

Preventing domestic violence

Good practices



This report was commissioned by the European Institute for Gender Equality (EIGE) and prepared by IRS - Istituto per la Ricerca Sociale, with contribution of Barbara Limanowska, Santiago Moran Medina, Maurizio Mosca, Thérèse Murphy, and Jurgita Peciuriene on behalf of EIGE.

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Acronyms

DV	domestic violence
GBV	gender-based violence
EIGE	European Institute for Gender Equality
IRS	Istituto per la Ricerca Sociale
BPfA	Beijing Platform for Action
NAP	national action plans
CoE	Council of Europe
MS	Member State



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1. Introduction



1. Introduction

Within the framework of the 2011 work programme and according to the establishing regulation ⁽¹⁾, the European Institute for Gender Equality (EIGE) commissioned a study on 'Collection of methods, tools and good practices in the field of domestic violence (as described by area D of the Beijing Platform for Action)'.

The study aimed to identify and collect existing resources and information on training to prevent domestic violence, on campaigns to raise social and political awareness on domestic violence and on support services for victims of domestic violence, following EIGE's approach on methods, tools and good practices which entails several phases:

- collecting existing methods and tools on gender mainstreaming in EU Member States;
- selecting some of the collected examples as 'practices with potential';
- processing selected examples according to general and specific selection criteria;
- categorising practices as good practices and including them in EIGE's Resource and Documentation Centre;
- promoting knowledge and information through the dissemination of examples of good practices and enhancing the exchange among stakeholders;

- enhancing the continuous collection and usage/access through EIGE's Resource and Documentation Centre, where methods, tools and good practices are stored.

Following the Beijing Platform for Action (BPfA) ⁽²⁾, violence against women (VAW) is defined as critical area D and associated with three strategic objectives.

- D.1. Taking integrated measures to prevent and eliminate violence against women.
- D.2. Studying the causes and consequences of violence against women and the effectiveness of preventive measures.
- D.3. Eliminating trafficking in women and assisting victims of violence due to prostitution and trafficking.

In 2002, the Spanish Presidency carried out a study mapping the measures to combat violence against women. On the basis of this preparatory work, the 2002 Danish Presidency decided to concentrate its work on the following definition of violence: 'any physical, sexual or psychological violence, inflicted on a victim by a current or former spouse or intimate partner or other members of the family' ⁽³⁾ and

⁽¹⁾ Regulation (EC) No 1922/2006 of the European Parliament and of the Council of 20 December 2006 on establishing a European Institute for Gender Equality.

⁽²⁾ All Member States of the European Union have signed the BPfA. Since its adoption in 1995, the BPfA has been confirmed by the UN General Assembly through several reviews and European institutions have taken a strong role in supporting policies aiming to combat violence against women.

⁽³⁾ Of course, this definition does not cover all forms of gender-based violence but was chosen by the Danish Presidency in order to be able to build its work on the information coming from the study by the Spanish Presidency.

suggested seven indicators indicating ‘domestic violence against women’ (profile of female victims; profile of male perpetrators; victim support; measures addressing the male perpetrator to end the cycle of violence; training of professionals; state measures to eliminate domestic violence against women; and evaluation). Some other sub-indicators are mentioned. The aim was to develop indicators that can facilitate the evaluation of the implementation of the BPfA, promote the exchange of good practices, help evaluate the measures to prevent and eradicate domestic violence (including policy measures) and facilitate awareness-raising initiatives regarding violence against women.

Starting from the definition and the related indicators adopted by the Danish Presidency, the scope of the study has been specifically related to the field of domestic violence. The operational definition of domestic violence adopted focuses on intimate partner (or ex-partner) violence, which is violence against women perpetrated by a current or former spouse, live-in partner, boyfriend or lover.

The study covered 27 EU Member States and Croatia, and includes methods and tools implemented at the EU and national levels. The reference period for the collection of resources and information runs from 2005 to 2012. Considering the huge number of possible methods and tools from all over Europe, the mapping and collection could not be exhaustive. However, the collected methods and tools are examples of what is being implemented in the 27 EU Member States and Croatia.

Methods and tools only refer to the following areas and with the following specifications.

