERNS OF VIOLENCE: POWER AND CONTROL

Violent partners usually exert several forms of violence: Physical and sexual violence are also expressions of psychological violence. Physical violence leaves traces in the form of injuries which may betray the abuser. Therefore, violence is often deliberately used in a way that avoids visible injuries. For instance, women are beaten with wet cloths or hit on body parts that are covered by clothing. A frequent strategy is to use violence in situations where no witnesses are present. The abuser then denies having been violent and says, for instance, that the victim has inflicted any injuries herself.

In some violent relationships, the partner does not use physical violence. In such cases, it may be particularly hard for the victim to prove the abuse. Some of the women affected say that their partners stopped using physical violence after they had been reported to the police or after they had taken part in a programme for abusers, but that they continued to use psychological violence.

In most cases, violence against women and children is not an isolated act, but an ongoing strategy that aims to secure a hold on the victim. Thus, a relationship of violence exists, the goal of which is to have power and to exercise control so that the victim will be subservient to the abuser and cannot escape his influence.

Thus, the problem of domestic violence against women and children is characterised by relationships of power and violence, with varying degrees of intensity. It is of central importance to look into each individual case and find out which forms and strategies of violence are used, how much power the violent partner exercises, and which opportunities, if any, the victim has to take steps against this or to escape the violent relationship.

3.4. ESPECIALLY VULNERABLE GROUPS

In the context of domestic violence, there are women who run a particularly high risk of repeated abuse: for instance, elderly women who are dependent on the perpetrator and who have little or no prospect of leading independent lives. In many countries, the lack of affordable accommodation and low incomes are central reasons why women, although they may be divorced from violent partners, are forced to continue living with their partners, and often to suffer further violence. Also women whose right of residence is linked to a relationship or who do not have a legal residence status are highly vulnerable. In these cases, it is often the abuser who threatens to call the police if the woman refuses to do what he wants her to. Women who do not speak the language of their country of residence often cannot even call the police; they do not know the emergency phone number and do not know how to make themselves understood. Poverty and dependence are the most frequent risk factors for violence.

3.5. THE EFFECTS ON CHILDREN

The children of battered women are always affected by the violence, either directly or indirectly. Thus, violent husbands or partners are also violent fathers (Hester/Radford 1998; Eriksson et al 2005). Research and practice indicate that the risk of becoming perpetrators or victims themselves is elevated for children who have experienced violence in their families.

Violence against mothers always involves violence against their children as well and may even be transferred from the mother to the children after a separation (Haller 2002). The violent partner may take out his revenge on the children, as in the case of a girl who was murdered by her father in the Austrian province of Styria. The father had never committed acts of violence against the children before, but had abused the mother. On a weekend when the children were visiting him, he drowned the girl in a lake, before the very eyes of her brother. Violent men have also failed as fathers and must prove their worth anew before the children can be permitted to have contact with them, and then only if the children's safety and well-being in their charge can be guaranteed. Violent fathers should only be granted visitation rights if their violence problem has been successfully treated, and never against the will of the children.

Investigations have shown that violent behaviour can be passed on over several generations (Appelt/Höllriegl/Logar 2001). For children who have experienced violence in the family, the risk of themselves becoming perpetrators (boys) or victims (girls) is increased. All these children need help and support so that they can deal with the trauma and integrate it.

3.6. THE EFFECTS OF VIOLENCE ON VICTIMS

Living in a violent relationship means leading a life of fear and insecurity. Even if no physical violence is used, victims do not feel safe. "I felt I was trapped in a small world of brutality, and nobody came to take us away." This is how a young girl described her life in a family with a violent father.

Women and children may be affected by domestic violence in a number of ways:

- Isolation from family and friends;
- Emotional and psychological effects such as feelings of anxiety, depression or low self-esteem;
- Poor health;
- Loss of income or work, homelessness;
- Physical injury or lasting impairment;
- Death.

Suffering violence is a traumatic experience (Herman 1992). The trauma is aggravated by the fact that the violence is exercised by a close person, a member of the family. As the victim is dependent on the abuser in multiple ways, she feels that she is at his mercy, to the point where her self-esteem is destroyed and she gives up. The horror of violence often continues to be felt for many years, even after the separation from the abuser, in particular in cases of severe violence; the victims may suffer from it for their whole lives, and it is difficult for them to heal.

Thus, violence has massive effects on the physical and mental health of victims; it literally makes them sick. If victims feel that nobody will help them and that there is no escape, they run a high risk of resigning themselves to their fate and becoming depressive. Suicide or attempted suicide are not rare occurrences among victims of domestic violence.

Victims of violence often receive medical treatment for anxiety disorders or depression, and they are prescribed medicines, although the true cause of the symptoms remains unknown. They might start to take illegal drugs or to drink in order to cope with their fear – which again leads to dependence and further weakens them (Logar 2003).

3.7. THE STOCKHOLM SYNDROME

As the psychologists Dee Graham and Edna Rawlings discovered, the behaviour of abused women is a normal response to a traumatic experience (Graham/Rawlings/Rimini 1988). In their survey of more than 400 abused women, they detected a response pattern that they referred to as the Stockholm Syndrome. This syndrome was first observed in 1973, when four people were taken hostage and held for six days by bank robbers in Stockholm. During this time, the captives developed a close relationship with the robbers. They regarded the police as the enemies and defended the robbers.

There are four relevant conditions under which the Stockholm Syndrome may develop:

- The life of the victim is threatened;
- The victim cannot escape or thinks that escape is impossible;
- The victim is isolated from persons outside;
- The captor(s) show(s) some degree of kindness to the victim(s).

If these conditions coincide, the victims tend to develop a bond with the abusers – in the case of both hostage situations and domestic violence. If the violent partner is willing to make small concessions or shows friendliness, even to a minute degree, the victim has new hopes and is ready to give the abuser another chance.

Graham and Rawlings discovered that the Stockholm Syndrome is found not only among hostages and abused women, but also among abused children, detainees in concentration camps, sect members, prisoners (of war) and political prisoners. After a certain time, all of them begin to identify with the aggressors – in order to survive. Women who are victims of their partners' violence react in the same way. They are not different from other people; they do not develop specific psychological coping patterns. They react like anybody else who has experienced violence and does not see a way out of their situation.

3.8. STRATEGIES FOR SURVIVAL

Women and children who have experienced violence by their partners or fathers are not just passive sufferers. They develop manifold strategies to avoid violence and de-escalate dangerous situations. This includes passive behaviour in a dangerous situation that may lead to an assault: avoiding any irritation of the abuser and obeying his wishes, attempting to evade him or to appease him. This may mean that a woman cooks a meal for the abuser if he comes home drunk at midnight, that she does not contradict him but says that he is right, or that she gives up contacts with her friends or her family if the violent partner does not approve of them, etc.

These defensive strategies are very effective in situations of acute violence; however, the victims are not often rewarded, but are rather blamed for putting up with violence and failing to put up resistance. It is crucial to acknowledge the strategies that survivors have pursued, to appreciate them and to empower and encourage the survivors.

As mentioned above, a typical strategy of violent partners is to isolate their victims and to prevent them from getting help. Abusers often use threats and force to make their victims keep silent about the violence they suffer. Therefore, the affected women and children may look for help only with great secrecy and they are likely to face repression if the partner learns, for example, that the woman wants to go to a counselling centre. Women's services and other agencies must be aware of the fact that their interventions and assistance may further endanger a victim who is looking for help, and they have to take measures that prevent additional risks to the greatest possible extent.

Some survivors physically defend themselves against abuse. This may be successful but may also lead to even more violence. Survivors usually have a good feeling for strategies that may be effective in preventing violence and defending themselves. In some situations, if a woman is being strangled or brutally hit, it may be a matter of survival to put up resistance. However, abusers often present such defensive acts as acts of aggression in order to avoid sanctions and to shrug off the blame. So it is essential particularly for prosecuting authorities to be objective, to take precise note of all the facts and to draw up a chronological report of what has happened.

In extreme cases, a victim of domestic violence, who may have suffered abuse over many years and does not see any way out, eventually seriously injures or kills the abuser. In other cases, the adolescent sons of abusers injure or kill their fathers in order to put an end to the violence. It is important also to prevent such terrible escalations of domestic violence, and it is crucial to show the victims that there is a way out, and that they can find help.

3.9. RISK FACTORS

As we have seen, the danger of repeat offences is very high in the case of domestic violence, and isolated occurrences of abuse are rare. In times of separation or divorce, the risk of violence tends to rise: The majority of murders, attempted murders and acts of serious violence are committed when the victims attempt to leave their abusers. Ironically, it is safer, so to speak, to stay in a violent relationship than to end it. According to a study conducted in Canada on murders of women by family members, women who are in the process of ending a relationship run the highest risk of being killed by their partners (Crawford/Gartner 1992). The competent authorities and institutions should be aware of this and should point out to victims that they are in a high-risk situation, and they need to take adequate precautions to ensure their safety (see chapter 8).

Domestic violence must be taken very seriously: We have to attempt to prevent a repetition of violence by all means available, and by using all our expert know-how. If a perpetrator is regarded as very dangerous, imprisonment often is the only way to prevent him from committing egregious acts of violence. The factors listed below have been identified in international studies as risk factors for a high degree of dangerousness (Gondolf 2001; Robinson 2004; Humphreys et al 2005). The more factors apply in a specific case, the higher the risk is that acts of violence will be repeated or that the violence may increase or even escalate.

Previous acts of violence against the partner and the children or other members of the family

The perpetrator's history of abuse and the forms and patterns of violence he has used are important indicators of his future behaviour. Thus, it is important to find out whether he has previously committed acts of abuse. Former convictions or reports to the police alleging violence are indications of a strong violence potential.

Separation and divorce are times of high risk

As mentioned above, domestic violence often escalates when a victim wants to leave the abuser. Therefore, this phase must be considered as an additional risk factor for escalation.

Severity and frequency of violent acts

The severity and frequency of violent acts also play a relevant role in assessing the dangerousness of an abuser. Acts of severe violence include armed violence, use of objects to injure a victim or strangling. Perpetrators who have committed frequent, severe acts of violence are particularly dangerous.

Violence against former partners or family members

Acts of violence committed against former partners or family members also indicate a risk factor for dangerousness.

Acts of violence by other family members

Violence committed by family members of the perpetrator is another risk factor. It is especially difficult for the victim to escape the violent relationship, because in such cases the woman concerned is often controlled by the whole family, which, for instance, may make it impossible for her to flee.

Acts of violence outside the family

A great majority of domestic violence offenders commit violent acts only within the family circle. However, if they show violence also outside the domestic sphere, this indicates a general tendency to use violence. Such perpetrators may also assault the staff of support centres or authorities. Thus, safety planning for shelters and agencies is of particular importance.

Possession of weapons, use of weapons

If a perpetrator possesses (legal or illicit) weapons, this increases the risk of acts of armed violence. The risk is especially high if he has already used arms in the context of former acts of violence, or if he threatened to use a weapon in the past. Therefore, the abuser's licence to carry firearms should be revoked. Violent perpetrators may also use techniques of combatant sports or aggressive animals (fighting dogs) as weapons.

Abuse of alcohol or drugs

While violence is not caused by alcohol and drugs, in persons who are inclined to use violence, they may lower the threshold of violence and thus contribute to an escalation of violence.

Threats

Threats should always be taken seriously. The perpetrator's threats express his intention and his plans, and often indicate further acts of violence that are to be expected. It is wrong to assume that persons who "only" use threats are not dangerous, but are just the proverbial barking dogs that seldom bite. Practical experience has shown that severe violence is often preceded by threats. Therefore, threats are important indicators of the dangerousness of a perpetrator.

Threats of murder/serious coercion

Threats of murder are dire threats that must always be taken seriously. In many cases of domestic murder, the victims had repeatedly been threatened with murder before they were killed.

Threats of suicide, depression

Threats of suicide should always be taken seriously as well. There are many examples of perpetrators who kill themselves as well as their partner, other family members or a new partner. If an abuser threatens to commit suicide, a physician should always be consulted to assess the risk of the perpetrator's harming himself or others. Although many abusers use threats of suicide as a means of emotional blackmail, one can never be sure whether they will carry out the threat.

Depression may also be a risk factor for the dangerousness of a perpetrator. Depressive phases are characterised by tunnel vision: One does not see any alternative; nothing seems to make any difference. At this stage, violent acts may escalate.

Extreme jealousy and possessiveness

Abusers who kill or severely injure their partners are often possessed by the desire to own their partners. They are extremely jealous and some regard every man around their partner as a rival. They control and monitor the partner and constantly accuse her of infidelity. This may lead to delusional jealousy, which is especially dangerous because the abuser is losing his grip on reality.

Extremely patriarchal concepts and attitudes

Extremely patriarchal concepts and attitudes may also be risk factors with regard to dangerousness. A typical view in this context is that a girl or young woman must not lead a self-determined life, but has to obey her father, as he is the head of the family. Such attitudes may also mean that a girl or a young woman is strongly persuaded or forced to marry, or that she is prevented from getting a divorce.

What is particularly dangerous is a situation in which very rigid concepts of honour and sexuality prevail and women become victims of violence or are even killed if they do not obey these rules or if they are accused of having dishonoured the family.

Persecution, psychological terror (stalking)

Many perpetrators are not ready to accept a separation from their partner and try to prevent it by all means, also by using violence. There are abusers who continue to commit violent acts also after a separation and threaten their former partners for many years.

Danger for children

During separation or divorce, children are particularly vulnerable, too. They are also regarded as the abuser's possession. They cannot leave a violent father and, during visits, children may become victims of violence. The abuser's aggressions against the partner may also extend to the children, and he may take revenge by abusing or even killing them. Therefore, safety planning must always integrate the children, and fathers who use violence should not be granted visitation rights before they can prove that they have effectively tackled their violence problems.

Non-compliance with restraining orders by courts or police

If a perpetrator does not meet obligations such as compliance with restraining orders, protective orders requiring him stay away from the victim, or other orders by the courts or youth welfare authorities, this also indicates a high-risk situation, because it shows that the perpetrator is not willing to observe the restrictions that have been defined and to change his behaviour.

Possible triggers

One has to bear in mind that certain situations may lead to a sudden escalation of violence. Often, violence is triggered by a change in the relationship (e.g., when a woman takes a job against the will of her partner, when she looks for help or files for divorce, or when a divorce summons is served upon her husband). Therefore, it is very important to consider which situations or events may trigger violence and to take adequate safety measures in order to forestall it.

Risk assessment by the partner

Gondorf (2002), in his study on the risk of repeat offences in the context of domestic violence, determined that the assessment by the victims is an important indicator of the danger of renewed violence, and that there is a strong correlation between the risk assessment on the part of the victim and the actual use of violence by the perpetrator. Therefore, it is of crucial importance that the staff of authorities and support services ask the woman affected by violence about her assessment of the situation, and her opinion must be taken very seriously. The victim's fear of violence should never be minimised, played down or dismissed as hysterical.

A systematic assessment of the risk situation should be a standard procedure in all cases of domestic violence, followed by development of a safety plan, which should be drawn up with the victim in each individual case – not only once, but repeatedly.

3.10. WHY DOESN'T THE VICTIM LEAVE HER VIOLENT PARTNER?

Unfortunately, the problem of violence against women is still marked by myths and prejudices in our societies. The tendency to blame the victim for what has happened is not only a typical strategy of abusers to justify the abuse, but is an attitude that is also common among the general public and also among representatives of relevant institutions. A question frequently asked in this context is, "Why didn't the abused woman leave the perpetrator and why did she go back to him after a separation?" Such questions are not always aimed at understanding the situation of the abused, but often include an implicit reproach or prejudice, i.e., that the victim is actually seeking violence and wants it.

Therefore, it is important to understand that a survivor never stays in a relationship because of the violence she experiences, but in spite of it. Each situation is unique, and it is essential to take the individual situation of each survivor of violence into account and to respond in a sensitive, empathetic way in order to understand the situation and to empower the victim. The paragraphs below list a number of typical reasons why women who suffer violence do not leave their partners. A central reason, i.e., the bond established with the violent partner (the Stockholm Syndrome), has already been described.

Separation is a difficult process that takes time

Leaving a partner is a difficult process for everybody, and it takes time. Marriage and family are concepts of high social value, and the decision to end a relationship is not taken easily. You ponder the pros and cons; you do not carry through the separation, but try again to continue the marriage or relationship. The more bonds there are that tie a couple to each other, e.g., children or joint property, the more difficult it is to end the relationship. Women, through cultural and social rules, are educated to endure much. In families where traditional, patriarchal values play an important role, women have very little freedom to leave their partners and to lead independent lives. Thus, the way in which a woman affected by violence will take a decision (i.e., by attempting separation, then returning to the partner) is by no means unusual, but rather is a normal process. Often, the woman concerned is under great pressure by her own or her partner's family, or both families, and is urged to give her spouse another chance and to make it up. In many cases, a definitive separation only takes place after several attempts have failed and if the woman can no longer hope for a change for the better.

The wish to put an end to the violence, not to end the relationship

Many abused women do want their partners to stop using violence but do not want to leave them. This is a legitimate wish that has to be respected. Every woman has the right to decide for herself whether or not she wants to end a relationship. It is a personal decision that has to be acknowledged by her environment, and also by the agencies involved. If a woman who has suffered violence decides to continue the relationship (for the time being), this does not mean that she has to put up with violence as well. The point is to ensure the cooperation of all the agencies that are concerned with the problem in order to provide the best possible support and empowerment of the woman in question and to prevent her partner from continuing to use violence. The goal of services and multi-agency initiatives should not be to demand of the survivor that she end the relationship, but to engage in putting an end to violence.

Lack of resources and lack of options

A lack of resources and housing problems are important reasons why many victims do not end a relationship. A separation may mean that the woman will lose her job, or that the children have to change kindergartens or schools. In many countries, it is very difficult or impossible for single mothers with low incomes to find a place to live. Many countries do not have shelters or the shelters do not have enough room to accommodate all the women who need help. Often, women do not get financial support or assistance to help them re-enter the labour market; thus the situation is precarious for them and their children. Many fathers do not pay alimony voluntarily and have to be sued for maintenance in lengthy proceedings. Mothers frequently do not get any maintenance payments for themselves or their children.

Fear of further violence: Separation is a high-risk situation

Fear of further violence plays an important role in women's decisions to stay in a violent relationship. As described above, it is at times of separation or divorce that the most egregious acts of violence are committed. Thus, separation often does not mean the end of violence, but ushers in a further aggravation of it. The workers in intervening agencies have to be aware of this risk and must not advise a woman without careful consideration to "simply leave her partner". There is no simple way out of a violent relationship. During the separation phase, women need special encouragement and active support to ensure their safety.

Feeling responsible for the family

Many victims of violence, in spite of their difficult situation, are surprisingly strong in managing their lives, although they play subordinate roles in their relationships. Women feel responsible for the family, for the children and also for the husband. Therefore, they attempt to improve the current situation and to motivate their husbands to change their behaviour. Thus, they also play the role of social workers for violent men, so to speak. They are not only victims, but their role is also to ensure the bonds between and the well-being of all the members of the family. As a result, these women are in a situation that is paradoxical in several ways: As victims, they should fight against the violence and report it to the police; as wives, they should be loyal to their husbands and evade negative consequences. They should protect their children from violence, but also make it possible for the children to have contact with their fathers. In fact, they are confronted by their families and by society with contradictory requirements which they cannot fulfil, and this places them in a hopeless dilemma.

The scars of violence

As has already been indicated, violence profoundly affects the physical and mental health of victims. In her book, *Trauma and Recovery* (1992), Judith Lewis Herman, a psychiatrist and psychotherapist, points out that the survivors of violence need intensive help and support in order to recover and to heal. People who have experienced violence can start to heal only if they are in safety and are no longer exposed to violence. Therefore, the first and most important goal of everybody who helps victims of violence must be to create a situation of protection and safety.

Lack of help or inadequate help

Absence of, or inadequate, help is a frequent reason why victims stay in or return to abusive relationships. They do not know where they might find help or they are frustrated in their attempts to obtain support. Still, they do seek help, often desperately, as is shown in a study carried out in the USA: 85% of all women who were killed had called the police at least once in the past (Sherman/Berk 1984).

There are more reasons than those described above that make women decide to stay in abusive relationships. These reasons are different in each individual case, and it is important to understand and respect them. Of course, victims of violence should at the same time be encouraged not to go on enduring violence any longer. It is essential to see that a separation always requires a great deal of courage and readiness to take risks, and that the women concerned are likely to face additional social problems. Effective, intensive support by third parties is very important for women and their children so that they can disentangle themselves from abusive relationships.

3.11. REPORTING DOMESTIC VIOLENCE IS A TABOO

A special feature of violence within families is that the abuser and the abused have a very close relationship and that they might tend to cover up what is happening. The fact that the victim acts as an “accomplice” of the abuser is normal in the context of domestic violence. This is a special situation which the police and the courts must not fail to take into account. Here, the picture may be different in many respects from that presented by violent acts committed by strangers. While the victim of violence by a perpetrator from outside the family tends to report the offence to the police and give evidence as a witness, the victim of domestic violence, because of her close relationship with the perpetrator, cannot be expected to cooperate readily with the prosecuting authorities. All of us know such protective attitudes from our own families; they are by no means unusual.

There is a taboo against reporting a member of the family to the police. Let’s imagine that we have been beaten and injured by our own brother or sister. Would we go to the police and report them? Most likely, we would try to solve the problem ourselves and only if the violence continued would we turn to a friend or

relative. A study in the British Crime Service revealed that more than 50% of victims did not tell anybody about the violence and only 9% reported the violence to the police (Mirrlees-Black 1999:54).

As a result of a strong feeling of loyalty and fear of further violence, victims are often hardly able to pay heed to their own safety. They have to do what is in the interest of the abuser and/or the family and it is impossible for them to consider their own needs to any great extent. Again: Planning for safety and encouraging victims to take their own safety into account are important strategies when providing help to victims of violence.

3.12. HIGH PROBABILITY OF REVICTIMISATION AND MANIPULATION OF THE VICTIM

It is important to bear in mind that abusers in a family are very likely to repeat their violent acts. The probability of repeat offences rises if the negative consequences or sanctions of former violence have been small. Perpetrators will not stop committing acts of violence of their own accord: In most cases, interventions and sanctions by third parties are necessary to prevent further violence.

It is also a feature of domestic violence that the abuser has easy access to his victim: She frequently lives with him. Thus, the risk of revictimisation is especially high. Victims of violence by strangers will usually try to stay away from their abusers, while it is much more difficult for victims of domestic violence to protect themselves and to evade the perpetrator. For instance, children have to see their father because of visitation rights, and women are often forced to keep contact with the abuser even after a divorce or separation.

A perpetrator in the family has many possibilities to influence the victim. He may prevent her from making a statement, or persuade her to refuse to give evidence or even to make a false statement that harms her case. In criminal proceedings, the victim is often the only witness of the violence, and she will frequently be powerfully influenced by the abuser and also by his family.

Because of the abuser's close ties to the abused, it is difficult for the victim to take steps against the perpetrator such as calling the police. This, in turn, strengthens the abuser's position, and the risk of sanctions is small. Perpetrators use the control they have over their victims, and often prevent them from seeking help. They exert pressure and convince or coerce the victims not to make statements or to withdraw reports to the police. It is difficult for victims to refuse to give in.

Perpetrators within a family often use their victims as buffers in order to avoid sanctions. They place their victims between themselves and the prosecuting authorities, so to speak. Victims may be induced to act to the advantage of the abuser (see the section on the Stockholm Syndrome). This may be harmful for the victims themselves, as they eventually come to be regarded as untrustworthy, and they even risk being prosecuted themselves for making false statements. Such behaviour by victims is often regarded as paradoxical or even masochistic, because the underlying strategies of the abuser are not recognised. It is rather assumed that the victims voluntarily act in such a senseless way. However, their behaviour does make sense if the interests of the abusers are taken into account.

Committing violent acts that remain in the private sphere makes it easy for the abuser to prevent interventions, to make light of the violence or to insist that he is not a danger to the public. Therefore, it is essential for each country to have effective laws that ensure protection from violence and that permit the police and the courts to intervene and protect the victims in their own homes. The new protection against violence acts adopted in Austria and Germany are good examples in this regard, as they make it possible for the police to order violent spouses or fathers out of the home (see appendix, models and examples of cooperation). It is also extremely important that the police and the prosecutor's office meticulously collect evidence, since the victim might not be willing to testify in court or her testimony might not provide enough evidence.