- **Awareness-raising**

Mapping and collection was mainly related to national public campaigns (campaigns using the media, messaging and an organised set of communication activities to generate specific outcomes in a large number of individuals and in a specified period of time).

- **Training**

Mapping and collection was related to different training activities identified and mapped that ranged from awareness-raising training for different groups of people to specialised training for professionals, multi-agency groups and trainers.

- **Victim support services**

Mapping and collection was related to methods and tools implemented by gender-specific services established to protect and empower victims of domestic violence, by addressing their needs (information, advice, counselling, practical support, court accompaniment, legal information, proactive support, advocacy and outreach services, etc.), specialised domestic violence units inside general services (social and healthcare services, police forces, judicial system, etc.) and/or by programmes/centres for perpetrators of domestic violence. The tools adopted to implement strategies of intervention or to obtain individual objectives connected to victim safety and empowerment and/or perpetrator control and change were mapped.

2. Methodology: from collecting to identifying the good practices



2. Methodology: from collecting to identifying the good practices

The study allowed the mapping and collection of a total number of 759 methods and tools. The information comes mainly from a survey based on a questionnaire sent to relevant stakeholders and from methods and tools information sheets collected by core members and a network of country researchers.

The questionnaire was sent to different typologies of stakeholders covering: government officials/civil servants, experts from national women's support services or networks and academic experts identified by country researchers.

All of the 759 methods and tools collected underwent a process of analysis in order to select a certain number of 'practices with potential' and then 15 good practices. The process undertaken can be summarised in the following steps.

Table 1: Type of methods/tools collected by macro-type and country (%) (*)

EU-27 and Croatia	Training		Awareness-raising					Support services										Perpetrators' programmes					No		
	8		1	2	3	4	15	2	5	6	7	9	10	11	12	13	14	16	17	2	6	7		9	11
Belgium	4.3		34.8	-	21.7	17.4	-	-	4.3	4.3	4.3	-	-	-	-	4.3	-	-	4.3	-	-	-	-	-	23
Bulgaria	30.0		15.0	-	10.0	-	-	5.0	5.0	10.0	5.0	5.0	5.0	-	-	5.0	-	-	5.0	-	-	-	-	-	20
Czech Republic	30.8		6.6	-	23.1	2.2	-	6.6	3.3	6.6	3.3	5.5	3.3	-	2.2	-	2.2	1.1	2.2	1.1	-	-	-	-	91
Denmark	10.8		27.0	-	24.3	8.1	2.7	10.8	-	-	-	-	-	-	-	-	2.7	8.1	5.4	-	-	-	-	-	37
Germany	12.8		2.6	-	10.3	23.1	-	2.6	-	2.6	7.7	15.4	7.7	-	2.6	-	2.6	2.6	2.6	2.6	2.6	2.6	-	-	39
Estonia	42.9		14.3	-	7.1	7.1	-	-	21.4	-	-	7.1	-	-	-	-	-	-	-	-	-	-	-	-	14
Ireland	19.0		4.8	-	-	14.3	4.8	9.5	4.8	-	4.8	19.0	-	-	-	4.8	4.8	4.8	4.8	4.8	-	-	-	-	21
Greece	32.1		17.9	-	7.1	7.1	-	14.3	3.6	-	3.6	3.6	3.6	-	-	3.6	-	-	-	-	-	-	-	-	28
Spain	23.7		18.4	-	5.3	5.3	-	5.3	2.6	2.6	10.5	2.6	-	21.1	2.6	-	-	-	-	-	-	-	-	-	38
France	13.8		17.2	-	13.8	10.3	-	6.9	3.4	3.4	3.4	3.4	-	3.4	3.4	-	-	3.4	3.4	3.4	-	-	-	-	29
Italy	15.0		15.0	-	20.0	15.0	-	-	15.0	-	-	15.0	-	-	-	-	5.0	-	-	-	-	-	-	-	20
Cyprus	19.0		28.6	-	14.3	9.5	-	-	-	4.8	4.8	-	-	-	-	14.3	-	-	4.8	-	-	-	-	-	21
Latvia	30.0		20.0	-	-	-	-	30.0	-	-	10.0	10.0	-	-	-	-	-	-	-	-	-	-	-	-	10
Lithuania	21.1		26.3	-	10.5	-	-	-	5.3	-	5.3	10.5	-	-	-	-	-	-	21.1	-	-	-	-	-	19
Luxembourg	21.4		7.1	-	7.1	14.3	-	21.4	7.1	7.1	7.1	-	-	-	-	-	-	-	7.1	-	-	-	-	-	14
Hungary	30.8		7.7	-	7.7	-	15.4	-	-	23.1	15.4	-	-	-	-	-	-	-	-	-	-	-	-	-	13
Malta	25.0		25.0	-	-	18.8	6.3	-	-	6.3	6.3	-	-	6.3	-	-	-	-	6.3	-	-	-	-	-	16
Netherlands	5.4		27.0	-	2.7	-	-	37.8	2.7	2.7	-	-	-	5.4	-	-	-	-	10.8	-	-	-	5.4	-	37
Austria	23.1		30.8	-	7.7	3.8	-	11.5	3.8	11.5	-	-	-	-	-	3.8	-	3.8	3.8	-	-	-	-	-	26
Poland	22.2		18.5	-	3.7	7.4	-	-	3.7	3.7	11.1	7.4	7.4	-	3.7	-	3.7	-	3.7	-	-	3.7	-	-	27
Portugal	6.7		26.7	3.3	20.0	6.7	-	13.3	3.3	3.3	6.7	-	-	-	3.3	-	-	-	6.7	3.3	-	-	-	-	30
Romania	8.3		41.7	-	-	-	-	16.7	-	8.3	16.7	8.3	-	-	-	-	-	-	-	-	-	-	-	-	12
Slovenia	14.3		57.1	-	-	7.1	-	10.7	-	3.6	-	-	-	-	-	-	-	-	7.1	-	-	-	-	-	28
Slovakia	20.0		20.0	-	20.0	10.0	-	5.0	-	-	10.0	-	-	-	-	-	10.0	5.0	-	-	-	-	-	-	20
Finland	16.7		16.7	-	8.3	12.5	-	4.2	-	4.2	12.5	8.3	-	-	-	-	-	4.2	8.3	4.2	-	-	-	-	24
Sweden	20.0		8.0	-	24.0	4.0	-	8.0	-	8.0	12.0	8.0	-	-	-	-	-	8.0	-	-	-	-	-	-	25
United Kingdom	2.9		14.7	-	5.9	2.9	-	2.9	2.9	11.8	14.7	5.9	-	8.8	2.9	-	2.9	2.9	8.8	-	2.9	2.9	2.9	2.9	34
EU-27 (% No)	19.0		19.1	0.1	11.9	7.4	0.7	8.2	2.9	3.8	6.0	5.2	1.8	2.4	0.6	0.7	0.6	2.4	1.0	4.3	0.7	0.3	0.3	0.4	100.0
Croatia	136		137	1	85	53	5	59	21	27	43	37	13	17	4	5	4	17	7	31	5	2	3	2	716
	9.3		16.3	-	4.7	7.0	-	4.7	2.3	41.9	4.7	-	-	2.3	-	-	-	-	4.7	-	2.3	-	-	-	43

(*) Data were collected before Croatia became a member of European Union.

Source: EIGE's study on the collection of methods and tools in the area of domestic violence.

Legend

- 1 Awareness-raising campaigns
- 2 Counselling/mentoring/coaching programmes
- 3 Handbooks/manuals
- 4 Informational materials
- 5 Networks
- 6 Direct services
- 7 Helplines
- 8 Training courses
- 9 Guidelines
- 10 Codes of conduct
- 11 Protocols/agreements/intervention schemes
- 12 Minimum standards
- 13 Observatories/monitoring centres/schemes
- 14 Evaluation and monitoring tools
- 15 Statistics and surveys
- 16 Administrative data
- 17 Screening tools/assessment tools (risk and others)



First step: good practices selected by state representatives and/or national experts