3.13. PREJUDICE PREVENTS EFFECTIVE STEPS AGAINST VIOLENCE

In cases of domestic violence, social prejudice – especially prejudice against the victims – is still strong and takes many different forms. Typical views in this context are that the victim behaved in a way that provoked the violence, that the victim is to blame for the violence, that the victim has made up a story of violence in order to harm her husband in a divorce suit, etc. The victims are also criticised for enduring violence over many years and for not reporting the abuser to the police – or they are criticised for the opposite: calling the police too soon. Domestic violence often continues to be regarded as less serious than violence in public – also by the prosecuting authorities. The share of domestic-violence-related proceedings that are dismissed is high. A relevant study indicates that, in Austria, only one out of seven reports leads to a conviction (Haller 2002).

Survivors of domestic violence are often accused of inventing acts of abuse in order to improve their position in divorce suits, and they are often regarded with extreme suspicion, in particular by the prosecuting authorities, which makes it difficult or impossible for them to trust the police and the courts. This, in turn, helps the perpetrator. Therefore, it is important to orient ourselves toward facts and not prejudice. There is no empirical evidence corroborating the assumption that false reports are frequent in cases of domestic violence, or more frequent than in other cases. On the contrary, it is highly probable that violent acts will not be reported to the police and that the victims will not tell anybody what they have suffered, or that they will not tell everything (Federal Ministry for Family Affairs, Senior Citizens, Women and Youth BMFSFJ 2004). A consequence of prejudice is that workers in relevant institutions fail to grasp what has actually happened, that they overlook or neglect important facts, in particular with regard to risk factors that are indicative of the dangerousness of the abuser, or that their interventions are unprofessional. Thus, it is of great significance for workers in agencies to understand and reflect upon their own prejudice.

3.14. ZERO TOLERANCE: A CLEAR POSITION TOWARDS ABUSERS

People who commit acts of violence within their families are not easily identified as violent by other people. The majority of abusers will use violence “only” in the domestic sphere. Outside their families, they may appear to be inconspicuous and often even very nice and friendly. When we refer to abusers, often a picture of brutal men and “typical” criminals comes to mind. Perpetrators who resemble this picture are more often prosecuted by the police and the courts than people who seem to fit in, who are eloquent and appear to be calm and composed. However, persons who commit acts of domestic violence are found in all social classes. Some of them have criminal records, but many of them have never been convicted or reported to the police and have regular jobs.

Men who use violence against women and children in the domestic sphere often espouse the traditional role model of the man as the master of the house who has the final say and may treat *his* wife and *his* children as he pleases. Many abusers do not recognise that what they are doing is wrong. On the contrary, they feel that they are right, and blame the victims, society or the laws for the offences they have committed.

Domestic violence has long been regarded as a private matter, and the privacy of the family has protected the abuser from criminal prosecution. Therefore, the intervention of the State is crucial in the context of violence in the family, as it sends a signal to the abuser that violence is not tolerated and will have negative consequences. Effective laws that are actually enforced, as well as intensive support of the victims, are necessary to eliminate violence

Central principles against violence include the following:

- An act of violence is a criminal offence and must not be tolerated.
- An act of violence is never justified; there is no excuse for violence.
- The abuser is the one who is responsible for acts of violence and he must face consequences.



CHAPTER 04

4. SURVIVORS NEEDS AND PRINCIPLES OF HELP

Survivors of violence need information and access to help; safe accommodation; protection; legal, social and financial aid; and psychological and medical support. Both crisis support and long-term services are needed in order to overcome traumatic experiences. Both quantitative standards of help, such as access to services for all victims in all regions of a country, and also qualitative standards, such as safety measures and professional help, are important. Women and children need more than “a roof over their heads” (WAVE 2002); they need quality services and professional, adequate help. Within another DAPHNE project, WAVE has developed standards and guidelines for setting up and running women’s shelters as core services for women and children victims of domestic violence (WAVE 2004). Women’s advocates with long experience of supporting survivors of violence have identified principles of help that can be applied to all agencies dealing with the problem. Some important standards and principles are described below.

Ending and preventing violence

The overall goal of all agencies must be to stop acute violence immediately and to prevent further violent acts. Additionally, many agencies are also involved in primary prevention activities such as awareness-raising campaigns and prevention programmes in schools. Since in the field of domestic violence the estimated number of cases that go unreported is high, it is an important goal to increase the number of cases reported and to find new ways to encourage survivors to seek help.

Ongoing support for survivors

The goal of stopping and preventing violence implies that services should not withdraw after emergency interventions, but should keep offering support and help to the victims as long as there is a danger of violence and as long as the survivors need support.

Holding perpetrators accountable

Holding perpetrators accountable and ensuring that violent acts are prosecuted and convictions obtained is an important goal. But punishment alone is not enough. Abusers must also be prevented from committing further acts of violence, and they need to change their behaviour. As many violent partners are not willing to take part in such programmes voluntarily, statutory means that oblige them to participate need to be adopted. Support programmes for victims must form an integral part of any programme aimed at abusers (Logar/Rösemann/Zürcher 2002; Dobash 2000; Gondolf 2001).

PRINCIPLES AND STANDARDS FOR HELP:

Advocacy for victims

Countering violence means adopting a clear stance and condemning violence against women in all its forms (“There is no excuse for violence”). Trying to remain neutral about what has happened means running the risk of tolerating violence. It is always the perpetrator who is responsible for the violence. Adopting a clear stance against any form of violent behaviour expresses condemnation of violent acts (but not condemnation of the perpetrator as a person). Survivors seeking help should never be asked to offer proof of the violence they have suffered. It is important to listen carefully, to believe and to respond with the utmost respect and without prejudice.

Survivors of violence need services that provide advocacy and support on a long-term basis, accompanying them through all the processes and coordinating the interventions. Women’s services provide this necessary kind of support and it should be standard procedure that every survivor of violence is supported by an advocacy service.

Protection and safety

First of all it is important for survivors of violence to be safe. Safety must therefore be assigned the highest priority in all agencies providing services to women and children victims of domestic violence.

Services free of charge

Support services for women and children victims of violence should be free of charge, especially for women with little or no income. This is to ensure that women and their children in need can get support independently of their financial status.

Empowerment

Being the victim of violence means passing through the traumatic experience of being powerless and at the mercy of the violent partner or father. The aim of any kind of support should be to overcome powerlessness and to *empower* women and children so that they can lead a self-determined life. Survivors of violence should not be labelled “ill” or “distressed”, which would further weaken their position. Being weak is often the consequence of being exposed to violence. Violence leaves marks not only on the body but also on the mind and self-esteem. Some approaches for working with abused women go wrong in that they see this weakness as characteristic of women, who are consequently viewed as pathological cases. It is vital to regard women as agents for change and experts in their own situation. They need support to help them grasp their situation and understand how it was possible for their partner to exert power over them. Understanding and reflecting on the mechanisms of violence enables women and children to develop strategies to resist violence efficiently. The ultimate goal is for them to live a life free of violence.

Right to self-determination

It is important to respect women’s right to decide about their lives (see “Empowerment”). Very often, relatives, friends and professionals in care organisations try to tell the woman what to do. Some think she should separate from the abuser; others tell her to give him another chance. Unfortunately, it happens quite often that people are disappointed or even annoyed if she does not follow their advice. But such advice can create even more pressure on the woman and is experienced as not being helpful at all. It is important to convey to the woman that she is the only one in a position to decide, and that her decision will be respected. The aim of an intervention is to end violence, not to end a relationship. The right to self-determination is an important principle. How long a woman wants to stay in a refuge and whether she wants to separate from her partner permanently or not is solely up to her.

Easy access to services and proactive support

Recent research and practice have shown that women and children victims of domestic violence need proactive help and support (Federal Ministry for Family Affairs, Senior Citizens, Women and Youth BMFSFJ 2004; Logar 2005). Seeking help can be a difficult process, in which victims have to approach many different agencies before they finally receive help. Services should be easily accessible and widely known. It is the task of society to offer help to the victims and not the victims' task to search for or sometimes even fight for help.

Support for children

As stated in previous chapters, children are always affected by violence, either directly or indirectly. Unfortunately, they are often the forgotten victims, because few agencies or services are aware of their needs. In many women's refuges, support and counselling for children have become an integral part of service, but many services still do not meet this standard. Support for children has to be organised in a family-friendly way, making it possible to accept the help offered. Counselling and support for children should preferably be offered parallel to the help for the mother, as a package serving the needs of both. This makes it possible also to strengthen the mother-child relationship and the non-violent family system, which is often the only source of support for the children. If mothers have to bring their children to a different service, or services (if they have children of different ages), they might easily feel overburdened and end up with the feeling that the help system is demanding instead of supporting.

Diversity

The diversity of women should not only be respected but seen as something valuable that is to be encouraged. Services must not discriminate against women and children on grounds of nationality, ethnicity, race, class, age, disability, religion, culture, sexual orientation, etc. Services must be fully accessible to all victims and must take into account the special needs of women.

Confidentiality and anonymity

To protect a woman's rights and her integrity, it is necessary that she be able to decide which information about her will be passed on to others. Therefore, no information should be passed on by the refuge or by the counselling centre without the woman's consent. Exceptions should and must be made if the life and health of women or children are at stake (i.e., suicide attempts, acute danger from the violent partner, or women abusing their children). Women should also have the right to receive counselling and support without having to reveal their identity.

Women supporting women and specialised services

Abused women suffer greatly from being dominated and abused by their male partners. It is therefore important for them to receive support and help from a female staff member who is an expert in the field. Women's organisations have developed the principle of women helping women as a core concept to empower women victims of violence. Victims suffer from being in a weak position and from having lost faith in their own abilities and strength. Thus, women's services afford a model that enables women to experience their own ability to lead an active and self-determined life. This is also reflected in the structure of refuges and women's crisis centres and helplines, where women not only work at the grass-roots level but also manage the organisation. This structure helps women and children to rethink and overcome stereotyped gender roles and empowers them. Institutions like homeless shelters are not appropriate to support survivors of violence (WAVE 2004).

Male-dominated services such as the police should seek to increase the number of female staff and make sure that victims of violence are served by trained female officers (see also chapter 6). Police and prosecutor's services have been very successful in addressing the problem by introducing specialised units where services are also, but not exclusively, provided by female staff. In several countries, police and justice system agencies have introduced the guideline that women victims of violence have the right to be interviewed by a female officer.

Accountability

Services are accountable to the service users, to the organisation and its members and to society in general. The activities and the conduct of the services must be transparent and comprehensible.

Involvement of the service users

It is important for services to be democratically structured and for service users to have the right to be involved in the provision and evaluation of services (Hague/Mullender/Aris 2003, see also chapter 11). In modern quality management concepts, the involvement of the customers, clients or patients is a core principle. They are not seen as mere objects of interventions, but as important stakeholders whose opinions regarding the quality of service are crucial to the organisation (European Foundation for Quality Management 1999-2003). The participation and involvement of women and children is especially important in refuges and other services where women and children reside for some time. Women's refuges should not be institutions in which women's lives are dominated and controlled, but women and children should be included in processes of decision-making. The power of the abusive husband and father should not be replaced by the power of the institution. Power has to be handled carefully; regulations are necessary, but they should mainly aim at providing orientation without putting too many limits on the individual freedom of the women.⁵

Equal opportunity policy

Male violence against women is a manifestation of the historically unequal power relations between men and women and a reflection of existing gender relationships in society and in politics. It is therefore a social and political problem deeply rooted in our societies. Multi-agency cooperation should contribute to creating awareness of the social, historical, cultural and political framework that fosters male violence.

It should also give women and children a voice to express their needs and to speak out against violence. Gender equality and gender mainstreaming should also be important goals within every agency that add to its credibility as an organisation respecting and supporting women's rights.

⁵ For models of ways to establish democratic structures in women's shelters, see WAVE 2004.



CHAPTER 05

5. A NETWORK OF WOMEN'S SERVICES AS A PREREQUISITE FOR EFFECTIVE MULTI-AGENCY COOPERATION

5.1. COMPREHENSIVE SERVICES FOR VICTIMS AS AN ESSENTIAL PRE-CONDITION FOR EFFECTIVE MULTI-AGENCY COOPERATION

The most important prerequisite for multi-agency cooperation is the existence of adequate services for survivors of violence in all regions of the country. To take an example from a different field, a region might have a very effective ambulance service, but if there is no hospital to take ill or injured people to, the goal of providing adequate medical treatment will not be achieved. Similarly, in domestic violence emergency cases, the police will fail to ensure the safety of women and children in acute danger if there is no women's shelter in the region. If the police do not have enough patrol cars and staff to respond to a domestic violence emergency call, their help might come too late.

Adequate resources for all services and institutions involved in domestic violence cases are a prerequisite for successful interventions and effective cooperation. While most countries in the European Union provide comprehensive police services and health care for all their citizens (although their quality and effectiveness might differ and efforts are needed to further improve them), many EU countries still lack adequate and comprehensive services for victims of domestic violence. This represents a serious obstacle to effective interventions: Training hospital or emergency room staff to become aware of domestic violence may be of little use if there is no service to refer victims to.

To escape violent relationships is difficult and dangerous. Therefore, the provision of safe housing in women's shelters is a core task of every society. Laws for protection against violence are indispensable, but it should be noted that they do not provide a solution for every survivor. Experience with the Austrian Protection against Violence Act has shown that the number of women and children seeking help in women's shelters has not declined since the law was enacted. Thus, what is needed is both effective laws and safe housing (Logar 2005).

Nationwide coverage with women's shelters is an important indicator of good practice. According to the recommendations of a European Council expert group, one place in a women's shelter should be provided per 7,500 inhabitants, and the minimum standard should be one place per 10,000 inhabitants (Council of Europe 1997). Women's shelters should offer adequate and comprehensive help and meet safety standards, as violence does not stop at their door. The European network WAVE has developed quality standards for women's shelters (WAVE 2004).

One of the key criteria for good practice is facilitation of access to the help system. An important step in this direction is the establishment of national and regional helplines available to women round the clock. Calls should be free of charge, as experience has shown that women often do not even have money for making phone calls. Women's helplines provide a "soft" access to the help system, as women can remain anonymous and get free information about their rights and options.

Long-term support should be available for women who have been exposed to violence. In some cases, this support may have to continue for a year or more. Herman (1992) states that trauma can be remedied only after the woman has gained a feeling of being safe. After leaving a violent relationship, a woman may undergo psychological crises and depressions. It is therefore important to make long-term support and therapy available to women and children victims of violence.

As children are always affected by domestic violence, either directly or indirectly, they need unstinting care and support. If long-term damage is to be averted, all children must receive crisis support and therapy.

Immigrant women should have access to counselling and therapy in their mother tongue or in the language they speak best. Legislation should ensure that immigrant women are given residence permits independent of their husbands and that they receive work permits and social benefits. Women without legal residence status who are exposed to violence tend not to go to the police. They run the risk of forced repatriation, while the abuser will often get away without prosecution. Women in this situation should not be repatriated, but should be granted residence permits on humanitarian grounds instead.

To terminate violence, it is necessary to work with the abuser. Abuser programmes are one form of intervention; they need to be integrated into an overall intervention scheme and coupled with legal protection and support for the victim (Gondolf 2002; Logar/Rösemann/Zürcher 2002). The victim's needs and safety must be the first priority in perpetrator programmes, which must always operate in close cooperation with women's support services.

Every country/region should provide a comprehensive network of services for women and children victims of domestic violence.

5.2. GOOD PRACTICE INDICATORS IN THE PROVISION OF SERVICES FOR SURVIVORS OF DOMESTIC VIOLENCE

- At least one nationwide emergency helpline (depending on the size of the country) operating round the clock free of charge; counselling in several languages;
- Nationwide, an adequate number of places in women's shelters (minimum of one place per 10,000 inhabitants); round-the-clock service; free transport to shelters;
- Adequate safety standards in women's shelters;
- Nationwide network of counselling and intervention centres (one centre per 50,000 inhabitants);
- Proactive approach: If a case of violence becomes public, the victims must be actively contacted by the women's help organisation or intervention centre and offered help;
- Outreach services;
- Adequate help for specific groups of women: immigrant women, members of ethnic minorities, women with special needs;
- Comprehensive help for children;
- Women's services should be run by experienced, independent women's NGOs in partnership with State authorities;
- Adequate financing of women's services by the State;
- Services for victims should be free of charge.

Further measures

- Effective laws to prevent violence and to protect victims;
- All forms of violence punishable under the law;
- Right to free legal aid;
- Victim-friendly interventions in all agencies;
- Effective and victim-safe programmes for perpetrators in order to stop violence.

5.3. ALTERNATIVES TO VIOLENCE: SAFE HOMES AND A REAL CHANCE OF LEAVING THE VIOLENT PARTNER

In order to extricate oneself from a violent relationship, it is not enough to be offered counselling or to file a complaint. Survivors need practical support and immediate financial help. Service users of the Cardiff Women's Safety Unit in the UK, for example, are provided with concrete help: A service (Homesafe Agency) has been set up to make the homes of survivors of violence safer, for instance, by installing safety locks or organising police escorts for dangerous situations. Research has shown that survivors consider this kind of concrete help very important and that it enhances their safety and prevents further victimisation (Robinson 2005).

Furthermore, women and children victims of violence should be entitled to financial and social support in order to have a real chance of leaving the violent partner or father and of living a life free from violence. Women in women's shelters often cannot leave the shelter because of a lack of affordable housing.

Communities and national, regional and local governments should therefore provide comprehensive financial and social support to victims of domestic violence. This includes, among other things:

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| <ul style="list-style-type: none"> • Financial aid without lengthy administrative procedures; • Financial support for installing safety devices; • Efficient housing programmes; • Support in securing a sustainable living (education and training programmes, re-entry into the job market, etc.); • Free legal aid and support in applying for protection orders and ensuring the enforcement of claims in civil and criminal proceedings; • For immigrant women, a right of residence independent of their husbands, as well as the right to enter the labour market; • Visas granted on humanitarian grounds for survivors of violence without proper documentation; no deportation for victims of violence; • Political asylum for women facing violence in their home countries. |
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CHAPTER 06

6. BASIC STANDARDS FOR AGENCIES

Seeking help is not an easy task for victims of domestic violence. The German prevalence study on violence against women found that, among women who had suffered violence, a mere 11% had sought help outside the family and resorted to help services (Federal Ministry for Family Affairs, Senior Citizens, Women and Youth BMFSFJ 2004). In order to break the circle of violence, it is therefore of great importance: (a) to reach more victims and offer help actively, and (b) to increase the number of reports of incidents and to use legal measures to stop the violent behaviour and to prevent repeated offences.

Survivors do not always seek help from specialised agencies or disclose their problem when they do. They often come to agencies for various purposes, to health-care or social services, housing programmes, courts and others. Many agencies deal with victims of domestic violence every day without being aware of it. If they are aware of the situation and if their interventions are sensitive and victim-friendly, these agencies have a great potential to recognise the problem and to serve as a “door opener” to specialised services. Research has shown that routine inquiry was particularly effective in health care settings and in social care services (Hester/Westermarland 2005:viii). Appropriate training and good multi-agency relationships were of the utmost importance to enable safe disclosure and to provide further support for the women concerned.

Quality management in service provision

Guaranteeing quality services is a management task and cannot be relegated to the sole responsibility of the front-line staff. It requires continuous planning, implementation, evaluation and improvement processes and should be part of the quality-management system of every organisation (European Foundation for Quality Management 1999-2003). Agencies need to have clear guidelines and procedures to respond to the problem and to support survivors. Management must make sure that all staff members are adequately trained and familiar with the guidelines so that they are able to provide services of good quality.

Core agencies

“Core agencies” dealing with domestic violence on a daily basis, whose task it is to provide interventions or services (e.g., the police, the youth welfare office, prosecutor’s offices, civil and criminal courts) should of course have an even more elaborate policy on domestic violence, as well as clear guidelines for the best way to address the problem, support victims and stop the violence. As research has shown, agencies that have established specialised units and departments to tackle domestic violence and that tailor their interventions to the individual cases are more successful in preventing revictimisation and supporting survivors (Hester/Westermarland 2005; Vallely et al 2005; Humphreys et al 2005).

IMPORTANT STANDARDS FOR AGENCIES INCLUDE:

Awareness

- Every agency and institution that might be confronted with domestic violence (health-care services, general practitioners, hospitals, social services, housing services, schools) must be aware of the nature and level of domestic violence, of the importance of addressing the problem through the policy and practice of the agency and of the possible presence of the problem in cases handled by the agency.
- Agencies should also be aware that their own staff might be affected by domestic violence, either as victims or as perpetrators.
- Agencies should aim at creating a safe and supportive environment to encourage clients/victims to report domestic violence.
- Agencies should be accessible to and supportive of all clients; the needs of special groups such as ethnic and minority groups, clients with disabilities and others have to be taken into account.
- Posters and leaflets with the phone numbers of women's helplines and services should be displayed in waiting areas, demonstrating to clients that the agency is aware of the problem and giving clients the possibility of taking information material with them – for themselves or for women they know who might need help.
- Leaflets should also be available in ladies' rooms, since some victims do not dare to pick up information material in a public setting.

Mission statement, visions

- A clear mission statement denouncing all forms of violence against women and children should be part of every agency's written policy.
- Visions of a society in which mutual respect, equality and partnership determine the relationships between women and men, parents and children, and between people in general, should be the agency's guiding principle. It is important that all members and employees of the organisation be invited and encouraged to share these visions.
- Gender equality as well as respect for diversity and principles of non-discrimination should also be part of the quality guidelines.

Policy guidelines and standards

- The victims' safety must be the priority when dealing with domestic violence cases.
- All agencies should have clear guidelines and standards for dealing with domestic violence.
- Guidelines should exist in written form and all staff members should be familiar with them and with the procedures for implementing the guidelines in their everyday work.
- Guidelines on domestic violence should be part of the agency's general quality standards.
- The guidelines should provide that clients are to be informed about all procedures and interventions and the kind of help offered to them; clients' information should be treated as confidential and steps should be taken by mutual consent; exceptions can be made in cases of immediate danger or obligation to report.
- Risk assessment and safety planning should be a standard response (see also chapter 8).
- Victims' reports and injuries should be carefully documented and kept safely; if appropriate, pictures of injuries should be taken and all possible evidence gathered.

Case management, prevention of repeated victimisation and referral

- Victims of domestic violence need ongoing support; therefore, agencies should make sure they stay in touch with survivors and offer ongoing support or refer survivors to special agencies such as women's advocacy services that then take over the role of providing ongoing support.
- Agencies should take responsibility for coordinating with other agencies and not leave it to the client to connect agencies and to transmit information between them, e.g., information about risk factors.

- Good cooperation with referral agencies and clear procedures in dealing with them are important to make sure that victims/clients actually arrive where they want to go and to avoid frustration and disappointment; it might be helpful for a client if the agency takes the initiative of establishing contact with the service in question.
- Information-sharing with other agencies should have the purpose of enhancing the client's safety.
- In order to enable clients to trust the agency, they should not be forced to deal with different staff members every time they seek help (exception: emergency interventions).
- Therefore, case management should be the working method of choice; each client should have one staff member assigned to her support.

Safety for staff

- Safety should also be an important issue for staff members; safety planning in the agency should include routine procedures (i.e., what to do if the perpetrator shows up; what if a staff member is attacked), see appendix.
- Information and support should be available to staff members who are victims of domestic violence.
- Agencies should also have a procedure for what to do if a staff member turns out to be a perpetrator using domestic violence; it is highly problematic to have a person who is violent himself dealing with victims of domestic violence.

Training of staff

- All staff members who might be confronted with the problem must receive adequate and ongoing training (at least two days) on domestic violence.
- Training on domestic violence should be an integral part of the basic training for every profession.
- Core agencies (police, courts, youth welfare offices) should have special units and specialised staff who receive intensive training (at least two weeks) on domestic violence.

Managing safety and support for survivors

- It is the task of management to ensure the proper implementation, monitoring, evaluation and adaptation of guidelines.
- Adequate resources (time, rooms for confidential talks with victims, leaflets, information about agencies to refer victims to, etc.) need to be provided to enable staff to carry out their tasks effectively.
- Management should monitor and evaluate individual cases regularly and give feedback and support to staff.
- Core agencies that often deal with domestic violence should have special units and specialised officers /personnel.
- A person / department should be responsible for implementation of the policy (e.g., gender and anti-violence adviser).

Quality standards

- Quality standards for domestic violence cases should be defined by management in cooperation with internal and external experts on the issue of violence.
- Quality control and improvement: In order to achieve sustainable results and improvements in quality standards, concrete goals should be formulated for improving survival and interventions; indicators should be identified to make it possible to evaluate whether the goals have been reached and to reformulate them.
- Quality assurance: Regular evaluations should be carried out to monitor and improve quality standards.

Clients as stakeholders

- Clients' opinions on the quality of the service should be gathered regularly (i.e., through questionnaires, interviews, survivors' forums; see also chapter 11).
- Agencies should be open to feedback from clients, even if it is critical feedback, and should encourage and facilitate such feedback (i.e., through surveys or questionnaires).
- Clients should be informed to whom they can address complaints in case they are not satisfied with the service.

Networking and multi-agency cooperation

- Multi-agency cooperation with domestic violence forums and round tables should be an integral part of the work of every agency.
- Resources should be provided for multi-agency work in the form of work time, as well as of financial and material contributions.
- Senior management staff as well as front-line officers should participate in multi-agency initiatives.

Documentation and Evaluation

- Continuous collection of data and compilation of statistics are necessary to evaluate, further develop and improve the agencies' response to victims of domestic violence.
- Internal evaluation should be carried out regularly.
- External evaluation, safety audits and research are important and necessary strategies for developing and improving interventions and services.

Recommendations for core agencies

Core agencies such as the police, prosecutor's office, courts, youth welfare offices and women's services have greater responsibilities in protecting victims, preventing (further) violence and holding perpetrators accountable. Therefore, they need a more elaborate policy to fulfil their tasks, which may involve:

- Special domestic violence units under the police;
- Specialised prosecutor's offices and courts
- An effective legal base for interventions (e.g., barring order by the police, restraining orders, victims' rights in criminal proceedings);
- Comprehensive guidelines and instructions;
- Comprehensive training (at least two weeks);
- Monitoring by management of interventions;
- Quality standards and quality control;
- External evaluation and safety audits.

An agency seen from the point of view of the client/service user

A good exercise to reflect on the performance of your agency in providing services and interventions to survivors of domestic violence could be a mental experiment: Imagine you are a survivor of domestic violence seeking help in your own agency. Would you like what you encounter?. For more information on victim-friendly interventions (see appendix - Checklist first consultations).



CHAPTER 07

7. STANDARDS FOR SPECIFIC AGENCIES

As pointed out in the previous chapter, all agencies that might be approached by survivors of domestic violence should have basic standards for adequately responding to the problem. Agencies that are more involved and play a central role in the intervention system (women's advocacy services, health services, police, justice system, perpetrator programmes, etc.) need to develop specific standards in line with their respective missions and tasks. Agencies also need to work together with other institutions and organisations and coordinate their interventions and services for the benefit of their clients. Standards and guidelines for cooperation and coordinated responses can be found in chapters 14 and 15.

Standards and guidelines for good practice have been developed internationally in the last few years (Council of Europe 1997; Humphreys et al. 2000; Tayler Browne 2001; WAVE 2004; United Nations/Division for the Advancement of Women 2005; Hester/Westermarland 2005). Following are some recommendations for standards for specific agencies. It is not possible to cover all the agencies that might be involved in domestic violence interventions in this manual. Thus, the focus is on core agencies, which are most often involved and bear special responsibilities in protecting and supporting victims and preventing (further) violence.

7. 1. WOMEN'S ADVOCACY AND SUPPORT SERVICES

The kinds of services that are needed to provide comprehensive support to survivors of violence are set out in chapter 5 (Prerequisite to effective multi-agency cooperation). As described in previous chapters, women victims of violence and their children need advocacy and support in order to change their situation. Advocacy can mean different things - representing the interests of survivors, supporting and empowering them to secure their rights, and providing information and advice, as well as tailored, proactive and intensive support (Parmar/Sampson/Diamond 2005). Findings from evaluation and practice suggest that it is a combination of advocacy and tailored support, including emotional support, that has the most positive impact on women. This combination enables survivors to access legal remedies and resources, but also empowers them to "move on" with their lives and to succeed in living a violence-free life (Hester/Westermarland 2005).

Research also indicates that women survivors who received proactive, intensive, comprehensive support and practical assistance felt most satisfied. They were also most likely to report to the police and to pursue legal remedies (criminal and civil) leading to an outcome (Parmar/Sampson/Diamond 2005). Women's NGOs in many European countries have developed advocacy services tailored to the needs of the survivors of violence over the past decades. They have established guidelines and standards for victim-friendly services that avoid secondary traumatisation and aim at empowering survivors (WAVE 2002b; WAVE 2004).

Standards for good practice in women's advocacy provide:

- Support tailored to the individual needs of the victim;
- Relationships of trust and empathy;
- Comprehensive, intensive and, if needed, long-term support;
- Proactive support (maintaining contact with the survivor, visiting her if she is in a crisis situation, showing her that somebody cares and that she is not alone, etc.);
- Emotional support, understanding complex fears of the survivor;
- Ongoing risk assessment and safety planning together with the victim;
- Practical help and assistance (money, job, housing, safety devices, etc.);
- Comprehensive support concerning the children;
- Encouragement to survivors to reflect on their situation and also cautiously challenge attitudes and views that hinder them in leading an autonomous life;
- A balance between encouraging women to take (legal) action and not urging them into doing something they may not be ready to do;
- Empowerment of victims, strengthening them to live a life without violence;
- Respect for their decisions;
- Encouragement of participation by survivors in decision-making relating to services, democratic structures;
- Close and effective cooperation with other agencies in order to motivate them to support the victim.

The provision of advocacy to survivors of violence is a complex and demanding role. Therefore it is essential that advocates receive comprehensive and ongoing training. The often traumatic experience of survivors has an impact on the advocate, and the trauma may be transferred, causing stress and in extreme cases also depression and burnout. Supervision and emotional support and solidarity provided by a team are important to keep up the energy levels and good spirits of advocates so that they can go on supporting survivors. Survivors also support advocates and help them to keep up their good spirits by giving them positive feedback and valuing their support.

Services for immigrant and ethnic-minority women

Advocacy services also need to provide sensitive and adequate services to survivors from immigrant and ethnic-minority communities, taking their specific situations as well as issues of immigration and experiences of racism into account. Services should advertise in different languages and provide accessible multilingual services (Parmar/Sampson/Diamond 2005a).

Women with disabilities

Measures to assist and support women with disabilities include wheelchair-compatibility in women's refuges and counselling centres, information material tailored to the special needs of women with sight or hearing impairments, and specially trained support personnel for women with mental disabilities.

Standards for women's shelters and helplines

The above advocacy standards also apply to women's shelters and helplines. In addition, it is important to institute safety measures in women's shelters. Violent partners often try to find their wives and children and to

persuade or sometimes force them to return home. Therefore, it is very important that women's shelters be safe places, equipped with safety doors, bars and alarm systems.

Women's shelters should not be hierarchical institutions with strict norms and rules - the power of the husband should not be replaced by the power of the institution. All women's services should be organised in a democratic and empowering way and should invite and enable women to participate in decision-making processes. For instance, many women's shelters have weekly meetings where decisions are made about rules and issues concerning life in the shelter are discussed. The WAVE Network has developed standards and guidelines for setting up and running women's shelters and other services. The manual can be downloaded in six languages (English, German, Portuguese, Italian, Finnish and Hungarian) from the WAVE website (link see appendix).

The unsuitability of couple counselling and family therapy and mediation in violent relationships Couple counselling and family therapy and mediation are unsuitable approaches to dealing with a violent relationship because they take too little account of the threat to the victim and the imbalance of power between the perpetrator and the victim. Domestic violence against women is not a problem that occurs with the relationship, but is caused by the person practising the violence. Work on terminating the violence should therefore be confined to the perpetrator.

Role of women's advocacy services in multi-agency cooperation

Women's advocacy services are specialised in supporting victims of violence and thus represent a core service in violence prevention. Just as patients with special health problems need specialized doctors, victims of domestic violence need special support to cope with the problem, to protect themselves, to overcome the various negative consequences and to achieve the goal of living a life without violence. General services like social or health services have an important role in addressing the problem, providing initial information and encouraging victims to seek help, but they generally cannot themselves provide adequate support. Thus, women's advocacy services are central referral agencies for other services and need to be in place in every region (see chapter 5).

7. 2. HEALTH SERVICES

Domestic violence severely affects the physical and mental health and wellbeing of victims (Gloor/Meier 2004; World Health Organization 2002, 2005). A representative survey in Germany indicates that health services are often the first ones survivors of violence turn to (Federal Ministry for Family Affairs, Senior Citizens, Women and Youth BMFSFJ 2004). Victims also seek medical help for problems not related to the violence, for check-ups or routine contacts, for instance during pregnancy. Thus, many health services have a great potential for identifying the problem of domestic violence and initiating helpful interventions. This potential is not always used by health services because they lack awareness, professional skills for dealing with the problem and knowledge about referral agencies.

In seeking medical help and treatment, victims do not always disclose the reason for their injuries or health problems. Often shame and fear prevent them from talking about the abuse, and sometimes the violent partner accompanies them to make sure they keep silent. Health service staff may be insecure about addressing the problem, as may survivors as well. Sometimes survivors say later on that they had wished the doctor would ask them directly about the abuse. A British Home Office report for health professionals cites a survivor telling about her visit to her general practitioner:

"[I] told him I'd fallen. ... He didn't ask me about it. He didn't say anything more about it. I just said I fell and the look he gave was 'well, I don't think you have, but...' I remember sitting there and thinking 'quiz me, quiz me, ask me', and he never did. ... Because he didn't ask, I didn't tell." (Home Office 2004:1).

If there are injuries or other symptoms that might be related to abuse, health staff should ask about it directly in a sensitive, non-judgemental way, indicating that they want to provide help. Health professionals often do not dare to ask because they lack the skills and knowledge to help, but also because they think that victims do not want to be asked. However, research indicates that the vast majority of both those with experience of abuse and those who have not experienced it find being asked about abuse acceptable and rather expect health services to be interested in understanding and addressing the problem (Taket/Beringer/Irvine/Garfield 2004).

There is a lot of discussion in research and practice about what systems of inquiry should be used by health services regarding domestic violence. Taket et al. use two definitions that are useful:

Routine inquiry refers to asking women who are using the service direct questions about their experience, if any, of domestic violence, regardless of whether there are signs of abuse or whether violence is suspected.

Selective inquiry refers to asking women directly about their experiences, if any, of domestic violence where there are concerns or suspicions, including the presence of signs/symptoms.

List of possible signs/symptoms of domestic violence

The following is a non-exhaustive list of possible signs and symptoms of abuse from Taket (2004:2):

- Physical
- Stress-related ailments - headaches, irritable bowel syndrome;
- Sexually transmitted diseases (STD), vaginal infections or other frequent gynaecological problems;
- Miscarriages/history of miscarriages;
- Repeated termination of pregnancy/stillbirths;
- Premature labour;
- Low-birth-weight babies;
- Fractures of the foetus;
- Bruises on the body, particularly on the breasts and abdomen;
- Injuries to face, head or neck;
- Multiple injuries in different stages of healing;
- Burns – cigarette burns, rope burns;
- Hair loss, consistent with hair pulling;
- Bilateral injuries;
- Unexplained injuries, or those inconsistent with explanations;
- Unexplained “accidents” to children.

Behavioural

- Patient appears fearful, evasive, ashamed, embarrassed;
- Partner answers questions directed to woman;
- Use of alcohol and drugs (tranquillisers, etc.);
- Eating disorders;
- Frequent use of pain medication;
- Vague symptoms and conditions.

Psychological/emotional

- Depression/anxiety/panic attacks;
- Self-harm;
- Attempted suicide.

Taket (2004) recommends that selective inquiry should be routine practice in all health services. Primary health care and, for instance, maternity services should consider routine inquiry (research indicates that abuse increases during pregnancy).

Routine inquiry has several advantages:

- It gives all women basic information on what domestic violence is about (not only physical injuries) and conveys the message that it is unacceptable;
- It adds to awareness-raising and spreads information (women can pass on information to friends, neighbours and other women who might have the problem);
- It helps to reduce the stigma attached to abuse and the taboo surrounding the problem;
- It sends a clear message to the survivors that they are not the only ones who have this problem, that the abuse is unacceptable and that they need and deserve help.

Recommendations for health services

Staff in health services should:

- Recognize the signs and symptoms of abuse;
- Ensure privacy when talking and listening to a patient;
- Ask about abuse (routine inquiry or selective inquiry);
- Provide sensitive treatment for physical, psychological and emotional injuries, including possible mental health problems or problems of addiction resulting from the abuse;
- Offer support;
- Engage in danger assessment and safety planning (i.e., encourage a woman not to go back home with/to her abusive husband if she is in danger, and help her and her children find a safe place in a women's shelter);
- Thoroughly document injuries and other symptoms as well as the survivor's report; take photographs;
- Collect and secure evidence that might be required for forensic purposes;
- Ensure confidentiality; if this is not possible because, for example, there is a legal obligation to report injuries to the police, the patient should be informed of the fact;
- Provide patients with information about resources and help available to them, refer them and support them actively in referral (e.g., contact the shelter, let the patient talk to the shelter worker, etc.).

Recommendations for management of health services

- Provide clear guidelines and protocols on how to deal with domestic violence and how to support the patients concerned;
- Establish a system of inquiry; at least selective inquiry should be practised in all health services;
- Provide training for all health care staff.
(see also chapter 6)

Detailed good practice guidelines can be found in a handbook for health professionals published by the Department of Health in the United Kingdom (2005) and elsewhere.

Models of cooperation

Health services should work closely with women's support services and develop a clear and well functioning referral system.

Big health institutions like hospitals sometimes have departments or units that provide social and psychological support to patients and some even have units specialised for domestic violence.

Other models are general practitioners working with women's support services, not only by referring patients to these services, but also by providing the service directly in the practice, for instance once a week. This can be especially important in rural areas, where specialised services are often not available to victims of violence.

7. 3. YOUTH WELFARE AUTHORITIES, SOCIAL SERVICES AND OTHER AGENCIES FOR CHILDREN

As set out in previous chapters, both women and children are in many cases affected by domestic violence. A violent husband is often also violent towards the children and, even if the children are not directly exposed to violence, the violence against their mothers has to be defined as violence against the children, causing harm and fear and negatively influencing the children's development (Mullender et al. 2002; Jaffe/Lemon/Poisson 2003; Eriksson/Hester/Keskinen/Pringle 2005; Humphreys/Stanley 2006). As research and practice indicate, violence against children does not stop after the separation of the mother from the father; it may even increase. Thus, children need protection from further violence, advocacy and support during all the procedures they have to go through (legal procedures, child contact, etc.) as well as support and therapy to overcome the devastating experiences of trauma and to restore trust. Children should never be forced to have contact with the father who exposed them to violence; the child's safety and wellbeing has to be given priority over the right of the father to see the child.

The UN Convention on the Rights of the Child (1989) implies protection from violence for all children; the Convention also states that children have the right to have contact with both parents, which also includes the right not to want to have contact (otherwise it would not be a right but a duty for children). To be exposed to violence - directly or indirectly - makes children vulnerable; it makes them insecure, fearful and often terrified. Violent fathers disqualify themselves as fathers and have to prove that they have changed before being given contact to children again. Risk assessment and safety planning with the children and the mother should be standard responses of social services, youth welfare offices, child protection services and other services for children.

According to Mullender (2004:3), professionals working with children, including teachers, social workers, psychologists, doctors, etc., have an important role to play in revealing domestic violence and should be very sensitive in doing so.

They should:

- Find safe and confidential ways of asking children what is wrong when they notice any symptoms of abuse;
- Recognise violence at home as one of the common reasons for problems in children's lives;
- Give them a chance to talk;
- Believe what they say;
- Know what help is available to them and also to their mother and support them in getting help.

Youth welfare offices and social services or other agencies legally responsible for protecting children from domestic violence should have clear guidelines for supporting children and their mothers and making violent fathers/husbands accountable.

These guidelines should include the following:

- Safety for the children and their mother must have priority in all interventions;
- The relationship between the children and the non-violent parent/mother should be strengthened, since it is often the only security children exposed to domestic violence have; empowerment of the mother and empowerment of the children should therefore be parallel processes;

- Children should never be forced to see a father who has been violent towards them or towards their mother;
- Violent fathers/husbands should be held accountable and be obliged to stop their violent behaviour and to change, e.g., by attending a programme for violent men.

7. 4. POLICE

Over the past 20 years, the police in many European countries have become very active in the prevention of domestic violence. This development can also be seen in the new member States of the EU. The police are the agency that most often engages in multi-agency initiatives and is willing to introduce changes. However, the response of the police to domestic violence is not yet satisfactory in many countries and much work has still to be done. Victims of domestic violence still report on unhelpful and hostile police interventions they have experienced. They most often complain that the police did not take the violence seriously, that they saw it as a “domestic affair” and did not intervene, unless “blood was involved”. Victims who experience such “non-interventions” are not very likely to call the police again, or they call the police too late. This represents a serious obstacle to preventing crimes of domestic violence and helps the perpetrator to continue the violence without consequences. Therefore, the victims’ trust in the police as well as active interventions are essential factors for effective crime prevention in the field of domestic violence.

The police provides its services to all citizens in all regions at all times and its services are easily accessible to all through the emergency number (European emergency number 112). The most important role of the police consists in stopping the violence, protecting the victims and preventing further violent acts. In order to be able to carry out this role effectively, the police must have certain powers such as the power to enter a home immediately in case of an emergency, the power to arrest the perpetrator or to expel the violent partner from the home for a certain period of time (see model of cooperation in Austria and Germany in the appendix). Another important task of the police is to investigate violent acts thoroughly, to gather all possible evidence and to report to the prosecutor’s office.

The police need to have clear guidelines and procedures for carrying out their work. In order to enhance effectiveness, several countries have established specialised units or departments to deal with domestic violence. Protection from violence and effective investigations are tasks of management in the police force and have to be organised “top-down” in an effective way. Examples: the London Metropolitan Police adopted the strategy and guidelines “Enough is enough” (link see appendix)

The Association of Chief Police Officers (ACPO) in England has produced a statement, “Guidance on Investigating Domestic Violence”, which provides operational, tactical and strategic advice⁶.

According to the ACPO, the priorities of the police service in responding to domestic violence are:

- To protect the lives of both adults and children who are at risk as a result of domestic violence;
- To investigate all reports of domestic violence;
- To facilitate effective action against offenders so that they can be held accountable through the criminal justice system;
- To adopt a proactive multi-agency approach in preventing and reducing domestic violence (National Centre for Policing Excellence 2004:5).

The newest development in the field of policing is the application of risk assessment tools in domestic violence cases in order to identify victims most at risk for future harm and victims at risk of serious injury and homicide (see also Multi-Agency Risk Assessment Conferences - MARACS, in chapter 15).

⁶ www.acpo.police.uk

The London Metropolitan Police developed the SPECSS risk assessment model through a series of consultations with multi-agency partners based on the evidence from the London multi-agency murder reviews and serious sexual and physical assaults. It is a three-stage model which involves: 1) an initial response, 2) an assessment of risk, and 3) an intervention to manage the risk identified (Humphreys et al. 2005).

In Austria, the following elements of the Austrian Protection Against Violence Bill have proven to represent good practice in policing (see also appendix):

- All police rights and duties are clearly regulated by law (Police Security Bill);
- The police must react to emergency calls immediately; these calls have top priority;
- The police have the power and the obligation to enter an apartment, even against the husband's will;
- The protection and safety of the victims is the priority aim of the intervention;
- Eviction and barring is an effective instrument enabling the police to protect victims even before violence has occurred, and it should be in place;
- The implementation of barring orders is regulated in detail; the duration of the barring order is fixed and does not depend upon the decision of the individual police officer in each case;
- If the life, health or freedom of a person is threatened, the police must effect the eviction; there should be no scope for discretion;
- The police must monitor compliance with the barring order;
- The victim is relieved of the burden of having to consent to the measure;
- Victims and perpetrators have statutory rights to information, which must be fulfilled by the police;
- The cooperation of the police with the civil court, the intervention centres and the youth office is integrated into the implementation procedure, so it should not depend on the good will of individuals;
- The police are obliged to prosecute if a punishable act has already been committed (mandatory prosecution);
- Careful investigation and consideration of evidence as well as the detailed documentation of interventions are obligatory;
- Citizens have the right to file a complaint about police measures with an independent authority or court (Logar 2005).

7. 5. THE CRIMINAL JUSTICE SYSTEM

All victims and witnesses of violence should receive the best treatment possible from the criminal justice system (CJS). As pointed out in chapter 3, victims of domestic violence face special obstacles and difficulties in reporting the violence to the criminal justice system and participating in the criminal justice process. Shame, the taboo against reporting a family member or fear of retaliation can prevent survivors from reporting or from testifying in court. The dynamic of domestic violence has to be taken into account by the criminal justice system in order to enable it to be successful in prosecuting and punishing acts of domestic violence.

Victims who are provided with adequate and intensive support are more likely to cooperate with the criminal justice system than victims who feel alone and vulnerable (Hester/Westermarland 2005).

Criminal justice procedures and especially trials are stressful experiences for victims and there is a great danger of secondary traumatisation. Thus, the criminal justice system should provide for and implement procedures that are likely to reduce stress for victims.

Good practice in this respect includes the following:

- All forms of violence against women should be made punishable under criminal justice, including rape in marriage;
- Violent acts should not be subject to only minor punishment if they are committed in the family; on the contrary, this should count as an aggravating factor;
- The State, not the victims, should be responsible for bringing criminal charges and for initiating the prosecution;
- Violent acts against women should be effectively prosecuted, focusing on thorough investigations and taking of evidence;
- During the criminal procedure, measures should be taken for the protection of the victims and prevention of further violence (protective injunctions, obligation of the perpetrator to undergo anti-violence training, probation by court order, etc.);
- Victims should have the right to participate in criminal proceedings, to ask questions and bring evidence and to apply for damages in the course of a criminal or civil procedure;
- Victims should have the right to free legal counsel and assistance during criminal proceedings;
- Before, during and after courtroom hearings, special caution should be exercised in order to guarantee the safety of the victim; confrontation with the perpetrator should be avoided (e.g., parties should wait in separate rooms);
- Victims should have the right to be treated with special consideration, also when they give evidence (not in the presence of the perpetrator, via video recordings);
- Judges, public prosecutors and defense attorneys should receive training in the sensitive treatment of victims in order to avoid further traumatising;
- Victims should not be forced to testify several times; the procedure of giving testimony should be organized in a way that fulfils human rights standards of fair trial and makes sure that the victim has to testify only once;
- Victims should have the right to information regarding their rights in the criminal proceedings (EU Council framework decision);
- Courts and prosecution offices should set up special departments dealing with the issue of violence against women (Logar 2005).

7. 6. CIVIL COURTS

Laws that exist only on the statute books help nobody. They have to be enforced. If this does not happen, the question is why victims of violence are unable to invoke laws that are supposed to be there to protect them. Laws on protection from violence must go hand in hand with the establishment of victim support centres providing active support, and intervention centres coordinating action on behalf of the victim (see Federal Ministry for Family Affairs, Senior Citizens, Women and Youth BMFSF 2004; Humphreys et al. 2006; United Nations 2005; Council of Europe 2006).

The careful implementation of laws for protection against violence is an element of good practice which requires a variety of strategies. These include:

- Information and training should be provided to the greatest possible number of people in institutions and services who will deal with the implementation of the law;
- Training should not only refer to the legal aspects, but also to the philosophy behind the law, its aims and consequences for society;
- A top-down training system needs to be developed;
- Multipliers and key persons need to be employed as trainers;
- The general public needs to be informed.

It is important that effective civil law measures of protection be available to women who are victims of violence in the family, because not all victims seek police help.

Good practice elements are:

- Clearly regulated protective injunctions, protection for all women/persons living in families or similar settings;
- Implementation also in cases of psychological violence, terrorising or stalking;
- Comprehensive protection of the individual sphere (house, place of work, kindergarten, etc.) and prohibition against following or contacting the victim;
- Prompt access to legal measures, legal aid for victims;
- Prompt issuing of injunctions in case of danger (immediately, or within a few days);
- Effective implementation of protective injunctions – in Austria the police have the power to enforce the injunction;
- Close cooperation of the courts with the police and the help organizations.

7. 7. IMMIGRATION POLICY

The applicable legislation should ensure that migrant women are given residence permits independent of their husbands' and that they receive work permits and social benefits.

Women without legal residence status who are exposed to violence tend not to go to the police. They run the risk of forced repatriation, while the perpetrator will often get away without prosecution. Women in this situation should not be repatriated, but should be granted residence permits on humanitarian grounds.

7. 8. WORKING WITH PERPETRATORS

To put an end to the violence, it is necessary to work with the perpetrator. Perpetrator programmes are just one form of intervention; they need to be integrated into an overall intervention scheme and coupled with legal protection and support for the victim (Gondolf 2001, in Logar/Rösemann/Zürcher 2002).

The victim's needs and safety must be the first priority in perpetrator programmes, which must always operate in close cooperation with women's support services.

Examples:

Since 1999, the Men's Counselling Service and the Vienna Intervention Centre have been running a joint anti-violence training programme that complies with international standards⁷

RESPECT in the UK is an organisation promoting best practice amongst statutory and independent sector projects, and individual practitioners, trainers and consultants that work with perpetrators of domestic violence and their partners/ex-partners.