State representatives and/or national experts indicated what practices amongst those listed in the questionnaire are considered in their countries to be good practices. From this first selection, a total number of 190 methods and tools were obtained, about one quarter (26.4 %) of the whole collection, fairly distributed amongst the different domestic violence fields of intervention: training (23 % of all of the training methods and tools collected), awareness-raising (24 %), victim support services (27 %) and perpetrators' programmes (31 %); they were also fairly distributed in relation to the different coverage: national (26 % of all of the national methods and tools collected), regional (23 %) and EU (20 %); and in relation to stakeholders: non-governmental organisations (NGOs) (26 % of all of the NGOs' methods and tools collected) and governmental and public institutions (23.5 %). Relevant variations are present, however, at the country level, which mostly depend on differences amongst assessment criteria. The proportion of signed good practices — amongst those collected — ranges from 80 % in Bulgaria or 69 % in Hungary to 11 % in Greece or 5 % in the Netherlands. Finally, considering the practice types, it is worth mentioning that the first five types most frequently signed as good practices are: monitoring centres (60 % of the total number of practices of this type); minimum standards and evaluation or monitoring system (50 %); networking and coordination amongst the same agencies (e.g. shelters) or different types of agencies usually belonging to both the voluntary and statutory sectors involved in domestic violence intervention (36 %); administrative data collection (29 %); and guidelines (28 %).

Second step: promising practices selection

The 190 good practices selected by national state representatives and experts were then analysed and assessed on the basis of the domestic violence list of criteria, in order to identify 30 promising practices.

The operational process directed to identifying promising practices entails different steps that range from general criteria of good design and efficiency — related to the specific practice at stake — to criteria directly connected to the field of domestic violence.

Within EIGE's methodological approach on good practice, practices with potential are assessed according to the following criteria:

1. it has been **working well** (the practice is finished, or at least shows substantial achievement provided by the practice itself);
2. it could be replicated elsewhere (**transferability**);
3. it is good for **learning** how to think and act appropriately;
4. it is **embedded within a wider gender mainstreaming strategy**;
5. it shows **effective achievement in terms of advancement of gender equality** and/or reduction of gender inequalities.

A set of common and specific criteria in the field of domestic violence with reference to the three project focuses (training, awareness-raising and support services) has been developed. The proposed list of criteria/elements and the method to assess promising practices is synthesised in the following scheme.

Criteria and elements to identify practices with potential and to assess good practices combating and preventing domestic violence

Basic elements of a promising practice

Works well
Transferable
Learning potential
Embedded within a wider domestic violence mainstreaming strategy
Effective to eliminate domestic violence, prevent violence, stop/change perpetrators, support victims

Specific criteria of a promising practice

Strong basis in human rights and gender analysis
Clear, appropriate, comprehensive definitions of domestic violence
Women-/victim-centered approach, empowerment
Holds men/perpetrators accountable for their violence
Addresses equality issues and anti-discriminatory practice
Recognises women/victims and men/perpetrators diversity
Monitoring and evaluation
Ongoing financing/fund-raising planning

Specific elements for awareness-raising campaigns

Campaigning ethics
Campaign planning grounded in evidence
Campaign strategy
Campaign implementation
Strong communications strategy
Contact numbers for survivors/perpetrators
Addressing men and boys as perpetrators
Promoting leadership and guidance by the women's movement
Mobilising communities
Multi-sector approaches
Multi-level approaches

Specific elements for training

Well-developed strategy
Balance of methods
Appropriate length
Appropriate time frame
Evidence-based approach
Ongoing training
Multi-levels training
Multi-agency training
Extended training
Vocational training in formal curriculum
Involvement of survivors
Involvement of specialists working with victims
Involvement of experts on specific issues

Specific elements for victim support services

Women's self-determination
Believing, sensitive approach
Comprehensive tailored information and support
Free of charge
Confidentiality and anonymity
Safety-oriented practice
Multi-agency approach
Involvement of survivors and their representatives
Guidance and supervision
Policy and guidelines
Screening
High-risk victims' intervention
One-stop centre/one person support
Diverse services
Crisis and long-term advocacy
Proactive support
Specialised knowledge (diversity)
Protocols
Administrative data collection (Monitoring and evaluation)

Specific elements for perpetrators' programmes

Holding perpetrators accountable
Work to stop violence
Belief that people change
Treat men with respect
Priority to women's and children's safety
Partner contact and support
Risk assessment
Guidance and supervision
Policy and guidelines
Protocols
Collaboration with victim support services
Multi-agency/community approach
Administrative data collection (Monitoring and evaluation)



The adoption of these criteria allowed for the identification of a total of 30 promising practices.