⁷ www.interventionsstelle-wien.at

RESPECT's philosophy:

- Domestic violence is unacceptable and must be challenged at all times;
- Men's violence against partners and ex-partners is largely about the abuse of power and control in the context of male dominance;
- Violence within same-sex relationships or by women against men is neither the same as—nor symmetrically opposite to—men's violence against women;
- Men are responsible for their use of violence;
- Men can change;
- We are part of a community response which needs to be consistent and integrated at all levels;
- Everyone affected by domestic violence should have access to support services;
- All work with perpetrators and victims of domestic violence must actively promote an alternative, positive and constructive model of human relationships;
- Practitioners working in the field of domestic violence should attempt to apply these principles to their own lives.

RESPECT aims at:

- Encouraging work that seeks to prevent domestic violence and abuse, in order to promote the increased safety and empowerment of women and children;
- Placing the safety of women and children at the forefront of all RESPECT members' work;
- Promoting the adequate provision of appropriate programmes for male perpetrators of domestic violence and associated support services for women and children;
- Promoting anti-oppressive practice among RESPECT members, thus providing a model of egalitarian working between genders, individuals and agencies;
- Promoting education, support and research amongst RESPECT members;
- Enabling networking, support and the sharing of information and skills among RESPECT members;
- Working alongside all relevant and interested statutory and voluntary sector groups and policy-making bodies to create a system that works in the best interests of:
 - Women and children who have experienced domestic violence,
 - Perpetrators seeking to change their attitudes, and Behaviour practitioners working in the field⁸

7. 9. SOCIAL SERVICES AND HOUSING

Abused women need financial assistance to enable them to find protection against violence and to separate from the perpetrator. When a woman goes to a refuge or the perpetrator is barred from the dwelling, she should receive prompt social assistance if she has little or no income of her own.

Local authorities should also provide accommodation for victims. Refuges must not become the "end of the line" just because women cannot find accommodation they can afford.

⁸ <http://www.changeweb.org.uk/respect.htm> (June 23, 2006)

7. 10. EMPLOYMENT PROGRAMMES AND EQUALITY MEASURES

Economic dependence and poverty put women at a higher risk of being subjected to violence. A range of qualification and educational programmes is needed to help reinforce women's independence. At the same time, education is an important factor in personal development, encouraging women as it does to understand their own situation and the connections with social conditions and thus enabling them to participate in the process of social change.

Both international bodies and women's NGOs look upon the historically manifested inequality between women and men as the root cause of violence. It is therefore right to assume that there will be gender-based violence as long as there is inequality between the sexes. Equality measures need to be implemented in a variety of contexts such as economic life (in particular the labour market). It is vital that women have an income of their own that enables them to live independently, also and especially when they have children.

7. 11. STANDARDS FOR MUNICIPALITIES AND GOVERNMENTS

A national action plan on violence against women is a minimum requirement. At the Fifth World Conference on Women, all States committed themselves to drawing up and implementing action plans to promote the interests of women and combat discrimination (see United Nations 1996). A national action plan serves as an indicator of the political priority accorded the issue.

Good practice indicators for municipalities and governments include:

- Clearly defined responsibilities and competencies in the field of violence against women, in the government and at the national, regional and community administration levels;
- Special departments equipped with adequate human and financial resources in all the relevant ministries and administrative units (gender mainstreaming), coordinating departments;
- A national action plan for the elimination of violence against women, and provision of financial means for its implementation;
- Ongoing implementation, evaluation and adaptation of the action plan;
- Close cooperation with civil society, especially women's NGOs;
- Sufficient means for women's shelters and other help organizations; effective social, psychological, legal and economic support for all women who have experienced violence and for their children;
- Enactment and implementation of effective legislation for protection against violence; legal protection and legal aid for the victims;
- Systematic collection of data on violence against women in all relevant areas;
- Continual awareness-raising through effective campaigns;
- Anti-discrimination measures for women in all social and political spheres, gender mainstreaming;
- Integration of human rights education into curricula and into the training of educators;
- Respect and implementation of international human rights standards.

7. 12. MAKING THE GRADE? AN EXAMPLE FOR EVALUATION FOR GOVERNMENT ACTIVITIES ON VIOLENCE AGAINST WOMEN

In the United Kingdom, more than 50 organisations joined together to form End Violence Against Women (EVAW). The coalition is calling on the UK Government to draw up and implement an integrated strategy to protect women from all forms of violence. The coalition includes Amnesty International UK, Women's Aid, Refuge, the Women's National Commission, the Trade Union Congress and many other organisations. The EVAW Coalition recognises that the Labour government has made some welcome progress in tackling violence against women, including the piloting of specialist domestic violence courts, introduction of new laws protecting girls from female genital mutilation, overhauling of the law on sexual offences and setting up of a specialist unit on forced marriage at the Foreign Office. But EVAW has also stated that much more needs to be done.

In November 2005, "Making the Grade: An independent analysis of Government violence against women's initiatives" was published by the Women's National Commission (WNC) on behalf of EVAW.

The report grades government activities and points to successes and challenges (link see appendix).

8. DANGER ASSESSMENT AND SAFETY PLANNING

8.1. DANGER ASSESSMENT

Victims of domestic violence are constantly at risk of revictimisation. They live in a close relationship with the perpetrator, and in many cases they are dependent on him. Perpetrators often have enormous influence on and power over victims, not only through violence and threats, but also through appeals to the victims' love and feeling of responsibility for the relationship and the family. Leaving an abusive relationship is by no means easy (see also chapter 3).

A literature review shows that:

- The simplest and most reliable risk-marker for domestic violence is that of previous assault, or repeat victimisation. The greater the frequency of previous assaults, the more likely it is that further assaults will occur.
- A second risk-marker is that of separation. Indeed, separation is the point at which many women who have been subjected to violence make contact with agencies (Walby/Myhill 2000).

Women and children who experience repeated violence are severely traumatised, and, for them, the first step towards recovering and moving on in life is to establish safety and to restore control (Herman 1992).

Coordinated community response is an important instrument and – if carried out adequately – an effective tool for providing protection and safety to victims of domestic violence (Shepard/Pence 1999). Some countries, such as the UK, have developed specialised services for high-risk victims like the multi-agency risk assessment conferences (MARACs) (see chapter 15 or model interventions like the Metropolitan Police Domestic Violence Risk Assessment Model) (Robinson 2005, Humphreys et al 2005).

Robinson (2005:6f) identified five key ways to increase the safety of women and children experiencing domestic violence:

- 1) **Ensuring ongoing communication between agencies, importance of information-sharing**
In order for the multi-agency network to operate effectively, each member must consistently be aware of what the other members are likely to do in response. Information-sharing reduces fragmentation of knowledge.

- 2) **Conducting risk assessment**
Agencies must engage with victims and help them to understand that their own perceptions of risk are vital and that if they fear for their safety they should not ignore that fear. The use of risk- assessment tools is essential and must lead to identifying safety needs and to meeting these needs.
- 3) **Providing advocacy to victims**
Access to resources and support serve as protective factors against continued abuse. Studies indicate that, as the number of supportive people in a survivor's life increases, so too do her options for protection and safety.
- 4) **Translating policy into action**
Shepard and Pence (1999) examined ways in which the effectiveness of multi-agency response can be improved and found that one key feature is the need to involve middle managers and front-line workers.
- 5) **Holding perpetrators to account**
If perpetrators are not held accountable and do not experience any consequences and sanctions for their violent acts, the likelihood of recidivism is high. On the other hand, there is a reduction in recidivism if there is interaction between successful prosecution and court-ordered anti-violence training (Shepard/Pence 1999; Gondolf 2001).

8.2. SAFETY PLANNING

Risk assessment and safety planning should be an integral part of service provision. Safety planning with survivors must be carried out continuously, rather than occasionally. Systematic risk assessment and safety planning using questionnaires or checklists have become standard in many women's support services (see appendix).

Risk assessment and safety provisions must be standard in the work of survivor support services and crime prevention and criminal justice agencies (police, prosecutor's offices, criminal courts, probation authorities, etc.).

Recommendations/standards

- The safety and security of victims must be central to all interventions and cooperation processes.
- Intervention and cooperation processes must be constantly monitored and evaluated in terms of their effectiveness in providing safety to victims.
- Every agency should have standards for safety of victims as part of its quality standards.
- Interventions that jeopardise the safety of victims must be avoided.
- Risk assessment and safety provisions must be standard in the work of survivor support services and crime prevention and criminal justice agencies (police, prosecutor's offices, criminal courts, etc.).
- In order to provide effective help to the victims of violence, agencies must also plan and secure safety standards for their own staff.

Checklist

This is a short checklist for examining the safety standards your agency is ensuring:

- Safety and security are an important goal in providing support for victims.
- All legal and statutory measures available are applied to increase safety for the victims
- Victims are safe in:
 - coming to,
 - staying at, and
 - leaving our agency.
- Risk assessment is a standard practice in our agency.
- Risk assessment is carried out using standardised tools.
- Safety planning with the victim is mandatory.

- Standardised checklists are used for safety planning.
- Safety planning is an ongoing task.
- We provide proactive support in safety planning and keep in touch with survivors to remain aware of their needs.
- We provide practical help and support, such as safety lock services, mobile phones, safety alarms
- We provide or arrange for personal security measures.
- The safety of staff is part of our agency's policy.

9. MULTI-AGENCY COOPERATION – THEORETICAL BACKGROUND

Since the late 1960s and early 1970s, women's activists taking a feminist approach have carried the struggle against violence against women and children forward in many countries. National governments as well as international bodies like the United Nations or the Council of Europe have taken up the issue. In several countries with a long tradition of services for women and children victims of violence, multi-agency cooperation has been developed since the 1990s, based on the fact that violence against women and children cuts across many areas and can only be eliminated if all the institutions dealing with the problem cooperate effectively (Shepard/Pence 1999; Hague/Malos/Dear 1996; Gloor/Meier/Baeriswyl/Büchler 2000; Seith 2003; Federal Ministry for Family Affairs, Senior Citizens, Women and Youth BMFSFJ 2004).

We have come a long way from treating violence as a private matter, with “no intervention” being the most common response by the police and justice system, to more holistic approaches, such as legally established intervention chains involving various agencies and connecting their responses to each other. This development is by no means linear or consistent, with former ways of reacting to violence against women and children still dominating in many countries and regions. This creates a very inhomogeneous situation between countries, but also within countries. Undoubtedly, the situation has improved a lot for many survivors, but by no means for all of them. Often they are faced with contradictory responses from agencies. For instance, they may experience one police intervention as helpful and the next one as destructive and marked by a blame-the-victim mentality.

In their recent research study on effective interventions and approaches, Hester and Westermarland state that, “it has been increasingly recognised in both policy and practice that domestic violence is a complex phenomenon requiring a multi-agency response. This response includes a range of advocacy, support, and engagement with the criminal and civil justice systems and with other voluntary and statutory sector agencies.... A narrowly focused, single intervention approach is unlikely to work in tackling domestic violence. The projects that were most successful in reducing repeat victimisation (that is, in stopping the ongoing violence from abusive male partners) combined intensive, pro-active, tailored and holistic advocacy and support with engagement with the criminal and civil justice processes. In addition, routine enquiry and primary prevention are also necessary for a comprehensive approach to tackling domestic violence” (Hester/Westermarland 2005:91).

Multi-agency approaches can be seen as instruments and strategies for ameliorating the quantity as well as the quality of services. They can be defined as projects that aim at coordinating and improving the response of statutory agencies, NGOs and communities to the problem of domestic violence. The goal is to address the problem as a whole by improving the response to victims, holding abusers accountable and engaging in awareness-raising activities and prevention campaigns.

In the UK, multi-agency programmes started in the early 1990s. Germany, Austria and other countries followed by introducing new laws, national action plans, intervention projects and intervention centres to implement new laws and new policies of coordinated response to domestic violence. The Domestic Abuse Intervention Program (DAIP) in Duluth, Minnesota, a coordinated community response to domestic violence that was developed in the beginning of the 1980s, served as a model for many multi-agency initiatives in Europe (Shepard/Pence 1999; Rösemann 1989).

Very different local, regional and national initiatives can be subsumed under the term multi-agency initiative, and there are no two initiatives that are exactly the same. Multi-agency projects are mostly grass-roots initiatives that have developed organically in their respective contexts. They vary considerably regarding their duration, consistency, objectives and structure. There is no “one model fits all” solution here. Models can serve as examples inspiring new initiatives, but they cannot simply be transferred from one context to another.

Accordingly, it is not the goal of this manual to show how multi-agency work should be done, but rather to present different models, to look at their advantages and potential disadvantages, and to examine which purposes they can serve and for which aims they are inappropriate.

Multi-agency initiatives are not automatically effective. In some cases, they are no more than an indication of good will with little, if any, practical results, or they remain mere “talking-shops”. Therefore, the authors of the manual aim at identifying and exploring key elements of successful and effective multi-agency cooperation as well as presenting good practice models and examples.

Some indicators of effective multi-agency approaches (Hague/Malos/Dear 1996; Humphreys et al. 2000; Logar 2005) are given below:

- Experts from women’s organisations play a central role.
- The participating institutions are willing and competent to change their own practices.
- Cooperation goes beyond mere talk: Concrete, binding objectives are formulated, and projects are planned, implemented and evaluated.
- Each institution contributes the human and financial resources that are necessary to implement plans and achieve the set goals.
- The multi-agency forum and the participating institutions also practice gender equality in their own spheres (gender mainstreaming).
- The multi-agency forum addresses the responsible actors at the political level to obtain the means required for the support of victims; if resources are lacking, even close cooperation by all the institutions involved will hardly contribute to the improvement of the victims’ situation.

Some tasks of multi-agency initiatives are:

- Monitoring domestic violence interventions and service;
- Identifying gaps in service and improving service;
- Coordinating service provision;
- Developing policies and guidelines;
- Initiating and organising training;
- Engaging in preventive and awareness-raising work in the community.

It is important to adopt guiding principles, clear aims and objectives as well as action plans to implement and evaluate the aims. More detailed information on these issues can be found in chapters 12 and 13.



CHAPTER 10

10. ACTORS INVOLVED

Ideally, multi-agency initiatives should involve actors from all agencies dealing with domestic violence that play a role in improving services and prevention. However, practice has shown that it is not easy to get all the actors to the same table. In many countries, the involvement of the justice system, especially the prosecutors' offices and criminal judges, has proven particularly difficult. Good practice examples in this field are specialised prosecutors or prosecutors' offices (specialised prosecutors' offices exist, for example, in Estonia, some parts of Germany and the UK) that are more likely to engage in multi-agency cooperation.

Activists from multi-agency initiatives have come to the conclusion that, in order to start a project that has a good chance of continuing for some time, it is not necessary to involve all the agencies from the beginning. On the contrary, too many participants can make it difficult to work in a goal-oriented way and to achieve concrete results.

Given that most initiatives suffer from a paucity of resources and cannot afford to establish a complex organisational structure, it is important to start small and grow slowly in line with increasing resources. The other important starting point is to act according to the motto: "Whoever is interested in participating in the initiative is the right person". That means you start with people from agencies that are committed to the issue and who are serious about wanting to improve their agency's practice. Research and practice indicate that multi-agency initiatives work effectively if they involve management representatives as well as front-line staff. It has also been shown that participants who are not committed to the cause and who only attend because they want to be present or who have been ordered to join can do more harm than good and block, slow down or even prevent progress.

Therefore, it may be advisable to start with a rather small group of committed members and enlarge the initiative slowly. Staff in agencies may change, which can work to the advantage or disadvantage of a multi-agency initiative: it can mean a big loss when an engaged member leaves the agency or the job, but personnel changes in an agency may also afford an opportunity to involve a more supportive person. As has already been stated, it can be very effective to involve people from management as well as practitioners who are experts regarding what actually happens in an agency's everyday practice.

SUMMARY

- Start small;
- Grow slowly in accordance with the resources available;
- Act according to the principle: "Whoever is committed to the cause is the right person";
- Seek to broaden the base and influence of the multi-agency initiative;
- Seek to involve members at both the management and the "grass-roots" levels.

10.1. WHICH AGENCIES SHOULD BE INVOLVED?

A multi-agency initiative should involve many different stakeholders, including representatives from statutory agencies as well as NGOs. The strong involvement of women's organisations is of particular importance, since they are often very experienced and intensively engaged in supporting victims and improving the response to the problem. They are the central or core agencies which should not be missing in any multi-agency initiative and should have a central coordinating task. It can also be important to involve agencies that play an important role in prevention and awareness-raising, as well as community departments and policy-makers.

Multi-agency initiatives work best at the local level, with agencies actually working together on a day-to-day basis.

It is also important to note that it is not necessary for all the actors to be involved at the same time. There can be different working groups as well as temporary projects relating to special issues which may involve agencies that are not permanent members of the multi-agency initiative. Thus, there can be permanent members that form a steering group and others that are involved as called for by the work programme.

10.2. STAKEHOLDERS OF MULTY-AGENCY INIATIVES

- Women's services (women's shelters, helplines, crisis or counselling centres, etc.);
- Services for immigrant and ethnic-minority women;
- Police;
- Youth welfare office;
- Social service department(s);
- Housing department, housing associations;
- Immigration department;
- Health services;
- General victim services;
- Lawyers;
- Other voluntary sector agencies (child-protection programmes, etc.);
- Civil court/judges, court personnel;
- Prosecutor's office;
- Criminal court/judges;
- Probation authority;
- Relevant local authority units (such as gender-equality units, community-safety units, etc.);
- Education departments;
- Women's and community organisations;
- Researchers and academics specialising in the field;
- Policy-makers;
- Occasionally: community leaders and members from different cultural, ethnic or religious communities;
- Women who have experienced violence, and their children.

Women victims of violence and their children are important stakeholders and should be of central importance in multi-agency initiatives (Hague/Mullender/Aris 2003). See also chapter 11.

If a multi-agency initiative is planning to carry out public awareness-raising activities and campaigns, it is also important to integrate other agencies and groups such as:

- Unions;
- Religious or culture-based organisations;
- Foundations;
- Grant-giving agencies;
- Companies engaged in corporate funding, and others.

In recent years, private companies have become increasingly involved in initiatives to combat violence against women and children, as sponsors of projects, but also in terms of raising awareness within the company itself and supporting their staff affected by domestic violence. Examples of such initiatives are The Corporate Alliance Against Domestic Violence in the UK (links see appendix).



CHAPTER 11

11. PARTICIPATION OF SURVIVORS

Women victims of violence are important stakeholders and should play a central role in multi-agency initiatives, since they are the ones who will in the end evaluate whether services and interventions have been helpful and effective. Unfortunately, “consumer involvement” is still underdeveloped in this field (Hague/Mullender/Aris 2003). Women who have experienced violence are rarely involved in multi-agency initiatives as experts in their own right, even though they may be involved as professionals.

The participation and involvement of survivors can be an empowering process and may serve several purposes: It is an important tool for improving services and has the potential to help survivors overcome their trauma and get connected to the world again by bringing their experience to bear and finding themselves valued as experts.

Unfortunately, reality often works in the opposite direction, and survivors experience secondary traumatisation and feel powerless as a result of interventions. Women and children victims of domestic violence are often not listened to or taken seriously, and in many cases they are stigmatised (Hague/Mullender/Aris 2003:80). Even professionals who have themselves suffered violence at some point in their lives may refrain from telling their stories after finding themselves marginalised and their influence diminished after disclosing the abuse they have suffered. Stigma, a concept developed by Goffman (1963), leads to the identity of the survivor being “reconstructed” and also “spoiled” by the social environment – for instance in the form of prejudice and stereotypes, such as, “she has a weak personality”, “she is a slave to the abuser”, “she must have provoked it”. Goffman explains how stigma affects an individual by cutting her off from society and from herself so that she ends up being a discredited person facing an unaccepting world. Goffman asserts further that, as stigmatised victims, we often perceive quite correctly that others do not really accept us and do not want to make contact with us on “equal grounds” (Goffman, cited after Hague/Mullender/Aris 2003:82).

This phenomenon may be the biggest obstacle to involving survivors of violence in policy processes and the reason why “consumer involvement” has remained so underdeveloped. We need to overcome this mechanism in order to avoid discrimination and the violation of survivors’ human rights with a view to providing quality services by taking into account the needs and interests of the survivors. One important step is to stop talking about the victims as “them”, and to start talking about “us”, as we all can be and most likely will be or have been, victims of violence at some point in our lives.

Modern quality-management concepts place the satisfaction of the consumer or client at the centre of the organisation’s goals, and to a growing extent new public-management approaches require local governments and policy-makers to consult with community members and interest groups. Consumer or user movements like self-help groups and interest groups of patients in the health-care field, are increasingly becoming factors in policy-making that have to be taken into account. Thus, agencies working in the field of violence prevention should strengthen their efforts to reflect the voices of survivors in their policy-making.

As has been stated, the experience of participating in the evaluation of services or in multi-agency policy-making initiatives can be greatly empowering for survivors. “Listening to abused women with dignity and respect and promoting their needs and views without judging them need to form the baseline of all strategies to develop survivor involvement, and are empowering in themselves” (Hague/Mullender/Aris 2003:83).

However, the way survivors are involved has to be carefully planned and considered. The danger of discriminating against survivors, of treating them as objects and making them feel small has to be taken into account, and such reactions have to be avoided, because they do more harm than good. Conditions where survivors feel safe, comfortable and respected are prerequisites for any survivor involvement.

Agencies as well as multi-agency initiatives should incorporate ways of involving survivors’ voices and should also plan the corresponding resources. Resources are needed for developing, implementing and evaluating processes of participation by survivors, but also for defraying at least the expenses of the participating women. Free transport, child-care and catering should be the minimal provisions. If possible, survivors should be paid for their contributions, especially if they contribute several times. Experts in multi-agency initiatives are also mostly paid for their work by their agency, so it should not automatically be assumed that survivor experts will contribute for free. Their input should be seen as expert work, not as “women telling their stories”, which would again discriminate against them.

It is also important to make sure that the diversity of women is recognised and that women from all backgrounds are involved in the consultation process, especially also women who might easily be excluded because of language barriers or disabilities or for other reasons. Resources should also be provided for interpretation and translation.

Agencies and multi-agency initiatives should avoid fitting in some sort of survivor involvement for merely cosmetic reasons (“we have to do it” or “it makes us look good to show that we have consulted the survivors”). As has been mentioned, clients’ involvement and feedback should be a part of every agency’s guidelines and every multi-agency initiative should plan safe and respectful methods of consumer/survivor participation as an integral part of its work (not as an “appendix”).

Hague, Mullender and Aris identify three elements of meaningful and effective consumer involvement that have to be paid attention to in consultation processes:

- The actual consultation and creative, sensitive ways of carrying it out, cognisant of equality and diversity issues;
- A mechanism for converting the result of the consultation into real action and policy change;
- A mechanism for reviewing this, for making sure it happens and for keeping those consulted apprised of outcomes.” (Hague/Mullender/Aris 2003:95).

These three steps should always be followed up to make sure the involvement of those concerned is not merely an alibi activity leading to dead ends and lacking impact, leaving women survivors disappointed and angry because their contribution does not matter at all.

It is very important to carefully consider methods of participation. They should not put additional pressure on the survivor or put her in a vulnerable position. Therefore, just inviting survivors to a multi-agency meeting where they are confronted with a big group of professionals is generally not such a good idea (unless the survivors are very strong women who want to attend).

Just to consult individual survivors might place a heavy burden on them and it is preferable to consult self-help groups or to support the founding of self-help groups or consultation groups. Women's services have a great potential for consulting women and should be given funding to develop and maintain processes of consulting and involving women survivors.

Multi-agency initiatives in the UK have the longest tradition of including survivors in policy-making. They have had good experience with establishing advisory and monitoring groups. Some of them are integrated into the work of the domestic violence forums and are called survivors' forums, e.g., the Phoenix Group in the Westminster Domestic Violence Forum in London⁹. Members of the Phoenix Group are actively involved in a subgroup of the Domestic Violence Forum. They contribute to the development of prevention packs or the design of training courses. A member of one group says:

"They (the survivor representatives) are there as a right and have an equal say with anyone else. They can raise any issue and will always be listened to. For example, we took up the anti-discrimination and "no men" policies from survivors' comments and the need for a helpline came from women and is being actually done now." (Survivor expert in: Hague/Mullender/Aris 2003:82).

SUMMARY

For survivor or user participation "to be an effective, viable and integrated part of service delivery, it needs to be taken seriously and properly resourced as an automatic part of funding strategy and of service and policy development, built into budgets and regarded as an essential part of the policy process." (Hague/Mullender/Aris 2003:103). The research work of Hague, Mullender and Aris on survivor involvement provides many important findings and recommendations.

Ways of involving survivors

Some methods and strategies for involving survivors in the improvement of service delivery and in multi-agency work are presented below. As stated above, women's services can have an important role to play in involving survivors in policy-making and multi-agency initiatives. This should be valued as an important part of improvement of the quality of services and should not be treated as something negligible that can be done quickly on the side. If the inclusion of survivors/clients in quality-development is taken seriously, this work has to be adequately resourced and made the centrepiece of service improvement. Women's services, which are often already overloaded with work, should not be expected to do this work in addition and without funding.

Recommendations for involving survivors

- Be aware that survivors of violence and users or ex-users of services are among the staff of agencies and multi-agency initiatives and value their experience and expertise.
- Work with self-help groups of survivors and invite them to cooperate as consultants to the multi-agency initiative.
- Support the setting up of self-help groups.
- Set up advisory or monitoring groups in women's shelters and other women's services.
- Set up advisory or monitoring groups as part of the multi-agency initiative (the difficulty being that it is not easy to set up such groups and to find survivors who would be willing to work in them for some time; a good solution could be to pay survivors for providing their expert knowledge).
- Organise processes to regularly consult survivor groups (for instance, by asking advisory or self-help groups for their feedback on drafting guidelines or information materials).
- Visit women's services (one or two members of the multi-agency forum could be invited to a meeting of survivors in a women's shelter or crisis centre to listen to the experiences, needs and recommendations of the survivors and to report back to the multi-agency initiative).

⁹ <http://www.westminsterdomesticviolenceforum.org.uk/> (June 27, 2006)

- Provide training for women who want to take part in participation processes.
- Consult special groups on special issues (e.g., groups of immigrant women).
- Organise processes to regularly integrate the expertise of survivors into the work of the multi-agency initiative and the policy development of agencies.
- Report back to the groups about the integration process and the changes resulting from their recommendations.
- Regularly inform advisory and self-help groups about progress and new developments in connection with the multi-agency initiative.
- Discuss the work of the multi-agency initiative at regular meetings of women and children in women's shelters and other women's services.
- Hire professionals who are survivors of violence as coordinators of multi-agency initiatives.

Further ways of involving survivors

- Survivors should be included in all of agencies' evaluation processes.
- Questionnaires and feedback sheets should be regularly used as instruments to evaluate the clients' satisfaction with the agency's service (part of quality management); the clients' anonymity must be guaranteed in such processes.
- A new way of seeking the opinions of survivors is via the Internet¹⁰; Online discussions with women and also with children or young people can be a good way of learning about their experiences and can make it easier for survivors in rural areas to get involved; safety issues have to be taken into account here as well (the abuser can check e-mails and website use, so websites have to give warnings and instructions for blocking information).
- The results of inquiries and consultations must be integrated into the agency's policy-making.

Involvement in research and evaluation

- Service users should also be invited to participate in research as individuals or in focus groups.
- Research should be carried out by experienced researchers or research institutes that are sensitive to victims and to issues of safety and diversity.
- Focus groups are defined as groups of survivors who come together to give their expert opinion, e.g., for a research project or in the framework of a consultation process in the local community; the members of such a group do not necessarily know each other.
- It is important also to set up specialised focus groups, for example, for ethnic-minority women or women with disabilities.
- Focus groups require the participation of skilled experts who can also give support to the survivors.
- Safety aspects must be taken into account, as must the provision of child-care facilities, the provision of language interpreters and the defrayal of expenses.

Supporting victims' rights

- Survivors should have access to and information about ombudspersons where they can register complaints and be sure they will be taken seriously.
- Women's and victims' rights advocates should empower women to register complaints (to national or international courts) about interventions by State authorities that violate their rights, in order to demand compensation and justice.

¹⁰ The Internet is also increasingly used to provide information to women and children victims of domestic violence. See for instance the Women's Aid England website "TheHideout" for children: <http://www.thehideout.org.uk/>



CHAPTER 12

12. ELEMENTS OF EFFECTIVE MULTI-AGENCY COOPERATION

Multi-agency cooperation is a complex and challenging endeavour. As stated before, multi-agency initiatives take very different forms and no two initiatives are the same. Every initiative has to develop its own structure and identity. However, it is useful to learn from experience and to avoid pitfalls. There are some central elements in multi-agency work that should be considered in order for it to be successful and effective.

12.1. IMPORTANCE OF DEFINITIONS

In order to be able to tackle violence against women and children, it is important to agree on a common definition (even if it is not the definition each individual agency uses). Definitions should acknowledge diversity and the gendered nature of domestic violence. Most multi-agency initiatives acknowledge that domestic violence is a gendered problem, that the majority of the victims are women and children, and that the majority of the abusers are male partners and fathers.

“Violence against women is a manifestation of the historically unequal power relations between men and women, which have led to domination over and discrimination against women by men and to the prevention of women’s full advancement,” states the UN Declaration on the Elimination of Violence against Women (1993). If the historical and gender-specific origins of violence against women are not adequately taken into account, measures to prevent violence tend to be insufficient.

Some examples of definitions:

Definitions from the UN Declaration on the Elimination of Violence against Women, 1993

“The term “violence against women” means any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life.

Violence against women shall be understood to encompass, but not be limited to, the following:

- a) Physical, sexual and psychological violence occurring in the family, including battering, sexual abuse of female children in the household, dowry-related violence, marital rape, female genital mutilation and other traditional practices harmful to women, non-spousal violence and violence related to exploitation;

- b) Physical, sexual and psychological violence occurring within the general community, including rape, sexual abuse, sexual harassment and intimidation at work, in educational institutions and elsewhere, trafficking in women and forced prostitution;
- c) Physical, sexual and psychological violence perpetrated or condoned by the State, wherever it occurs.

Women are entitled to the equal enjoyment and protection of all human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other field.”

Definition uses by the Bath and North Reast Somerset Housing and Social Services

Domestic violence typically involves a pattern of physical, sexual and emotional abuse and intimidation which escalates in frequency and severity over time. It can be understood as the misuse of power and the exercise of control by one partner over the other in an intimate relationship, usually by a man over a women, occasionally by a woman over a men (though without the same pattern of societal collusion), and also occurring amongst same-sex couples. It has profound consequences in the lives of individuals, families and communities.

(Definition by Mullender and Humphreys 1998, quote from Humphreys at al 2000:25)

12.2. VISIONS AND LONG-TERM GOALS

It is important that agencies as well as multi-agency initiatives develop a joint vision. Visions can be defined as long-term goals, as ideals that an initiative wants to see realised, as “a dream we dream together”. A joint vision is an important driving force of multi-agency initiatives which generates the energy to carry on and to overcome obstacles and challenges.

A leading vision in the field of violence prevention could be the vision of a world of equality and respect for diversity, a world where women and men, parents and children and all family members live together as equals with equal rights, where partnership and respect for the autonomy of the individual, as well as for the importance of caring for each other, determine the relationships between people in families and in society.

In order to build an active, dynamic and successful multi-agency initiative, it is essential that all members be inspired by the joint vision and committed to working towards it (the same principle holds true for all organisations and initiatives). The development of joint visions is also an important part of the identity building and mission statements that are often included in an organisation’s corporate identity and written policy.

Another vision and a more short-term goal for a multi-agency initiative on domestic violence could be to draw a picture of how society should preferably deal with the problem of violence against women and children, and what coordinated interventions would ideally look like. Multi-agency initiatives should engage in a vision-seeking process, for instance, by doing a joint exercise based on a case study with the goal of finding a common vision of an ideal intervention system (see appendix, exercises). It might be difficult in the exercise to let creativity and imagination lead the process, and not to get “hung up” on the limitations of reality. It is important to use our creativity in order to find new and innovative ways of dealing with problems. We cannot make things happen that we cannot even think about and create in our imagination! In short: “The visions of yesterday are the reality of today”.

12.3. PRINCIPLES OF COOPERATION

It is also important to define some common principles of cooperation in multi-agency work. Together with the visions, these principles embody the philosophy of the initiative and provide orientation for the actors in the initiative as well as for the survivors and the public:

Examples of principles in multi-agency initiatives:

- Violence is never a private matter, but always a public concern; therefore, violence in the so-called “private sphere” should not be treated as less severe or less serious than other forms of violence.
- Victims are never responsible for the violence they have suffered; there is no excuse for violence; agencies must refrain from any form of victim-blaming.
- The safety of the victims/clients is the priority of all coordinated interventions.
- Victims have the right to adequate support and assistance from every agency involved.
- Agencies must refrain from any form of victim-blaming and discrimination.
- Abusive behaviour must be stopped and perpetrators must be held accountable.

Other important principles for supporting survivors of violence can be found in chapter 4.

12.4. GOALS AND TASKS OF MULTI-AGENCY INITIATIVES

Besides visions, every multi-agency initiative needs more down-to-earth and concrete goals that can actually be achieved during the lifetime of the project.

Each multi-agency initiative has to develop its own agenda and frame the task to be carried out. At the same time, multi-agency initiatives should refrain from duplicating work others have already done or started, but should rather join existing initiatives and contribute to them. The expertise of women’s services providing support to survivors of violence should be respected and highly valued and should form the basis for multi-agency initiatives, since these services often have the most profound knowledge of the problems, the situation and needs of survivors.

Hague and Malos (1996) identify the following tasks as common for multi-agency initiatives:

- Monitoring domestic violence services, identifying gaps in service and attempting to fill these gaps;
- Coordinating service provision;
- Improving practice by developing domestic violence strategies, policies and practice guidelines;
- Initiating and carrying out domestic violence training;
- Engaging in preventive, educational and awareness-raising work (including developing perpetrators’ programmes, public-education campaigns, education packs for schools, etc).

Goals and tasks in multi-agency work

Goals and tasks in the different areas may include:

Goals in violence prevention

- The most important goal of multi-agency initiatives should always be to improve the safety and protection of survivors.
- It is a well known fact that domestic violence is under-reported; thus an important goal of multi-agency cooperation should be to increase the number of reports of cases of violence.
- Violence against women and children is not only under-reported, but also under-recorded; therefore, it should be the goal of multi-agency initiatives to improve and to unify the documentation and data-collection systems of agencies.
- Victims of domestic violence often hesitate to seek help because of shame, fear of retaliation, fear of unwanted consequences or bad past experiences in seeking help; thus, an important goal of cooperation could be to reach more women and children and to offer them help.
- Perpetrators of domestic violence are rarely held accountable; an important goal of multi-agency cooperation should therefore be to increase the number of prosecutions, convictions and court orders requiring abusers to receive treatment.

Monitoring services, identifying gaps in services, attempting to fill the gaps

- Conducting or initiating local research projects to identify the needs of victims of domestic violence;
- Attending to the needs of specific groups (victims from immigrant and ethnic-minority communities, victims with disabilities, etc.);
- Mapping service provision;
- Identifying good-practice models;
- Identifying (quantitative and qualitative) gaps in service provision;
- Implementing projects to fill the gaps in service provision and setting up new services.

Coordinating service provision for survivors

- Improving access to services;
- Producing information material (leaflets, directories, Internet sites, etc.);
- Linking services;
- Improving referrals and cooperation between agencies;
- Monitoring and improving referral practices;
- Organising multi-agency conferences and training courses.

Developing policies and practice guidelines

- Formulating good-practice guidelines for multi-agency cooperation;
- Improving safety standards in service provision;
- Assisting individual agencies in developing their own policies and practice guidelines.

Training

- Mapping the training situation of different agencies;
- Avoiding duplication of effort by learning from agencies with experience in organising training courses;
- Establishing a sub-group on training;
- Developing, adapting or, if possible, making use of existing concepts for domestic violence training;
- Making use of existing concepts or developing concepts for training trainers;
- Organising train-the-trainer seminars for experts from different agencies;
- Assisting agencies in developing and carrying out a comprehensive plan for education and training at all levels;

- Targeting training courses at specific groups, e.g., front-line staff, management staff;
- Including awareness of domestic violence as well as policy guidelines in the training;
- Consulting with survivors of domestic violence and including their needs in the training concept;
- Making sure that training is sensitive to cultural, race, class, disability and gender issues (which is not to say that violence can ever be justified on the grounds of culture or religion!);
- Establishing a good base for ongoing interdisciplinary training, including financial resources;
- Engaging in ongoing evaluation of training courses.

Preventive work and awareness-raising

- Producing leaflets and information packages of booklets for survivors of domestic violence, focusing on specific groups;
- Planning and running local campaigns by learning from existing campaigns like the Zero-Tolerance Campaign in Scotland/UK (link see appendix);
- Participating in the worldwide campaign “16 days of activism against gender violence” (link see appendix);
- Showing exhibitions focusing on violence against women and children;
- Working with youth services and schools, and other activities.



CHAPTER 13

13. THE PROCESS OF COOPERATION – STEPS TO BE TAKEN

As pointed out in other chapters, multi-agency cooperation can take many forms, from information networking to institutionalised cooperation between agencies. The goal of multi-agency cooperation is to go beyond informal networking and to achieve more binding forms of cooperation that have the potential to introduce change and improve the response to survivors of violence. Multi-agency forums or round tables have been established in many countries at the local and regional levels. This chapter provides information on how to start a multi-agency initiative and on possible structures and working methods.

13.1. GETTING STARTED

Many multi-agency initiatives are initiated by women's NGOs providing services to survivors. This is not surprising, since the need and pressure to improve the response to violence against women and children is most urgent for agencies which in their daily work are confronted with the problems and concerns of survivors. Most women's NGOs lack resources even for providing basic services; multi-agency work is hardly funded, which makes any commitment in this field a "luxury". Still, many women's NGOs and other agencies do engage in various forms of cooperation, knowing that they have to work together in order to provide effective services to survivors. As pointed out in chapter 10, it is advisable for a multi-agency initiative to "start small" and to grow slowly, steadily aiming at broadening its tasks as well as its resources.

Ideas for getting started:

Preparations

- Collect and provide statistics on the prevalence of violence against women and children in your region, the number of survivors seeking help in your agency or other agencies, as well as information, research and reports about the status quo of service provision and responses to the problem.
- Identify policy papers, national or international documents, national action plans, etc. that oblige provincial, national and regional governments to provide effective services and protection to survivors of violence (see chapter 2) and use these documents as a policy base.

Mapping

- Sit down and think about agencies you are working with successfully already.

Meeting

Call a series of two or three meetings with the aim of setting up a multi-agency initiative in your town/region and invite the agencies you have identified as potential allies.

Form a small working group or steering group to coordinate the activities.

Establish an ongoing forum that meets regularly.

Actors involved (see chapter 10)

Possible initial activities

- Start with the aim of getting to know each other and sharing your experiences.
- Organise a multi-agency training event to deepen your knowledge about each other's work and experiences.
- Take time to find out what the participating agencies expect from multi-agency cooperation and what they are willing to contribute.
- Identify concrete themes for the first meetings.
- Identify gaps in services.
- Develop common visions and goals about the ideal response to violence against women and children (see chapter 12 and appendix).

13.2. LEADERSHIP

In order to form a successful and productive multi-agency initiative, it is necessary to assign the role of leadership and of coordination of the processes to specific agencies or persons. Some multi-agency initiatives decide for a rotating leadership; others designate one agency to assume this task or hire a person to take on the job. No matter how this task is organised, it is important that those agencies most involved in the field (women's refuges and women's services for survivors) take a leading role and that their expertise is acknowledged and valued. Many multi-agency initiatives have good experience with having experts from women's agencies, who are usually most engaged and have a comprehensive knowledge of the problem, taking the lead in coordinating and preparing the meetings. By having at least two persons participating in the meetings of the multi-agency initiative, the coordinating women's organisations solve the problem of having to fulfil two roles (chairing and contributing). This can put an additional burden on small women's agencies, but it has proven to be a successful model, according, for instance, to the local round-table initiatives in Gladbeck, Germany (see appendix).

13.3. DEVELOPMENT OF WORKING STRUCTURES**Minimum working structures**

A local multi-agency initiative such as a round table should have the following minimum working structures:

- A coordinating agency to prepare and chair the meetings;
- A mailing list;
- Invitations to meetings;
- Regular meetings (in the beginning, it might be necessary to meet more often, e.g., once a month; later on, when goals are developed and tasks shared out, it may suffice to meet every second month or quarterly. Frequency always depends on the projects that are to be carried out and the resources available);
- Commitment to regular participation for a given length of time;
- Development of concrete goals and steps to implement them;
- Keeping of minutes of all meetings and activities; distribution of the minutes;
- Evaluation procedures to monitor developments and progress.

Continuous reflection on the activities of the multi-agency initiative is important in order to prevent the initiative from becoming a “talking-shop” which only pretends to be active rather than achieving actual change.

Sub-groups

If the multi-agency initiative has a large number of participants, it may be difficult for them to work together in a fruitful way. The building of sub-groups can be a good method to stay productive and to avoid frustrations. Sub-groups can deal with specific issues (e.g., legal protection measures, the situation of immigrant women and violence, effects on children, perpetrator programmes) or they can serve to carry out specific tasks like organising a conference or a training course.

Steering group

As the multi-agency initiative grows and develops different “branches”, it might be necessary to form a steering group to coordinate actions. A steering group can serve as the managing body of a multi-agency initiative. Its tasks can be to coordinate policies and actions, to provide resources through fund-raising activities or to network with other initiatives, e.g., general crime-prevention initiatives. A steering group should not have too many participants, but it should also make sure agencies engaged in supporting special groups such as immigrants or ethnic-minority women are represented.

13.4. PRINCIPLES AND METHODS OF WORKING TOGETHER

Common ground, respect and dialogue

- It is important to identify the common ground, the base that all agree upon, and to broaden this base over time (see chapter 12).
- It is also important to identify points on which participants do not agree and to try to understand why; it is advisable to engage in a dialogue and to try to understand and discover the rationale for a certain position instead of just arguing.
- It is important to respect and value the opinions of agencies with long-term and expert experience in the field.
- Respectful, non-sexist and non-discriminatory attitudes and action should form the basis for working together.
- Based on a non-discriminatory policy, each agency’s position should be respected, even if it is not shared by all.

Decision-making

In order to move on from more informal networking and to be able to take action together, it is important to decide on a method of decision-making. Some points to consider are:

- Common decisions serve to build the identity of the multi-agency initiative.
- It is necessary to work out a practicable method of decision-making.
- Disparities in power between agencies (e.g., small vs. big, “poor” vs. “rich” agencies) should not be magnified by reflecting the power in the decision-making processes.
- The perspectives, interests and needs of survivors should always be the central concern in decision-making (see also chapter 11).
- It may be wise to strive for decisions by consensus if possible, in order to make sure all participants feel respected and integrated.
- However, multi-agency initiatives should also aim at reaching decisions that guarantee progress and improvement of the status quo rather than settling for the lowest common denominator; participants should not use their power to block progress and improvements.
- In order to build trust, it can be important to agree not to talk in public about the multi-agency initiative without the consent of all the participants (see appendix – Round Table Gladbeck).

13.5. GOALS, POLICIES AND ACTION PLANS

In order to move beyond the stage of identifying what should be done to improve the situation, it is necessary for a multi-agency initiative to identify concrete goals and to work towards putting them into practice (see chapter 12).

Action plans and written agreements, signed by all the participants, form a binding structure for a multi-agency initiative and represent an important base for sustainable work. An action plan should comprise long-term as well as short-term goals. Long-term goals are broader and describe the general development that should be achieved, like “Improving services for victims”. These more general goals should then be broken down into concrete goals and formulated in a manageable way (example: improving services for victims by supporting the setting up of one more women’s shelter in the region; the support comes from the activities that follow within the next three months).

In order to be able to monitor and evaluate whether goals have actually been attained, it is important to formulate them very clearly and also to define indicators suitable for measuring goals or determining whether they have been achieved. Indicators can be of a quantitative or a qualitative nature. For example, if the goal is to develop guidelines for cooperation between two agencies, the indicator for achievement of the goal will be that the guidelines exist in written form and are being implemented in the working procedures of both agencies by a certain date.

Of course it is important that goals always correspond to resources and that the necessary means (finance, infrastructure, personnel) are available to implement the goals. Careful and realistic planning is necessary to avoid failures and frustration, which in the worst case can lead to the collapse of a multi-agency initiative.

Agreed goals should be formulated in a written action plan or policy paper, coordinated with the heads of all the agencies involved and signed by all the participants. The action plan or policy paper should contain:

- A common definition of the problem;
- A mission statement and visions;
- An analysis of the status quo and the need for change;
- Overall goals and operational goals;
- Strategies and methods for achieving the goals and implementing policies;
- A timetable;
- Responsible agencies and persons;
- Resources allocated to carry out the tasks (personnel, money, materials, etc.);
- Evaluation procedures.

13.6. MAKING THE WORK VISIBLE

It is also important to make the work of the multi-agency initiative visible, i.e., by means of:

- Information sheets;
- Annual reports;
- Research and evaluation reports;
- Websites and other means.

13.7. EVALUATION

Goals and action plans need to be evaluated continuously. The cycle of quality control can serve as a model for integrated evaluation. A multi-agency initiative should take the time at least once a year to evaluate the work that has been done. It is advisable to turn to an external expert for this task (see chapter 17).

Cycle of goal-oriented actions

- Define overall goals;
- Analyse the situation and the status quo in the field in which you want to achieve changes; collect data and information;
- Define concrete, realistic goal(s);
- Develop an action plan to achieve the goals (strategies, methods, means);
- Define indicators to measure and determine whether the goals have been achieved;
- Analyse and evaluate the results (what worked and why, what did not work and why, what needs to be changed);
- Take action to make improvements and redefine goals.

13.8. RESOURCES

Multi-agency initiatives have proven to embody important strategies for improving services for survivors of violence and for taking measures to stop violence and prevent more effectively (Federal Ministry for Family Affairs, Senior Citizens, Women and Youth BMFSFJ 2004; Hester/Westermarland 2005), but success cannot be achieved without resources. Effective multi-agency work is not about coming together and talking “politely”; it is about working in a goal-oriented way, improving and changing structures and setting up new initiatives.

A lack of resources is the most common factor preventing a multi-agency initiative from developing beyond initial networking or compelling it to stop working. It is crucial for multi-agency initiatives to receive funding in order to be able to achieve sustainable results.

Every agency should allocate the necessary resources for participating actively in multi-agency cooperation and at least provide staff time and if possible also money for carrying out projects and tasks.

Small agencies like women’s services often have the problem that they are already understaffed and need all their resources to provide the services for survivors. The services of women’s NGOs are often run by unpaid volunteers. Therefore, it can be much more difficult for women’s agencies and also other small agencies to engage in multi-agency initiatives. This fact should be acknowledged and taken into account by means of fund-raising and allocation of financial means to those members of the multi-agency initiative that are poorly funded.

The minimum standard should be that local and regional authorities fund multi-agency initiatives on a regular basis, covering at least coordination work and specific projects. Agencies should provide funding by dedicating sufficient working time for the representatives and for the implementation of agreed goals and guidelines within the agencies. It has proven to be cost-effective and also effective in terms of violence prevention for big agencies like the police or the prosecutor's office to establish special units or departments to deal with domestic violence (Hester/Westermarland 2005; Vallely et al. 2005).

Small agencies like women's advocacy services should get additional funding by the local or regional government to avoid siphoning off resources for multi-agency work from service provision.

Multi-agency initiatives should not have to compete for funding with women's services either, as this would be counter-productive to the provision of adequate services to survivors and also to the spirit of cooperativeness. Funding should thus come from other sources.

Minimal standards for resourcing multi-agency initiatives:

- Local or regional governments should provide financial resources for at least one coordinator, including costs for operating the multi-agency initiative (office space, telephone costs, postage, etc.).
- Local or regional governments should also provide meeting rooms, e.g., in public buildings.
- Multi-agency work should be part of the task of the representatives of agencies and should be included in their written job descriptions.
- Big agencies like the police or the prosecutor's office should establish special units or departments to deal with domestic violence; these units or departments should have the task of engaging in multi-agency work.
- Agencies should also provide the necessary resources to implement goals and guidelines that have been developed by the multi-agency initiative in their everyday work.
- They should integrate multi-agency training into their personnel development strategies.



CHAPTER 14

14. MODELS OF MULTI-AGENCY COOPERATION

As pointed out previously, there is no one single model of multi-agency cooperation, since initiatives differ according to their local and regional context and the history of their origin. There are common characteristics that multi-agency initiatives share and differences that distinguish them from one another. In the USA, multi-agency initiatives, known as coordinated community response, evolved in the early 1980s (Shepard/Pence 1999). The term “multi-agency work” developed in the UK, the country with the longest tradition in this field in Europe. Hundreds of domestic violence forums dealing with violence in the family against women and their children have emerged over the last 10 or 15 years (Hague/Malos/Dear 1996; Humphreys et al 2002).

It is not a coincidence that European countries with a long history of women’s services like the UK or Germany are in the vanguard in providing these new kinds of services. It was the women’s movement against violence that lobbied for a stronger commitment and accountability of State authorities and agencies to end and prevent violence against women and children. Women’s NGOs as part of civil society have been an important actor in the struggle for violence-free families and societies, and governments should therefore value their long-term expertise, financially support their work and form partnerships with them.

In German-speaking countries (Austria, Germany, Switzerland) multi-agency initiatives have developed in the last five to ten years, mostly in the context of introducing new legal measures for the protection of victims of domestic violence. They are called *Interventionsprojekte* (intervention projects) or *Interventionsstellen* (intervention centres or intervention programmes) (Gloor/Meier/Baeriswyl/Büchler 2000; Dearing/Haller 2000; Seith 2003; Federal Ministry for Family Affairs, Senior Citizens, Women and Youth BMFSFJ 2004; Logar 2000, 2005). In Germany, intervention projects (often also called *runde Tische* - round tables) have goals and functions similar to those of the domestic violence forums in the UK, bringing representatives of different agencies together at one table with the goal of improving the provision of services and coordinating the services of different agencies.

Initiatives to improve and co-ordinate responses to domestic violence have led to the creation of new kinds of multi-agency services such as intervention centres, and many others reflect approaches in which the coordinated response of different agencies is institutionalised. What is characteristic of this new kind of services is that they seek to overcome the former approach of having different responses by different agencies parallel to one another (leaving it up to the survivor to connect them, often literally by walking from one service to the next and also by delivering information from one service to the next) by coordinating the interventions and building an intervention system or intervention chain that provides more effective protection and support to survivors of violence.

There is a shift in multi-agency work from networking between two or more agencies, to more established and goal-oriented multi-agency cooperation, like forums or round tables, and to coordinated multi-agency services for survivors of violence. This shift is not linear or consistent. Various forms of multi-agency initiatives at different stages can be found in one country, region or even city. Multi-agency work is a new field and it is very much in its infancy, with some countries in Europe looking back to 10 or 15 years of experience and others only now starting such initiatives. Another new development in multi-agency work is the tailoring of services to special groups of victims, e.g., victims belonging to ethnic minorities or immigrant communities or high-risk victims. In the UK, so-called MARACs (multi-agency risk-assessment conferences) have been established in some regions to support very high-risk victims. The initial results are promising: Research in the UK and Germany shows that survivors are more satisfied with coordinated services and services tailored to their specific needs, that the risk of revictimisation is lower and that abusers are held accountable more often (Robinson 2005; Vallely et al 2005; Hester/Westermarland 2005).

Another category of multi-agency initiatives takes the form of cooperating bodies that work at the policy-making level, nationally, regionally or in the context of municipalities. Such initiatives are numerous and they are most effective where they aim at reaching concrete goals like implementing a national action plan within a certain time frame, and when they have financial resources allocated to implementation of their goals.

14.1. MODELS OF COOPERATION

As described above, multi-agency initiatives can be classified in the following categories:

- Networking and multi-agency cooperation;
- Multi-agency cooperation at the policy-making level;
- Multi-agency services.

A short description of models of cooperation supplemented with examples from different countries¹¹ is given below. These models fall under the first and second of the categories of multi-agency cooperation listed above. Multi-agency services as the most institutionalised forms of cooperation, where agencies work together closely on a day-to-day basis, are described in the next chapter (see chapter 15).

NETWORKING

Networking is an informal way for agencies to work together. Networking often takes place in multi-agency working groups and can be the first step towards more institutionalised multi-agency cooperation.

It is a good strategy for:

- Getting to know each other;
- Exchanging ideas and information;
- Learning from and supporting each other;
- Identifying gaps or overlaps in services;
- Improving referrals and cooperation;
- Organising training and other activities.

¹¹ We regret that it has not been possible to cite all the good practice projects and models of multi-agency initiatives in this manual. We are trying to provide links to initiatives we have identified. (See appendix).

A danger of this form of co-operation is that the participants may never get past the first phase of exchanging ideas and learning from each other, and so the initiative becomes a “talking shop” and little or nothing is achieved to alleviate the actual problems. Multi-agency cooperation should not be an end in itself. Pseudo activities designed to give the impression something is being done in the field of prevention of domestic violence should be avoided. They are a waste of time and resources and can lead to stagnation and frustration. Therefore, it is important to regularly evaluate networking activities, to monitor their effectiveness and to improve multi-agency work. Networking can be the first step towards more institutionalised multi-agency cooperation (see chapter 13).

BILATERAL COOPERATION

Bilateral networking and co-operation can be a very fruitful and effective strategy; it can take the form of two agencies deciding to work together more closely or to develop coordinated support for survivors of domestic violence. Bilateral co-operation can be the first step taken before involving more agencies in networking activities, but it can also be a strategy parallel to multi-agency cooperation. Bilateral initiatives involve fewer people and they are less complex, which can be advantageous. Agencies might be more open to looking at their practices critically in the context of bilateral cooperation. Agencies often fear being “shamed and blamed” in a big forum, and that can lead to defensive reactions and block progress. Bilateral cooperation can help to build trust and to strengthen working relationships and thus also to form a good basis for multi-agency cooperation. It can provide a better forum than multi-agency meetings for discussing cases where something has gone wrong, evaluating them and learning from mistakes. Bilateral cooperation can also be a good instrument to support agencies in developing guidelines for victim support.

MULTI-AGENCY FORUMS OR ROUND TABLES

Multi-agency forums constitute a further step beyond networking and are characterised by more binding forms of cooperation. These initiatives usually develop goals and working programmes and seek to actually improve services for survivors of violence (see chapter 13).

MAINSTREAMING OF MULTI-AGENCY COOPERATION

Domestic violence forums also often engage in “mainstreaming” by cooperating with other related networks such as crime-prevention initiatives or community-safety projects. In this way, the issues of domestic violence and violence against women and children are brought to the attention of a wider community and initiatives can be more effective.

MULTI-AGENCY COOPERATION AT THE POLICY-MAKING AND GOVERNMENT LEVELS

Multi-agency cooperation also takes place at the policy-making level involving senior policy-makers from political and administrative bodies, institutions and agencies. These can constitute a consulting body for governments or a body to implement and evaluate policy. Political will and financial resources allocated to the implementation of goals are most important to make such initiatives effective, for they too can turn into “talking-shops”, render lip service or serve as a fig leaf when it comes to demonstrating progress in eliminating violence against women and children. Many national and regional governments present impressive progress reports and action plans to combat violence against women and children to national and international bodies, while unfortunately the situation for survivors of violence at the grass-roots level has often improved little. Women’s NGOs should always be integrated into policy-making initiatives, and survivors should be consulted on a regular basis when it comes to evaluating progress (see chapter 11).

Examples for different models of cooperation can be found in the appendix.



CHAPTER 15

15. COORDINATED COMMUNITY RESPONSE

Women who have suffered violence and need help often face the problem that intervention centres and help services are not coordinated. Each institution is specialised in a certain field, and the women concerned have to contact a number of different service providers. In many cases, the individual agencies are not connected and information is not routinely exchanged. Therefore, it is often the clients themselves who go on a “help-seeking pilgrimage” from one institution to the next and often also bear the burden of establishing the necessary linkages between service providers and delivering information. Thus, a central objective and task of multi-agency cooperation and services is to see to it that the individual institutions coordinate their interventions and ensure that victims have easy, non-bureaucratic access to help, and that this help is oriented towards the needs of the clients and their families and provided in an effective way. Research and practical experience have shown that services are often too complicated and difficult to access. This may prevent victims from getting help and it certainly discourages them. Adequate services for survivors are the key to effective interventions to prevent domestic violence.

Example: The police should inform survivors of violence that there are women’s shelters and other support services. However, it is not enough to simply say: “Turn to the shelter; here is the phone number.” What is needed is effective procedures for referrals to shelters. For instance, the police could offer to contact the shelter for the victim; they could inquire whether there are free places and where the shelter is located, and then take the woman and her children there.

15.1. GENERAL RECOMMENDATIONS FOR EFFECTIVE SERVICE PROVISION

SERVICES ORIENTED TOWARDS THE NEEDS OF CLIENTS AND THEIR FAMILIES

The services provided should be oriented towards clients’ needs to the greatest possible extent. For instance, this includes making different kinds of help service for women and their children available in one institution or close by.

Example: It has become a routine procedure for women’s shelters to have workers who provide care and support services for children.

MOBILE, PROACTIVE HELP

It is important that survivors be offered proactive help and outreach services. Survivors of violence should be able to choose whether they prefer to be visited at home, to get phone counselling or to go to an agency. It is also important to provide help proactively (see chapter 4).

Example: In Austria, the intervention agencies actively contact victims of violence after police interventions, and they continue to offer help of their own accord.

COORDINATED SERVICES: THE INTERVENTION CHAIN

Interventions by different agencies should be closely interlinked and form an intervention chain involving all the agencies concerned and ensuring that the intervention chain is not interrupted, since that can expose victims to further risk. The protection and safety of victims must be the primary goal of interventions and of the intervention chain. All interventions must be adequate and effective so as to actually help the victims and prevent repeated violence.

INTENSIVE PROGRAMMES FOR HIGH-RISK VICTIMS

As mentioned above, domestic violence against women may escalate and even lead to murder. Thus, it is most essential in any intervention to protect high-risk victims in an adequate way. This also includes programmes for victims who have repeatedly suffered violence.

COORDINATED SERVICE MANAGEMENT

Survivors of violence should not have to bear the additional burden of coordinating the help services they receive. Therefore, it is important that one agency be in charge of managing the entire range of help services provided and act in cooperation with the survivor. In recent years, a number of countries have established service centres for victims that both provide support and coordinate the interventions of all the institutions involved. The intervention projects in Germany and Austria as well as the Women's Safety Units in England are cases in point (Federal Ministry for Family Affairs, Senior Citizens, Women and Youth – BMFSFJ 2004; Robinson 2005; Hester/Westermarland 2005). Of course, the protection and safety of the victims must always be given priority.

Another principle of coordinated interventions should be that the first agency to which the woman in question has turned for help is responsible for coordinating all the help services to be called upon, until a particular agency takes over this responsibility and coordinates further steps.

Example: A woman turns to a hospital. She is injured and at first says that she has fallen down the stairs. However, the workers in the outpatient department are sensitised to domestic violence patterns, and as a result of their sensitivity and attention, the woman brings herself to tell them that her husband abused her. The hospital (ideally, there is a specialised social department in the hospital that is also responsible for domestic violence issues) takes over the management of this case and helps the woman until she is safe and, for instance, has moved to a women's shelter.

15.2. MODELS AND EXAMPLES OF MULTI-AGENCY SERVICES

INSTITUTIONALISED SERVICES – INTERVENTION CHAINS

New multi-agency initiatives have established close cooperation not only in terms of working together, but also in service provision. They have developed intervention chains to make sure that survivors of violence are provided with coordinated help and do not get lost in the shuffle between the various agencies.

In many countries, the police and women's services in particular have been important actors in developing a new model of institutionalised cooperation. Intervention chains function well and are effective, provided that all

the agencies are involved in the cooperation. “Missing links” can lead to frustrating and discouraging experiences for victims and constitute a danger to the safety of victims. If, for instance, the police are very highly sensitised regarding risk factors, but the prosecutor is not, a dangerous perpetrator might not be arrested because the ultimate decision lies with the prosecutor and the judge. Risk assessment and safety planning are important tasks of multi-agency cooperation. Evaluation and research also show that advocacy and support by women’s services are the most crucial factor in empowering survivors and encouraging them to take steps to free themselves from violence (Hester/Westermarland 2005).

Examples:

- In Austria, the implementation of the domestic violence act has been successful in establishing close cooperation between the police, civil courts and intervention centres run by women’s NGOs.
- Several provinces of Germany, Luxembourg and other countries have developed similar coordinated interventions.
- In Berlin, a mobile intervention team for the support of survivors has been established that can be called by the police to support them during their intervention (Federal Ministry for Family Affairs, Senior Citizens, Women and Youth BMFSFJ 2004).
- New coordinated services in the UK are, e.g., the new Specialist Domestic Violence Courts or the Specialist Prosecutor (Valley, et. al 2005; Hester/Westermarland 2005).

Examples: The staff of the Domestic Abuse Intervention Centre in Vienna support victims of violence by means of social and legal counselling, assistance in enforcing judicial protection orders and during court proceedings. They also see to it that the women concerned are granted welfare assistance promptly or may apply for a council flat immediately. These activities are coordinated with the corresponding institutions. For instance, it has been agreed with the welfare offices that the Intervention Centre will issue a report so that red tape is avoided to the greatest extent possible and the woman in question is granted welfare assistance within only one or two days. She may file an application for a council flat already at the offices the Intervention Centre. The application is submitted by e-mail, and will be processed quickly. The reply is also returned by e-mail.

SPECIAL MULTI-AGENCY SERVICES (MARACs)

In the past few years, multi-agency services have been further developed. Specialist support has been developed for high-risk victims in the UK in the form of multi-agency risk-assessment conferences (MARACs). The police identify victims with a high risk of repeat victimisation by applying risk-assessment instruments to all victims of domestic violence (see appendix). They are then offered special support by several different agencies, including practical help, such as the provision of safety locks. All the agencies involved meet regularly (fortnightly) to exchange information and to evaluate their support work. Evaluation research has shown that the majority (60%) of the high-risk victims supported by MARACs had not been revictimised after one year (Robinson 2004).

DOMESTIC VIOLENCE ONE STOP SHOPS

The support system should be organised in such a way that survivors do not have to contact many different agencies, but are provided with multi-agency support in one location. The “one-stop shop” approach is an innovative strategy in service provision and it is also becoming increasingly more important in public management. Many women’s services have developed this strategy, providing not only counselling, but also practical support, legal aid and support for the children.

Comprehensive services tailored to the needs of the individual victim can be seen as one of the future models for providing services to survivors of domestic violence.

Examples:

- The Bromley Domestic Violence One-Stop Shop in the UK offers different services at one location (link see appendix).
- The newly founded Family Justice Center in Brooklyn, New York, provides multiprofessional help to victims of domestic violence. It is one of 15 projects in the USA that have been established as best-practice models aimed at ensuring effective ways of preventing domestic violence. A central reason why this new approach has been pursued is that the traditional help system turned out to be too complicated or intricate for victims, and thus was a barrier that prevented or discouraged survivors from seeking help. The Family Justice Center provides a wide range of services, such as civil legal representation for immigration, housing and family court matters, children's activities, safety planning, assistance with filing police and probation reports, counselling, support groups, prosecution of domestic violence crimes, services for the elderly and/or disabled, access to shelter and housing, and language interpretation. A wide range of agencies and professions cooperate in order to provide this comprehensive set of services for survivors¹².

¹² <http://www.nyc.gov/html/ocdv/html/home/home.shtml> (June 23, 2006)



CHAPTER 16

16. PROBLEMS AND SOLUTIONS

Successful multi-agency cooperation is not an easy task. Organisations with different backgrounds, histories, structures and cultures come together in order to improve services for victims of domestic violence. Such differences can be fruitful and inspiring, but they can also constitute obstacles to effective cooperation, even to the point of causing cooperation to fail.

Some of the differences and sources of conflicts that might cause problems in multi-agency work are:

- Different approaches by State institutions (like the police or the justice system) and women's NGOs;
- Lack of acceptance and appreciation of the work of women's NGOs by State authorities;
- Prejudices of women's NGOs against the police and other criminal justice agencies;
- Power imbalances between agencies;
- Discrimination, sexist or racist attitudes, lack of equality;
- Cultural differences between organisations.

Some suggestions for overcoming obstacles in multi-agency cooperation are listed below.

16.1. OPENNESS, LISTENING TO AND LEARNING ABOUT EACH OTHER

In order to work together effectively, it is necessary to take time to get to know each other and to learn about each others' organisations. Prejudices and stereotyped views, such as "all feminists are man-haters" or "all policemen are violent" have to be questioned and overcome. An interest in learning about the other agencies involved, their tasks, goals and competences, their structures and cultures, as well as an openness and willingness to give information about one's own agency, are important first steps in multi-agency cooperation. Knowledge about all the agencies involved is also an important factor in avoiding unrealistic expectations, developing feasible goals and understanding and using the potential for change.

16.2. INFORMAL JOINT VENTURES

As stated above, multi-agency work involves participants from agencies with very different backgrounds and cultures. This can cause anxiety and stress, and often there is little or no time to talk about such things at official meetings. Therefore, it can be very productive not to meet in work settings only, but also to organise events where participants can communicate with each other in a more informal way. This can also be a very good method for getting rid of one's prejudices and discovering that the other person is a human being, too, with certain habits and preferences, strengths and weaknesses.

All of this can bring a multi-agency initiative closer together, and there are many examples and stories to support the value of such activities: NANE, a women's NGO from Hungary, tell how their cooperation with a department in the Ministry of Justice improved after a trip abroad together. Experts from a women's crisis centre in Estonia report having organised outings with members of partner agencies regularly, and Austrian experts from police and women's services who were planning seminars for the police at a train-the-trainer seminar experienced the miraculous effect of an evening out together, singing and enjoying a few drinks at a Viennese wine-tasting place.

16.3. EMPOWERMENT AND SUPPORT

Power imbalances between participating agencies can cause problems and frustration in multi-agency work and can constitute an obstacle to effective cooperation. At worst, they can lead to abuse of power, domination and more inequality. Therefore, it is necessary to deal very sensitively with issues of power and also with differences in resources and financial means. In many multi-agency initiatives, there are big differences between the participating agencies in terms of power and resources. Organisations in the voluntary sector, women's NGOs and other NGOs are mostly small organisations, often underfunded, which rely on volunteer work. State institutions like the police, prosecutor's offices, courts or health and social services might also suffer from lack of funding, but usually they are well established and do not have to fight for their funding every year. These differences have to be taken into account when allocating tasks and resources to agencies. Multi-agency initiatives should seek to balance out differences in power and resources as much as possible and to support women's NGOs in their efforts to obtain adequate funding of their services.

16.4. EQUALITY ISSUES

Discriminatory, sexist or racist attitudes and practices can also be obstacles to effective multi-agency initiatives and must be addressed and eliminated. Striving for equality between women and men and between people of different backgrounds, nationalities or ethnic origins should be a guiding principle of all organisations and multi-agency initiatives. Any discrimination on grounds of gender, class, ethnic origin, nationality, religion, sexual orientation, age or disability should be avoided and actively eliminated in service provision and also within the structure of the organisation. Equality issues should be taken into account in all the practices and structures of the multi-agency initiative. Agencies working with migrant- and ethnic-minority survivors of domestic violence should not be marginalised but be represented in all activities and at all levels of the multi-agency initiative. Active efforts should be invested in the integration of groups that are easily marginalised, e.g., by setting up monitoring or advisory groups for black women or women with disabilities and other groups of women. Venues should be fully accessible to all participants. Specific resources and information materials should be produced for women with special needs, and materials should be translated into different languages. Training on equality issues should be an integral part of training on domestic violence.

16.5. ACKNOWLEDGING THE IMPORTANT ROLE OF WOMEN'S SERVICES AND WOMEN'S NGOS

As stated previously, women's services and women's NGOs play an important role in providing advocacy and support for survivors of violence. In many countries, women's NGOs have brought the problem of violence against women and children to the attention of the public and have established services and initiatives to eliminate all forms of violence against women. International organisations like the United Nations and its various bodies, the Council of Europe, the World Health Organization, the European Union and many others have outlined the important role of women's NGOs as agents for change in numerous documents calling upon national governments to include experts from women's NGOs such as women's refuges, women's crisis centres,

women's aid organisations and others in policy-making processes and to value and financially support their work. In many countries where close cooperation between women's NGOs and State institutions has been developed (public-private partnerships), this has led to tangible results, e.g., in implementing effective legal measures to prevent violence. Survivors of violence often have more trust in committed private organisations like women's NGOs than in State institutions which are often more bureaucratic and controlling and sometimes even stigmatising. Therefore, women's NGOs are suitable partners for the State in providing services for victims of violence, and public-private partnerships should be further developed.

Unfortunately, women's NGOs are still not supported and integrated in all countries and all regions of the EU and Europe in general. In some of the new Member States of the EU, women's NGOs are seen more as "enemies" than as allies. Due to the historical lack of civil society organisations, their important role in bringing about democratic development and tackling social problems such as violence against women has not yet been recognised everywhere. Many women's NGOs get hardly any financial support for the public services they are providing, so they rely on private funding and often on volunteer work. This situation constitutes a major stumbling block to the effective fight against, and elimination of, domestic violence and urgently needs to be overcome. Governments should therefore value the work of independent women's NGOs and financially support them with the best possible means, and should invite them to participate in all policy-making processes.

16.6. COMMITMENT TO CHANGE

Organisations, especially if they are big, are complex entities functioning according to long-developed norms and structures. Change in organisations cannot be achieved easily, but takes time, persistence, good will from all levels, including the management level, and motivation. A common vision of a "better world" where survivors of domestic violence receive immediate and effective help, where perpetrators are held accountable and violence is on the decline, is an important source of motivation and energy for developing effective cooperation. Multi-agency cooperation is a discipline that is more akin to marathon-running than to sprinting; stamina, patience, long-term commitment and passion are needed to reach the goal of significantly reducing violence against women and children - a goal that can definitely not be reached by single players in society, but only by teams of committed agencies and persons.

17. EVALUATION AND SAFETY AUDITS

17.1. EVALUATION

Internal and external evaluations of multi-agency work are important instruments for constantly improving services for survivors of domestic violence. Internal evaluation can, for instance, be carried out by inviting an expert from outside for an evaluation seminar once a year.

External evaluation should be carried out by independent organisations such as universities or research institutes. Unfortunately, resources for external evaluations are often lacking, and it should be a goal of multi-agency initiatives to lobby for funding of research. Examples of good practice: The German Federal Ministry for Family Affairs, Senior Citizens, Women and Youth (BMFSFJ) has funded a series of evaluation research studies on new legal and social measures to prevent violence against women and children. The UK Home Office has a Science, Research and Statistics Unit that also deals with violence against women, which awards contracts to independent researchers (links see appendix).

17.2. SAFETY AUDITS

Ellen Pence, of Praxis International (link see appendix) has adapted a method of analysis known as institutional ethnography to the work of making legal and human service institutions more responsive to the needs of women and children. In the domestic violence field, the use of this method has become known as the Praxis Safety and Accountability Audit.

This type of audit uses a new method of interagency work that:

- Sidesteps many of the tensions between agencies encountered by earlier multi-agency reformers;
- Deepens the analysis of how a given problematic outcome occurs;
- Develops concrete structural solutions to some of the continued problems practitioners face when responding to these cases.

Overview

When a woman who is battered in her home dials 112 (the European emergency number) for help, she activates a complex institutional apparatus that is responsible for public safety. Within minutes, her call for help is translated in such a way that her experience becomes something that institutions can act upon. Her experience has become a domestic assault case.

Over the following 24 hours, up to a dozen individuals will act on her case. They hail from as many as five agencies and represent four levels of government. Over the next year, the number of agencies and people who work with her case - and therefore her safety - will more than double. Emergency-line operators, dispatchers, patrol officers, jailers, emergency-room doctors and nurses, detectives, prosecuting attorneys, law-enforcement victim specialists, prosecutor's victim specialists, child-protection service workers, civil-court judges, criminal-court judges, family-court judges, therapists, social workers, probation officers, shelter advocates, children's advocates, legal advocates, and support-group facilitators at the local shelter and others may all become involved in a chain of events activated by her original call for help.

In the past 20 years, many states or provinces and communities have initiated criminal and civil justice reforms in order to improve victim safety and offender accountability in that chain of events. Laws have been changed, policies written, procedures revised, and training conducted. Are communities now safer for victims of domestic violence and their children? Are offenders held accountable for violence and coercion? Have our good intentions and reforms helped or harmed?

The safety audit helps answer these questions from the standpoint of women victims of violence and their children. While the audit team is compelled to ask questions from the standpoint of women survivors of violence, the team itself is made up of practitioners in the system as well as domestic violence advocates and experts. The audit is a way of looking at how a woman's experience is retained or disappears in the handling of the case and whether or not safety and accountability are incorporated into the daily routines and practices of workers who act on the case. Because it is structured to reflect the actual experiences and job functions of those who intervene in domestic violence, it engages workers in the system in a practical, useful change process.

The audit is not a review of individual performance or effectiveness, but a close look at how workers are institutionally coordinated, both administratively and conceptually, to think about and act on cases. The audit team uncovers practices within and between systems that compromise safety. The team examines each processing point in the management of cases through interviews, observations, review of case files and an analysis of the institutional directives, forms, and rules that shape a worker's response. The team's analysis provides direction on specific changes in technology and resources, rules and regulations, administrative procedures, system linkages and training. The analysis also accounts for how, in attending to the safety of the victim, institutions handle diverse social-status factors that affect safety and accountability, for example, race, class, addiction, employment, literacy, immigration status, language and sexual orientation.

Identifying audit questions

Audits ask questions that begin with "How...". An audit will reveal how problematic outcomes are produced by institutional work routines and ways of doing business. Audits ask questions from the standpoint of victims of battering, but the gaze is not on individuals such as judges, police or social workers - nor even on the batterers or victims themselves. It is on institutional case management processes and the logic, thinking and assumptions that support them.

The audit begins with a question that highlights a gap between the lives of the people who are being processed and the institution mandated to respond to their situations.

For example:

- How are victims of battering made safer or more vulnerable by the actions of interveners?
- How does the criminal justice system intervene in cases where victims of battering use violence against their batterers? Does it respond in a way that decreases the vulnerability of both parties to future violence? How might current interventions make either party more vulnerable to ongoing attacks?
- How does victim-blaming occur in the policy or procedures of victim advocacy, child protection or sentencing?

By asking how something comes about, rather than looking at the individual who is doing it, we discover systemic problems and are able to come up with recommendations for longer-lasting change. More information about safety audits in the field of domestic violence can be found on the Website of Praxis International (link see appendix).

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APPENDIX

APPENDIX - EXERCISES

APPENDIX – GUIDELINES

APPENDIX – RISK ASSESSMENT AND SAFETY PLANNING

APPENDIX – MODELS AND EXAMPLES OF COOPERATION

APPENDIX – FURTHER RESOURCES AND LINKS

APPENDIX – CONTACT ADRESSES

APPENDIX - EXERCISES

The following exercises were developed during the Bridging Gaps project. They can serve as useful methods for establishing and improving multi-agency cooperation as well as for multi-agency training. They are designed to encourage and facilitate looking at the problem from the perspective of the survivor. To deliver good quality services implies to focus on the needs and interests of the clients/users of the service. The exercises should always be guided by a facilitator experienced in role-playing and group work.



VIOLENCE IN MY FAMILY – WHAT TO DO?

Method: group work
Time: approx. 30 minutes

Task:

You are living in a small town somewhere in Europe. Your sister and her family live nearby. Unfortunately, your sister's marriage is not going well; her husband abuses her. She is ashamed to talk about it, but everyone in the family knows. Her husband, your brother-in-law, is a member of the fire brigade in your municipality and everybody knows him.

On one occasion, there is an especially grave incident; your brother-in-law abuses your sister so badly that their 13-year-old son calls the police. The brother-in-law is evicted from the dwelling by the police, is reported and legal proceedings are started against him. Your sister is frightened about the consequences, and wants to stop the legal proceedings.

Discuss this situation regarding the following questions:

How would you react to this situation? How would you feel?

What would you do to support your sister?

What do you think would be helpful for your sister in this situation (from the side of the family)?

What would be unhelpful and make the situation more difficult for her?

What support would be helpful from outside?

What would not be helpful?

What kind of support would your sister's son need?

What should be done by whom and why?

APPENDIX - EXERCISES



THE CHAIN OF INTERVENTION – VISIONS OF IDEAL INTERVENTIONS TO SUPPORT VICTIMS AND TO PREVENT FURTHER VIOLENCE

Method: group work

Time: approx. 1 hour

Presentation: results on flip chart

Case study 1:

One evening, a young woman (Violeta) shows up at the police station in a small town in Europe. She is crying and can hardly speak. Her two children, 8 and 6 years old, are with her. She tells the police that her husband Marko beat her up yesterday evening and threatened to continue the beating when he comes back from work. Violeta has a black eye. She tells the police she has nowhere to go and does not know what to do.

Tasks

1. Vision:

Discuss the situation; develop ideal and coordinated measures to:

- a) Help and support Violeta and her two children; and
- b) Prevent further violent acts by Marko.

Write your ideas on a flip chart.

2. Future Planning:

Which of the measures identified exist in your country?

Do all victims have access to help?

Which measures are missing in your country?

What would you need most urgently (priorities)?

What can you do together in the near future to start to improve the services and interventions in your city/region/country?

APPENDIX - EXERCISES



THE CHAIN OF INTERVENTION – VISIONS OF IDEAL MULTI-AGENCY INTERVENTION TO SUPPORT VICTIMS AND TO PREVENT FURTHER VIOLENCE

Method: group work (two or three country representatives together)

Time: approx. 1 hour

Presentation: results on flip chart

Case study 2

One evening, Violeta arrives at the hospital with her husband Marko. Violeta is three months pregnant, bleeding has started and that's why she has come to the hospital for help. She has a black eye and tells the doctor she fell down the stairs. Violeta does not dare to tell the doctor that her husband forced her to have sex yesterday night and that he beat her because she did not want to have sex with him.

Violeta and Marko have two children, Rosa (8 years) and Peter (6 years), who have been left at home with a neighbour.

Tasks

1. Vision:

Discuss the situation; develop ideal and coordinated measures to:

- c) Help and support Violeta and her two children; and
- d) Prevent further violent acts by Marko.

Write your ideas on a flip chart.

2. Future Planning:

Which of the measures identified exist in your country?

Do all victims have access to help?

Which measures are missing in your country?

What would you need most urgently (priorities)?

What can you do together in the near future to start to improve the services and interventions in your city/region/country?

APPENDIX - EXERCISES



MY AGENCY SEEN THROUGH THE EYES OF MYSELF AS A SERVICE USER

Method: group work
Time: approx. 45 minutes

A good exercise for reflecting on your agency's performance in providing services and interventions to survivors of domestic violence could be the following mental exercise: Imagine you are a survivor of domestic violence seeking help in your own agency.

Questions to be answered:

- How would that be? What would you encounter?
- Is it easy to find the telephone number and the address? How does the first contact go?
- Is it easy to get an appointment?
- How do you find the address? Is it accessible to survivors with disabilities?
- How would you like the place?
- Who would open the door for you and how would the first encounter be?
- Is the place safe? Do you feel welcome?
- Do you have to wait, and if so, where?
- Can you bring the children; is there child care?
- Is there information material, posters, leaflets that indicate the agency is aware of the problem?
- Who talks to you first? What is the setting like?
- Is there interpretation or a native-speaking counsellor?
- Is there time and space for you, without disturbance?
- Can you talk to someone confidentially, without others listening?
- Does the person talking to you listen and try to understand without pressure and prejudices?
- What kind of help are you offered? How concrete is the help?
- Would you be able to develop trust in the agency? Why? Why not?
- Are you referred to other agencies? Is that satisfactory?
- Are you helped to make contact? Is the contact made for you?
- Would you be satisfied with the service in general? Why? Why not?

You can also develop other questions.

Results should be written down as a map of positive and negative points in service provision and should serve as an instrument to improve service provision.

APPENDIX - EXERCISES



VIOLENCE-FREE CITY

Method: group work, role-play

Time: approx. 50 – 60 minutes (preparation 20 – 30 minutes; role play ~ 30 minutes)

This exercise can serve as a preparation for multi-agency cooperation. It can be used by a group, i.e., a women's centre planning a round table in their town, to empathise with the different groups they are planning to involve. It can also be used in a multi-agency training event where the participants get a chance to "slip into the shoes of the other" in order to better understand each other as a prerequisite for finding common goals and solutions.

Situation

In the "violence-free" city, the round table on protection, provision, prevention" in relation to domestic violence is meeting for the first time. The women's shelter has prepared the first meeting and is chairing it together with the head of the city's equality department. The goal of the first meeting is to get to know each other and to discuss and define common goals for future co-operation.

The women's shelter has invited two women from a self-help group of survivors to the meeting. One woman has brought along her teenage daughter to translate for her.

Background

There is only one women's shelter with a small number of places in the town; the police have no legal means to expel a perpetrator; a civil law restraining order exists, but is hardly ever applied.

Participants in the round table/roles:

- 2 staff members of the women's shelter (NGO), 1 coach/observer;
- 2 women from the self-help group and one teenage daughter, 1 coach/observer;
- 1 head of the city's equality department;
- 1 member of the police force;
- 1 member of the youth/child welfare office;
- 1 family court judge/clerk;
- 1 prosecutor;
- 1 social welfare office staff member;
- 1 person from the mayor's office;
- 1 general coach/observer.

Total=15 persons

Preparation

The representatives of the women's shelter and the staff member of the equality department prepare the role-play with support by the coach. During the role-play, the coaches function as observers.

The two women from the self-help group and the daughter prepare their role-play together, with support by the coach/observer. The other representatives prepare their roles first by themselves and then together.

Participants should invent their own characters (name, age, profession, rank, history, needs, experiences, goals for the meeting, hidden agendas, etc.)

Reflection

After the role-play, a reflection period of at least two hours should be scheduled, guided by the facilitator. Every participant should have a chance to reflect on the role-play. Special emphasis should be focused on the participants who played the part of survivors, since their needs and interests are of the greatest importance for improving services and interventions.

APPENDIX – GUIDELINES

FIRST CONSULTATIONS – GUIDELINES FOR AGENCIES THAT ARE NOT SPECIALISED IN DOMESTIC VIOLENCE

If a woman who has experienced violence approaches your agency, it is important to do the following:

Atmosphere, setting

- Provide a safe and comfortable place to talk;
- If the woman brings her children, have somebody there to take care of them, or at least a room where they can play (make sure there are some toys or books or paper and pencil for the children to play with);
- Give her time to calm down;
- Offer her a cup of coffee or glass of water;
- Provide paper tissues;
- Make sure you have information material about the problem and leaflets of specialised agencies (women's services) available in various languages;
- Have posters with helpline numbers on the wall to demonstrate that you know about the problem and that the client is not the only one who has this problem.

Clarifying what you can do

- Find a competent person to talk to her;
- Introduce yourself to her;
- Greet her with empathy and compassion;
- Tell her that it is very courageous of her to come here and tell her story, and that it is good she did so;
- Avoid any accusatory questions such as, "Why didn't you come sooner?";
- Tell her that you want to help her or help her to get help;
- Tell her that all information will be handled carefully and confidentially;
- If you cannot guarantee confidentiality, inform her about procedures you have to comply with;
- Encourage her to speak, but tell her also that she does not need to speak to you, for instance, if this has consequences she does not want at the moment (for instance the police in most countries have to file a complaint if a victim reports violence);
- Let her decide freely if she wants to talk to you or not and show her that she has choices (this is very important for empowering survivors; if you impose anything on her, she will feel more powerless);
- Tell her that you will help her to find another agency (a women's crisis centre or shelter) to help her if the woman hesitates to talk to you; assist her to get into contact with that agency.

Understanding the situation

If the victim decides she wants to talk to you:

- Listen carefully; show your interest;
- Acknowledge that it is difficult to talk about violence; tell her that she does not need to feel ashamed, that it is not her fault, that other women are in the same situation, that there is help;
- Be aware that talking about the violence can reactivate the trauma and that the survivor can become extremely distressed; be very sensitive and cautious;
- Tell her again that you want to help her, that she is not alone; give her hope and encourage her;
- Tell her that she can take time to talk; she does not need to feel under pressure;
- Ask open questions to help her talk (e.g., who did that to you, what happened yesterday, what did you do then, how did you feel, etc.);
- Avoid closed questions, e.g., did your husband beat you, do you want a divorce (The goal at this point is for you to gain an understanding of the situation and to help the woman understand her situation, and the next step is to find out what she needs);
- Avoid asking too many questions and appearing to be nosy or interrogating;

- Avoid asking for detailed information about the violence if you have not established a relationship of trust and a sustainable helping relationship yet, or if your agency cannot offer such help;
- In the first consultation, it is not necessary to ask about the whole history of the problem; leave it up to the woman to decide how much she wants to tell;
- The goal is to understand her actual situation in order to be able to help her;
- Show compassion and respect for the way she has been dealing with the situation; ask her what she has done so far to protect herself and to change the situation;
- State clearly that the violence is not her fault and that there is no excuse for violence; at the same time, avoid making negative comments about the violent partner;
- Avoid expressing any blame of the victim;
- Do not ask any accusatory and intervening questions like: "Why did you marry him?" or "Why do you not divorce him?" or "Why did you have children with him?" These are personal decisions that have to be respected; moreover, such questions are not helpful; they make us feel bad as help-seeking persons and do not contribute to empowering us; our spirits have to be lifted in such a situation, not lowered!
- Repeat from time to time during the conversation what the client has said to make sure you have understood her and to show that you understand her.

Finding out about immediate needs

- Especially shortly after the violent attack, ask her if she is in any pain or if she is injured;
- Ask her if she needs medical help and arrange it;
- Try to help her to find out what she needs now;
- The most crucial question here is whether it is safe for her to go back home, and what has to be done immediately about her own and her children's safety;
- Try to find out how dangerous the situation is for her and her children; how great is the risk that the violent partner will attack her again the same day or in coming days? (See danger assessment instruments, appendix);
- If she is indecisive as to whether or not she wants to separate from her partner, tell her that she should not put herself under pressure, that such a decision takes time and that she should take the time she needs and get support and counselling to become clear in her own mind;
- Tell her that, in a dangerous situation, a temporary separation can be very important to ensure her safety;
- Take into account that women might also have financial problems, no income, problems with their workplace or their visa because of the violence; ask her what other needs of that kind she might have and inform her about the possibilities.

Safety planning and information

Safety planning should be a standard response in every agency that victims might turn to for help:

- Inform the client victim about the possibilities for legal protection and about safe accommodation in women's shelters;
- In situations of immediate danger, help initiate the issue of a barring order by the police or a protection order by the court;
- If no possibility of a barring order or protection order exists, or if the perpetrator is very dangerous, help the victim and her children to find accommodation in a women's shelter;
- If there is no women's shelter in your region or if the shelter has no free space, help the victim to find some other safe accommodation (family, friends, other shelters);
- Go through a safety-planning sheet with her (see appendix) and make sure she has information about emergency phone numbers and services that can further help her;
- Encourage her to involve her children in safety planning.

Arrangement and closing

- Tell the client what further help or support you can offer her;
- Give her your card and tell her when and how she can reach you;
- If you are not a specialised agency (women's shelter, women's crisis centre, intervention centre, women's helpline) dealing with the problem of violence against women and their children, advise her to seek support with such an agency and help her to get connected;

- If you offer further help, arrange with the client how you will proceed, what you will do for her and when she will see you again;
- If possible, offer her concrete help and assistance in coming to grips with her problems, for example, by arranging with social services that she will get social security money instead of just sending her to another agency; for a person in crisis, it is simply exhausting and overwhelming to organise everything herself and to find her way through the “jungle of the help system” – a task that is difficult enough if you are not in distress, and sometimes even for experts;
- Encourage her to look after her physical and mental health and to get support and adequate treatment; inform her about the possibilities;
- Concrete help shows the victim and her children that you really care about her and it’s not “just talk”; this is a very important experience for re-establishing trust in the world and awakening hope that it is possible to overcome the problem.

Responsibility, management of services

- Don’t leave the victim alone; tell her you feel responsible for seeing to it that she gets adequate help and that she can contact you again if anything goes wrong;
- Network with other agencies and make sure she gets help quickly and unbureaucratically;
- Ask the victim if you may contact her again and how and when;
- Contact her again actively and offer proactive help, especially if she fails to show up at a consultation you have arranged with her;
- Feel responsible for the management and coordination of service providers, at least until another agency that the victim trusts, e.g., a specialised agency, assumes this responsibility.

APPENDIX – Risk Assessment and Safety Planning

RISK ASSESSMENT

Over the last decades, several instruments to assess the dangerousness of a perpetrator of domestic violence have been developed through research and practice. However, the instruments developed are not designed to measure or predict risk precisely. They rather serve to gather information systematically and to compare it with previous experience and knowledge in order to determine whether a victim is at risk of serious harm. In multi-agency cooperation, it is important to share information and engage in coordinated risk assessment. Danger assessment should be carried out with the victims of violence and only if there is a relationship of trust and support. It should always be accompanied by safety planning.

The BIG 26 (Duluth, Minnesota)

The Domestic Abuse Intervention Program (DAIP) in Duluth, Minnesota, USA, has developed 26 questions to assess the dangerousness of a perpetrator:

	Yes	No	Don't know	
1.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has the perpetrator become more violent, brutal or dangerous over time?
2.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has he ever hurt you so much that you needed medical help?
3.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has he ever tried to strangle you?
4.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has he ever hurt or murdered a pet?
5.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has he ever threatened to strangle you?
6.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has he ever sexually abused you?
7.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has he ever threatened you with a weapon? If yes, which one?
8.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is he possessive or extremely jealous and does he observe and controls you?
9.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are his attacks becoming more frequent?
10.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has he ever threatened to commit suicide, or has he ever attempted to commit suicide?
11.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has he ever attacked you during your pregnancy?
12.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Have you split up, or tried to split up with the perpetrator during the last 12 months?
13.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Have you tried to organize or to get help during the last 12 months (police, counselling centres, women's shelters, etc.)?
14.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Have you been isolated or hindered from getting help (telephone, car, family, friends, etc.)?
15.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has the perpetrator been under exceptional stress during the last 12 months (loss of job, death of someone he is close to, financial difficulties, etc.)?
16.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Does the perpetrator drink a lot of alcohol/ does he have a problem with alcohol?
17.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has he ever had withdrawal symptoms/ has he undergone a cure for drug addiction or alcoholism?
18.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Does the perpetrator have a weapon; does he wear it, or does he have any other access to weapons? Which ones?
19.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Do you think that he could seriously injure or murder you?
20.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Have you tried to protect the perpetrator in any form (attempted to change the police report, or to get the bail reduced, etc.)?
21.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Was the perpetrator abused himself by a family member when he was a child?
22.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has the perpetrator witnessed abuses towards his mother?
23.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Does the perpetrator show remorse or grief about the incident?
24.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has the perpetrator committed other criminal acts (apart from violence)?
25.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has the perpetrator also abused other people (outside the family)?
26.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Does the perpetrator take drugs (speed, cocaine, crack, etc.)?

The more questions are answered with „yes“, the higher is the risk of serious harm.

SOME MORE INSTRUMENTS FOR DANGER ASSESSMENT

DANGER ASSESSMENT TOOL BY JACQUELYN C. CAMPBELL

Jacquelyn C. Campbell has developed a similar danger assessment instrument that can be downloaded from her website. She also offers online training in danger assessment.

<http://www.dangerassessment.com/WebApplication1/pages/da/> (June 27, 2006)

INITIAL RISK ASSESSMENT FORM

ASSIST, Glasgow, Scotland, has developed a risk assessment form for advocates that can be found on the website of CAADA (Co-ordinated Action Against Domestic Abuse).

http://www.crarg.org.uk/library_resources.html#2 (June 27, 2006)

LONDON METROPOLITAN POLICE RISK ASSESSMENT MODEL FOR DOMESTIC VIOLENCE CASES

The London Metropolitan Police have developed a risk assessment tool (SPECSS) for their police force that can be downloaded from their website.

www.met.police.uk/csu/pdfs/AppendixIII.pdf (June 27, 2006)

An evaluation of the application of the risk assessment instrument has been carried out by the University of Warwick and can be downloaded:

<http://www2.warwick.ac.uk/fac/soc/shss/swell/research/> (June, 27, 2006)

APPENDIX – Risk Assessment and Safety Planning

SAFETY PLANNING

SAFETY PLANNING FOR VICTIMS

From: WAVE Manual (2004) “Away from violence”.

The following points should be considered in supporting women victims of violence and their children:

- Whom can she talk to about her situation, and whom can she trust? (friends, relatives, employer, teachers in school, etc.)?
- She should pack a bag with her most important belongings and those of her children, especially with all her important documents, and leave it with someone she can trust. Remind her always to have the keys for the house/apartment and the car with her so that she won't leave them behind.
- If there are weapons in the house, explore ways to have them removed.
- In an emergency, what works best to keep her safe?
- Whom can she call in an emergency?
- Encourage her to call the police if the violence starts again. How can she call the police? Does she have a mobile phone? (The number of the police can also be dialled if the phone is blocked or if there is no credit balance left; 112 is the number of the European emergency line operating in all the countries of the EU.)
- Can she devise a signal with the children or the neighbours to have them call the police or get help if she cannot do it herself?
- If she needs to escape immediately, where can she go? Help her think through several places where she can go in an emergency. Write down the addresses and phone numbers and tell her to keep them someplace where the perpetrator won't be able to find them.
- If she has to escape, what are the escape routes?
- Remind her that, in the middle of a violent assault, it is best to try to run away, or sometimes to placate the assailant, anything that works to protect herself and the children.

If the woman is planning to leave the violent partner:

- How and when can she leave most safely?
- Does she have transport, money, a place to go?
- Does she know how to get to the nearest women's shelter? Does she know the telephone number? Advise her to write it down and keep it where her partner won't find it.
- What can she and others do to prevent her partner from finding her?
- Whom in her support network does she trust to protect and support her?
- How will she travel safely to and from work or school/kindergarten to pick up the children?
- What community/legal resources will help her feel safer?
- What custody and visitation provisions would keep her and the children safe?
- Can she get a restraining order to prohibit the perpetrator from coming near her or contacting her?

If the woman has separated from the violent partner, discuss the following with her:

- Increasing safety measures such as changing or installing safety locks on doors and windows;
- If possible, installing a better security system (window bars, locks, better lighting, a fire extinguisher, etc.);
- Instructing the children or family/friends to call the police in a situation of danger;
- Talking to school teachers and child care providers about who has permission to pick up the children, and developing other special precautions to protect the children;
- Building up a social network to support her, e.g., finding women's support services, asking family, friends, colleagues for support, etc.;
- Obtaining a barring/restraining order by the police/the court, if possible.

Safety bag:

Advise the client to have the following available in a safety bag, in case she and the children need to escape:

- Passports, birth certificates;
- Marriage certificate;
- Health and social security cards;
- Immigration documents;
- Driving licence, car papers;
- Divorce papers, other legal documents and important contracts;
- Phone numbers and addresses of family, friends and community services;
- Clothing and comfort items for herself and her children;
- Keys (house, car, etc.);
- Children's favourite toys, school books, etc.

SAFETY PLAN FOR INSTITUTIONS

Services and institutions can only support and protect victims successfully if they also take care of their own safety. For the police, safety measures for police officers are usually a matter of daily routine. In social and health services, safety for the employees is not always an issue.

Protecting the employees and the clients against all sorts of violence as well as supporting them should be part of the policy of every organisation involved in the prevention of domestic violence.

A safety plan for institutions has been developed by the Domestic Abuse Intervention Centre Vienna along the following guidelines:

Steps in safety planning**1. The institution's policy**

There needs to be a clear policy concerning the occurrence of violence, harassment or discrimination, and planning of safety measures. This includes:

- Development of a written safety plan for the support of employees and clients in cases of violence (Who is responsible for support, what kind of support, e.g., a lawyer, some time off, etc.);
- A comprehensive written safety plan covering what to do in dangerous situations, giving full information about the safety plan;
- Planning of implementation of the safety plan at all levels:
- Association, Management, Employees, Clients.

2. Prevention of violence and implementation of the safety plan

- Technical safety precautions (safety door, video, direct line to the police, etc.);
- Monitoring of day-to-day security measures (e.g., Who is allowed to enter the institution? When are the doors open, when locked? Who is to take which safety precautions?);
- Regular briefing of new employees on safety measures in place;
- Regular 'safety practice' (checking the safety precautions, discussing the measures with all concerned);
- Early warning system: in case of imminent danger (e.g., a perpetrator demanding something calls or appears at your door) take measures in time, discuss the situation in team meetings, don't put it off.

3. Follow-up after occurrences of violence

- Plan what is to be done immediately following violence: Who is to do what and when (e.g., call the police/make a report, apply an 'institution ban' for clients, hold emergency meeting, etc.);
- Support directly affected people (determine their needs, arrange and implement supporting measures: What kind of support, competency, etc.);
- Determine the needs of the other employees, arrange and implement supporting measures (e.g., supervision);
- Reflect on safety planning processes (What worked, what didn't?);
- If necessary, improve/upgrade the safety plan.

Considerations for the development of a safety plan

- Which dangerous situations can occur in our institution?
- What types of violence could occur?
- By whom? Against whom? When especially? Where especially?
- What do we need / What do we have to do to avoid dangerous situations:
 - clarity
 - agreements/rules
 - technical facilities/conditions
- Safety plan for everyday life: Who is to do what and when? Safety plan in case of emergency
- Follow-up after violence: What kinds of support are available for the employees (e.g., lawyer, supervision, time off, etc)? Which ones for affected clients? Which ones for other employees?
- Who is responsible for what concerning safety? Who is responsible for the ongoing implementation of safety plans? How is it ensured?

APPENDIX – MODELS AND EXAMPLES OF COOPERATION

MODELS PRESENTED AT THE WORKSHOPS OF THE DAPHNE PROJECT BRIDGING GAPS SOURCE: REPORTS FOR THE PROJECT BRIDGING GAPS

Domestic Violence Round Table in Gladbeck, Germany

The Women's Counselling Centre Gladbeck e.V. is a member of the state-wide association of women's programmes in Nordrhein-Westfalen: 53 women's counselling programmes, 63 women's shelters, 34 women's rape hotlines, two shelters for girls and two programmes working with women and children who have experienced sexual child abuse (Wildwasser). At the federal level, the Women's Counselling Centre Gladbeck e.V. is a member of the Federal Association of Women's Counselling Programmes and Rape Crisis Hotline Programmes.

Women who come to the Women's Counselling Centre Gladbeck are looking for help and support in very different areas: domestic violence, rape crisis, child abuse, mobbing in the workplace, stalking and problems related to structural violence such as unemployment, housing issues, etc.

The Domestic Violence Round Table was established in 2002 by the Women's Counselling Centre Gladbeck in response to the introduction of the new civil law concerning protection against domestic violence. The participants in this Round Table are: the city administration – social welfare department, youth welfare department, migration office, office for equal rights, court clerks, prosecution, police, a lawyer, the head of the local association of medical doctors, the Caritas counselling programme (a church-related programme), and guests to cover different topics.

First working phase: During the first working phase, the goal of the Round Table and the general rules were discussed. The participants sharpened their professional expertise and familiarised themselves with the work of the other organisations. Concerning cooperation, the points of intersection between the different organisations, as well as agreements on cooperation between agencies involved, were analysed.

Second working phase: Evaluation was carried out to determine whether the cooperation met the needs, whether gaps had been identified and tackled, whether new cooperation had been initiated, i.e., whether partners had been asked to join, and whether further/new topics had come into focus and been discussed (health system, children, perpetrators, etc.). Finally, agreement was reached on common public presentation (no press release in the name of the group without prior discussion).

Working routine: Meetings take place four times a year to reflect on procedures and on new ways to combat domestic violence. The focus is on the intervention process and on evaluation of what works out best for the victims and what does not. In between meetings, agencies work together closely and bilaterally.

Example: If the police have a domestic violence call, they can evict the assailant from the home for ten days. The police send the woman's data to the Women's Counselling Centre Gladbeck Programme (She must give her consent, but does not have to sign a written statement). If children are living in the household, the youth welfare department is also informed. The Women's Counselling Centre Gladbeck calls the woman within 24 hours and offers her an appointment within the next 24 to 48 hours. If she doesn't want an appointment, she is given information on the phone about her rights and what she can do (safety plan). In addition, written material in four languages (German, English, Turkish and Russian) is sent to the woman. She is asked whether she wants to be accompanied to the court to file an application for a protection order. At the courthouse, there are two clerks who are experts on domestic violence (also partners in the Round Table). If the woman has not yet contacted the Women's Counselling Centre when she is at the court and applying for a protection order, information leaflets are handed to her and she is encouraged by the clerks of the court to contact the Women's Counselling Centre. The same procedure is followed at the police station, the social welfare department, etc. (all partners in the Round Table). This procedure is quite effective because many women feel at a loss to deal with the bureaucracy all alone. Some women who don't want to have contact with the Women's Counselling Centre at the beginning of the intervention process come to the programme weeks or even months later, just to talk about their experiences and to get help and support. Procedure at the youth department: At the same time, the youth department contacts the assailant (and not the mother, as was earlier the

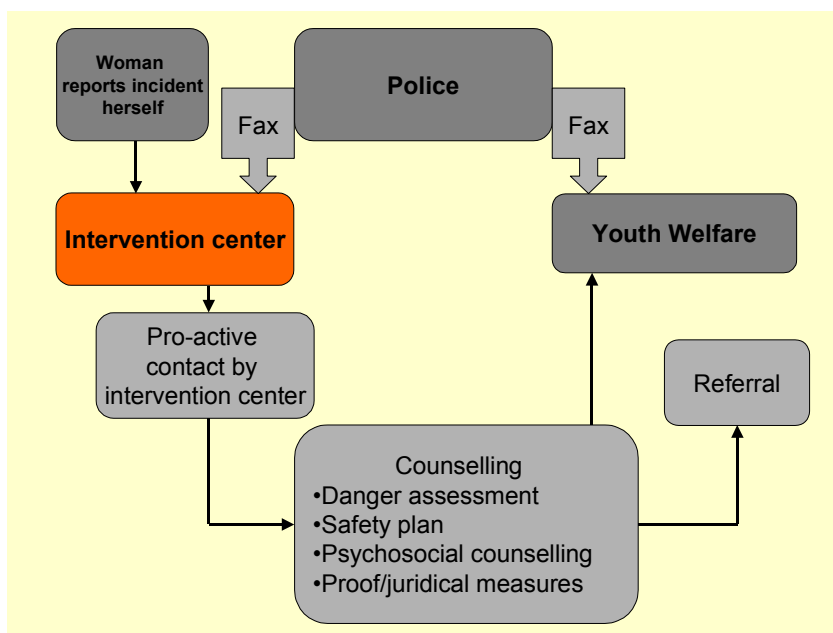
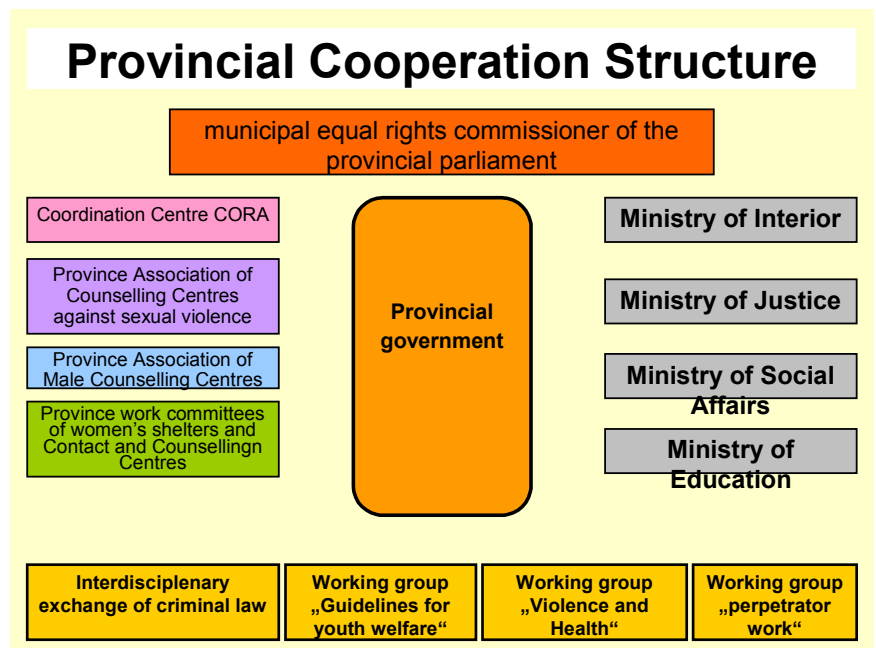
case) and confronts him with his failure as a competent father, as demonstrated by his beating up of the child(ren)'s mother. They also contact the child(ren) to assess the extent to which they are traumatised.

PROVINCIAL COORDINATION OF STATE AGENCIES AND NGOS IN MECKLENBURG VORPOMMERN, GERMANY

The model project CORA ran in Rostock from 1998 to 2001. In 2001, five intervention centres were established because the provincial action plan for 2001 focused on interventions in connection with domestic violence. The intervention centres are fully financed by the province, but are run by private NGOs. They have become integrated into the existing police, justice and community structure. There have been amendments to the provincial law-enforcement law and an enactment of the Ministry of the Interior. Currently, an update to the Provincial Action Plan is planned, with a new focus on violence against women and children.

Provincial cooperation and networking structure:

Protection and counselling services are organised in each province's work committee. In these committees, there is an exchange of know-how and agreement is reached on goals for the reduction of violence against women and children.



Cooperation structure at the regional level – the, “Intervention Chain”:

At the regional level in communities, interdisciplinary cooperation has also been initiated. The participants are: the police, prosecuting attorney's office, courts, youth welfare, women's shelter, intervention centres, and the equal rights commissioner. The diagram shows the cooperation structure.

THE AUSTRIAN DOMESTIC VIOLENCE LAW AND MODEL OF INSTITUTIONALISED COOPERATION

This comprises three elements:

1. Immediate expulsion of the violent party from the home of the victim for 10 days, up to a maximum of 20 days (police law - *Sicherheitspolizeigesetz* § 38a SPG – police barring order);
2. Restraining order in the form of a temporary injunction for three months and longer (civil law - *Exekutionssordnung* § 382 EO);
3. Victim services: Intervention centres with a proactive approach (police law- *Sicherheitspolizeigesetz* § 38a SPG).

Police barring orders

Conditions: Dangerous attack against life, health and freedom of a person (preventive);

Who is protected: Any person living in a house/apartment, no family relationship required, ownership of house/apartment or tenancy is irrelevant;

Measures (imposed by the police without consultation with the victim): Immediate eviction of a dangerous person;

Barring order: The evicted person is not allowed to return to the house or the vicinity for 10 days; if the victim applies for a restraining order within 10 days, the barring order is valid for 20 days; it ends in any case after 20 days.

Actions of the police when applying the barring order:

- The police must interview the parties separately;
- The police must take the keys of the dwelling away from the dangerous person;
- The police must inform the parties about the intervention and their rights;
- Violation of the order is punishable by a fine of up to € 380;
- The victim may not take the evicted person back in;
- The police must check for compliance with a barring order within three days.

Family (civil) court protection order – temporary injunction:

Conditions: Physical assault, threat, behaviour that seriously affects mental health;

Who is protected: All persons who live or have lived together in a family or family-like community;

Protection: The perpetrator must stay away from locations specified, such as the house/apartment, its surroundings, and other places such as the victim's workplace and the children's kindergarten; a no-contact order is issued if there has been a police barring order; the decision must be reached within 20 days.

The order is valid for three months, and if a petition for divorce is filed, until the end of the divorce case or of another law case.

Institutionalised cooperation: There are three main actors:

1) The police must send the report to:

- The local intervention centre, in all cases, within 24 hours by fax
- The youth welfare office: In all cases where minors are in the family
- The family court: If the victim applies for a protection order or if the perpetrator violates the family court protection order; the police must also send the keys to the family court.

2) The family court must:

- Inform the police if the victim applies for a protection order;
- Order the police to enforce the decision whenever the victim so requests;
- Send the decision to the police.

3) The intervention centre:

- Is required to support the victim and to assist in applying for a protection order;
- Puts the safety and security of the victim first;
- Will (but is not required to) inform the police if the perpetrator violates the barring/protection order;
- Will inform the police, the family court, the prosecutor's office/criminal court and other relevant agencies of any endangerment for the victim (written reports);
- Will encourage and empower the victim to report violence to the criminal justice system.

Close co-operation by all the actors is crucial in order to protect victims and to prevent further violence (system of Interventions). Any „missing link“ in the intervention chain (i.e., in Austria, the criminal justice system) poses a risk to the victim.

SHORT DESCRIPTIONS OF FURTHER MODELS OF COOPERATION PRESENTED BY BRIDGING GAPS PARTNERS (for more information see addresses of partners in the appendix)

CZECH REPUBLIC: PROJECT “COALITION OF ORGANISATIONS AGAINST DOMESTIC VIOLENCE – KOORDONA”

KOORDONA is a coalition of 12 NGOs from different regions of the Czech Republic. Ten NGOs started to cooperate in the Campaign against Domestic Violence against Women in 2003. The women's NGO ROSA coordinated the campaign and, after it had come to an end, the organisations decided to continue cooperating. There are regular meetings once every second month. Apart from the general meetings, working groups have been established to address different target groups. The Coalition informs social institutions about the services they are providing and is engaged in several activities and in lobbying for better legal protection of victims and other issues concerning victim support. KOORDONA has started a website giving information about domestic violence, the aims and work of the Coalition and events and actions.

ESTONIA: PROJECT “TRAINING AND COOPERATION FOR PROSECUTORS AND JUDGES ABOUT VIOLENCE AGAINST WOMEN”

The women's shelter in Tartu, in cooperation with the prosecutor's office for the southern region, started the project in 2005 as a multi-agency training programme for prosecutors and judges. The presenters were representatives of the Estonian ministry for social affairs, the NGO Estonian Centre for Social Programmes, Turku University, the Open Society Institute and the police. The contacts between the NGO/Women's Shelter Tartu and the prosecutor's office have already existed for almost three years. The aim is to better inform prosecutors and judges, who often play key roles in solving cases of violence, but had previously received almost no training. So far, two informative and stimulating training courses have taken place and more are planned.

HUNGARY: “NINTH DISTRICT OF BUDAPEST AGAINST DOMESTIC VIOLENCE”

The project is part of a Daphne II 2004 programme of the European Commission coordinated by NANE. It is a mixture of training and district-wide networking of service-providers, institutions and authorities that regularly deal with cases of domestic violence. The project was started in April 2005. The participants are: the ninth district deputy mayor's office, NGOs (expertise) from Austria, Slovakia and Bulgaria, NANE, municipal institutions and other services operating locally.

The aims of the project are:

- To broaden the horizons of people working in the field, with special emphasis on expected changes in the Hungarian legislation and methodology for addressing domestic violence;
- To strengthen local multi-agency networking in cases of domestic violence on a case-to-case and a methodological basis;
- To strengthen the notion that involving NGOs working for battered women with a gender-based perspective is necessary in order to achieve a long-term solution.

LITHUANIA: NATIONAL CONSULTATIVE WOMEN'S FORUM

The National Consultative Women's Forum was established under the Lithuanian parliament in 2003. Its aim is to strengthen at the institutional level the Board of the National Consultative Women's Forum established as a permanent working group under the Lithuanian parliament. It is made up of the most active women's NGOs, experienced in political lobbying. The issue of violence against women is a high priority of the Forum. The National Consultative Women's Forum was organized at the initiative of women's NGOs and in cooperation with women parliamentarians.

The Forum has prepared a joint NGO vision of the development of an egalitarian society in Lithuania in the coming 10-year period, with the goals that are to be achieved for the advancement of women in the country.

The Forum organized the Fourth Lithuanian Women's Congress in 2005, which took stock of the current situation of Lithuanian women in all the regions of the country 15 years after it had regained its independence, evaluating that situation in the critical areas named by the Beijing Platform for Action. A resolution was passed

by the Congress containing an agenda for the further advancement of Lithuanian women, particularly in the area of combating violence against women.

SLOVENIA: WORKING GROUP ON DOMESTIC VIOLENCE IN HEALTH CARE

The Association SOS Helpline for Women and Children initiated a working group in the field of health care and nursing in order to ensure the best possible treatment for patients and training for nurses, to exchange information about each other's work and problems, to raise awareness and ensure better knowledge about domestic violence among medical staff, doctors and psychiatrists. Especially in psychiatry, the needs of women victims of violence are not adequately recognized and addressed. Psychiatry usually treats momentary psychic conditions (depression, eating disorders, suicide attempts, etc.) and not the real problem. The working group has prepared two protocols for dealing with violence and has carried out campaigns to raise awareness among health professionals. It regularly disseminates information about services for victims of violence.

POLAND: WORKING GROUP ON DOMESTIC VIOLENCE LEGISLATION

The Working Group on Domestic Violence Legislation is a cooperative undertaking between government agencies and an NGO. It functions as the advisory council in the Ministry of Gender Equality. Its involvement has resulted in some action and research initiatives by the Warsaw local government. In addition, a law on domestic violence has been enacted. However, the law and its implementation are not optimal and depend very much on the engagement of various individuals. Nevertheless, the first steps have been taken, and action will hopefully be continued. The objectives are to develop minimum standards for dealing with domestic violence and providing adequate women's advocacy services, and to bring about amendments to the law and improvement of its implementation.

APPENDIX – FURTHER RESOURCES AND LINKS

There are a growing number of multi-agency projects in many countries. It is not easy to obtain information about many of them owing to language barriers. The following information is based on websites in the UK and by no means reflects the whole range of projects existing in Europe. The projects described represent some additional examples of new developments in multi-agency cooperation that it might be interesting to share.

UK - BROMLEY DOMESTIC VIOLENCE ONE-STOP SHOP

Anyone who is suffering from domestic violence and who feels that they could benefit from any help or advice can contact the Domestic Violence One-Stop Shop. It is staffed by a police officer from the Bromley Community Safety Unit, a local solicitor who specialises in family law, a representative from the Bromley Homeless Families Unit, a representative from Bromley Women's Aid and a representative from Bromley Victim support. No prior appointments are necessary. The One-Stop Shop provides a completely free and confidential help and advice service.

http://www.bromley.gov.uk/community/safety/domesticviolence/bromley_dv_one_stop_shop.htm (June 27, 06)

UK - CARDIFF WOMEN'S SAFETY UNIT (WSU) CARDIFF COMMUNITY SAFETY PARTNERSHIP

The Cardiff Women's Safety Unit (WSU) was established in 2001. This multi-agency initiative works with a wide range of organisations (including the police and the Crown Prosecution Service) and offers a comprehensive range of specialist services at one referral point to women who have survived domestic violence and/or undergone perpetrator rape. The WSU offers: target hardening, counselling, advocacy, legal services and provision of refuge to women and their children. It delivers domestic violence training sessions to people working in the South Wales area, and it helps streamline domestic violence procedures in the Cardiff courts.

<http://www.cardiffcommunitysafety.co.uk/page.php?id=18> (June 27, 2006)

UK – MULTI-AGENCY RISK ASSESSMENT CONFERENCES (MARACS)

The MARACs are a new approach to tackling domestic violence. MARACs have been piloted in Cardiff with outstanding success. Their aim is to provide a forum for sharing information and taking actions that will reduce future harm to very high-risk victims and their children, as identified through the police risk assessment process. The first MARAC was held in Cardiff in April 2003 and was attended by members of 16 agencies, including the police and the probation, council, health and housing agencies; the refuge; and the Women's Safety Unit. Evidence shows that MARACs are successful in reducing revictimisation, improving inter-agency operations, reducing child protection notifications to social services and increasing the victims' sense of safety.

www.cardiff.ac.uk/schoolsanddivisions/academicschools/socsi/staff/acad/10990.dld (pdf) (June 27, 2006)

www.cardiff.ac.uk/schoolsanddivisions/academicschools/socsi/staff/acad/10987.dld (pdf) (June 27, 2006)

CORPORATE ALLIANCE AGAINST DOMESTIC VIOLENCE

The Corporate Alliance Against Domestic Violence is a group of progressive companies and organisations working individually and collectively to address the impact of domestic violence in the workplace.

<http://www.corporateallianceuk.com/home.asp> (June 27, 2006)

UK - CO-ORDINATED RESPONSE AND ADVOCACY RESOURCE GROUP, WALES, UK

CAADA is a charity established to encourage the use of independent advocacy as a way of increasing the safety of survivors. It is working to create a consistent, professional and effective response for all survivors of domestic violence and in particular those at high risk. This is done by delivering services directly to advocacy projects and local multi-agency partners, and also by working with funders, policy advisers and government. CAADA is part of the government's initiative in designating new specialist domestic violence court areas.

<http://www.crarg.org.uk/> (June 27, 2006)

UK – INFORMATION ABOUT DOMESTIC VIOLENCE FORUMS

The UK has a great number of multi-agency initiatives, the so-called domestic violence forums; for more information, see the website of Women's Aid:

<http://www.womensaid.org.uk/azfora.asp?section=0001000100090002> (June 27, 2006)

APPENDIX - FURTHER RESOURCES AND LINKS

European Commission

rue de la Loi, 200

1040 - Bruxelles

http://ec.europa.eu/index_en.htm

Daphne Program of the European Commission:

http://ec.europa.eu/justice_home/funding/daphne/funding_daphne_en.htm

European Parliament

rue Wiertz

Wiertzstraat

B-1047 Bruxelles

<http://www.europarl.europa.eu/>

Council of Europe

Avenue de l'Europe

67075 Strasbourg Cedex

Tel. +33 (0)3 88 41 20 00

http://www.coe.int/t/e/Human_Rights/Equality/

LINKS TO RESEARCH WEBSITES

Federal Ministry for Family Affairs, Senior Citizens, Women and Youth BMFSF (2004): Health, Well-Being and Personal Safety of Women in Germany. A Representative Study of Violence against Women in Germany- Summary of the central research results, Berlin

<http://www.wibig.uni-osnabrueck.de/wibig1.htm> (June 27, 2006)

Home Office, Science, Research and Statistics Department

<http://www.homeoffice.gov.uk/rds/violencewomen.html/> (June 27, 2006)

Praxis International - Safety Audit

Praxis has adapted a method of analysis known as institutional ethnography to the work of making legal and human service institutions more responsive to the needs of women and children. In the domestic violence field, the use of this method has become known as the Praxis safety and accountability audit.

<http://www.praxisinternational.org/> (June 27, 2006)

CAMPAIGNS

16 days of activism against gender violence

<http://www.cwgl.rutgers.edu/16days/home.html> (June 27, 2006)

Zero-Tolerance Campaign, Scotland

<http://www.zerotolerance.org.uk/> (June 27, 2006)

APPENDIX – CONTACT ADDRESSES

ADDRESSES OF WAVE AND BRIDGING GAPS PARTNERS:

WAVE Women Against Violence Europe

European Information Centre Against Violence
Bacherplatz 10/4
A-1050 Vienna
Austria
Phone: +43-1-548 27-20
Fax: +43-1-548 27 20 27
e-mail: office@wave-network.org
<http://www.wave-network.org>

ROSA Foundation - Nadace ROSA

Podolska 25
147 00 Prague 4
Czech Republic
phone: ++420 2 4143 2466
fax: ++420 2 4143 2466
e-mail: info@rosa-os.cz
<http://www.rosa-os.cz/>

Women's Shelter of Tartu

Räni Põik 11
50403 Tartu
Estonia
phone: ++372 55 949496
e-mail: info@naistetugi.ee

Interventionsproject CORA – Contra Gewalt gegen Frauen und Mädchen in Mecklenburg Vorpommern

Heiligeisthof 3
18055 Rostock
Germany
phone: 0381/401 02 29
email: interventionsprojektcora@hotmail.com
<http://www.fhf-rostock.de/FhF-homepage/html/>

Frauenberatungsstelle Gladbeck – Women's Counselling Centre, Gladbeck

Hochstraße 28
45964 Gladbeck
Germany
phone: ++49 2043 66699
fax: ++49 2043 929795
e-mail: fbstgladbeck@aol.com
<http://www.frauenberatungsstelle-gladbeck.de/>

NaNE - Women's Rights Association

PO Box 502
H-1447 Budapest
Hungary
phone: ++36 1 3372865
fax: ++36 1 2674900
e-mail: info@nane.hu
<http://www.nane.hu>

Vilnius Women's House / Crisis Centre for Women

Pilies 36 - 10
2009 Vilnius
Lithuania
phone: ++370-5-2616380
fax: ++370-5-2615366
e-mail: vmotnam@delfi.lt

Centrum Praw Kobiet

ul. Wilcza 60 lok.19
P-00-679 Warsaw
Poland
phone: ++48 22 6520117
fax: ++48 22 6522117
e-mail: temida@cpk.org.pl
<http://free.ngo.pl/temida>

Association SOS Helpline for Women and Children

P.O. Box 2726
SLO-1001 Ljubljana
Slovenia
phone: ++386 1 5443513
fax: ++386 1 5241993
e-mail: drustvo-sos@drustvo-sos.si
<http://www.drustvo-sos.si>

Federal Ministry of the Interior

Kriminalprävention, Opferhilfe
Schlickplatz 6
1090 Vienna
Austria
Tel.: ++43 1 531 26-0
post@bmi.gv.at
www.bmi.gv.at/prävention

L.O.K.K. - Nationwide organisation crisis centre for refuge/ LandsOrganisation for Kvinde Krisecentre

Appleby's Plads, 3 Sal
DK-1411 Copenhagen
Denmark
phone: ++45 3295 9019
fax: ++45 3295 9069
e-mail: sekretariat@lokk.dk
<http://www.lokk.dk>

FNSF - Fédération National Solidarité Femmes

32-34, rue des Envierges

F-75020 Paris

France

phone: ++33 1 40338090

fax: ++33 1 40331214

e-mail: fnsf@wanadoo.fr

FENESTRA - Interest Association of Women

P.O. Box F-12

042 92 Kosice

Slovakia

phone: ++421 55 7297504, ++ 421 905 344 588

fax: ++421 55 7297505

e-mail: fenestra@fenestra.sk

<http://www.fenestra.sk>