Third step: good practices selection

The selection of good practices was made during a consultation meeting held in Vilnius on 27 September 2012. Three parallel workshops (each related to the three fields of work: training, awareness-raising and support services) were held in order to:

- exchange ideas and knowledge;

- go in-depth into the methodological framework;
- assess and select six practices for each field considered amongst the 30 presented practices with potential.

The three parallel workshops identified **a total of 19 practices out of 30** which were presented. On these, further investigation was done in order to obtain more information and to choose the final 15 good practices.

3. Type of tools in the study



3. Type of tools in the study

3.1. Training on prevention of domestic violence

Gender training relies on a modification in people's self-perceptions, way of relating to others, beliefs, problem-setting and problem-solving skills, competences and knowledge. This modification, in turn, may influence organisational and people's behaviour.

Gender training courses might aim at developing participants' self-awareness by engaging them in a transformative process and utilising reflexivity (transformative or reflexivity training), improving participants' knowledge by delving into conceptual issues; by providing new intellectual tools to find new approaches to solve old problems (knowledge-based training); or by teaching people how to utilise tools such as gender impact assessments, procedures or indicators (competence-based training).

Training courses might include both transformative and competence-based features.

Training as an enabling policy tool relies on the change in people's self-perceptions, way of relating to others, beliefs, problem setting and problem solving, competences and knowledge. On the other hand, this tool is highly contextual so that its goals vary according to the target group, type of organisation by which it is organised or policy sector where it is applied.

Training is also a powerful tool in changing common beliefs that are shaped by stereotypes. In addition, it is effective in shaping institutional cultures and practices that have proved inappropriate in response to new challenges. The eradication of domestic violence is one example of those emerging challenges.

Training is widely recognised as a crucial activity in changing not only institutional cultures and practices but also social and cultural behaviour with regard to violence against women in general and domestic violence in particular. Training in approaching and addressing domestic violence is widely recognised as a key component of prevention strategies. It can contribute to primary and secondary prevention strategies ⁽⁴⁾ targeting the general public or specific

⁽⁴⁾ The concept of the three levels of prevention has been used extensively within the health sector, but also in criminology. As for the health sector, health services usually engage in secondary prevention, aiming at stopping or minimising gender-based violence (GBV), through screening for GBV, to identify women and girls experiencing GBV and providing the needed support and referrals to prevent additional occurrences of GBV. Health services also undertake tertiary prevention: treatment and harm reduction for those women and girls with severe injuries and health consequences from GBV. ('Addressing violence against women and girls in sexual and reproductive health services: A review of knowledge assets', UNFPA, 2010, p. 34 (http://www.unfpa.org/webdav/site/global/shared/documents/publications/2010/addressing_violence.pdf))

In criminology, the concept takes into account the relevance of considering on the one hand victims, authors and situation/environment and on the other hand primary (general population), secondary (groups at risks) and tertiary (identified victims and authors) prevention strategies. In this publication, the concept is used considering the

3. Type of tools in the study

groups at risk of becoming victims or perpetrators of domestic violence. It is a fundamental feature of tertiary prevention strategies especially in relation to the staff of voluntary and statutory agencies contacted by victims and/or perpetrators. Domestic violence is in fact a multidimensional problem which needs integrated and coordinated responses at all levels.

Training in approaching and addressing domestic violence can be used in different contexts and for different purposes, responding to multiple needs and objectives:

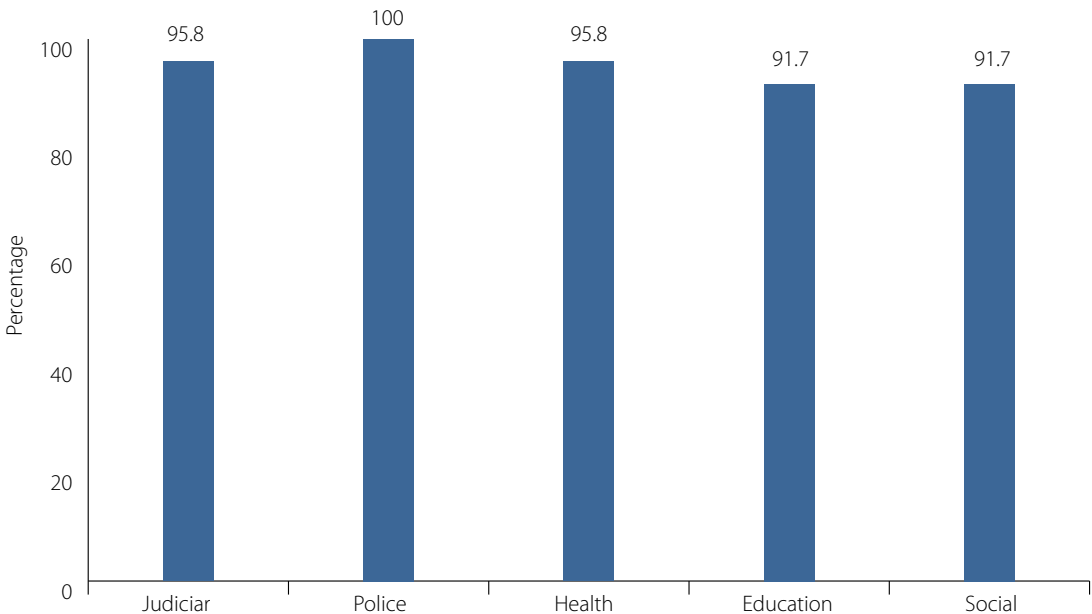
- to inform and transfer knowledge on the most up-to-date research results on the prevalence and seriousness of domestic violence that demonstrates its gendered dimension and its effects and

consequences on victims' health, well-being and citizen status. In doing so, it is also instrumental in showing that domestic violence constitutes a human rights violation and a major public problem;

- to present available methods and tools that help detect domestic violence at the first contact with women and men asking for help without disclosing their status of being either domestic violence victims or perpetrators;
- to explain domestic violence patterns and dynamics and the whole range of victims' needs and requests, thus helping to approach them in a respectful and sensitive way, paying attention to diversity;
- to present available methods and tools to assess the risk of fatal or escalating domestic violence;
- to enhance skills and capacities to respond appropriately in different settings considering the paramount objectives of victims' safety and empowerment as well as the need to challenge perpetrators' use of violence, thus providing opportunities for change.

importance of having at disposal an integrated model of domestic violence prevention measures which combines three different subjects of intervention (offender-oriented, institution-oriented and victim-oriented measures) and three different levels of intervention (whole population — primary; group at risk of being victims or perpetrators of DV — secondary; problem groups that are groups of victims and perpetrators of DV — tertiary).

Training: methods, tools, provision and implementation





Typologies of training in addressing domestic violence

- **Awareness-raising training** for different groups among the general public or for professionals to inform and to be sensitive to the main features and relevance of the problem.
- **Specialised training** for professionals to enhance skills and capacities to respond appropriately to victims and/or perpetrators or persons in contact with them who ask for help.
- **Training for trainers or cascade training** for different target groups to promote knowledge transfer within the same professional or community sector.
- **Training for domestic violence victims** to rebuild capacities and skills, when necessary, usually to re-enter the labour market or to regain self-confidence.

Training implementation across Europe

The study shows that there is wide recognition of the value of training in dealing with domestic violence, and that it is a key tool for a successful strategy to tackle domestic violence by the EU-27 and Croatia. This practice is often included in the overwhelming majority of national action plans (88 %) and in two fifths of Member States in their legal provisions (40 %). To a lesser extent, it is present in regional action plans (44 %) and/or legal provisions (16 %). At the programming level, in more than 90 % of the EU-27 and Croatia training provisions on domestic violence cover all relevant professional sectors.

In most countries, training in tackling domestic violence is almost equally delivered by governmental

institutions or departments (87 %) and NGOs (83 %). Regions, local governments and professional bodies are present as stakeholders in more than half of the EU-27 and Croatia.

During the study, 136 examples of the training implemented on addressing domestic violence methods and tools were collected all over the EU-27 and Croatia. These examples included: training curricula, manuals, networks and implemented training courses (in several cases monitored and evaluated). Specific professional sectors are the large majority of the targeted groups (67 %). Amongst them, police forces and the judiciary are the most represented, followed by health personnel. A quarter of the training methods and tools collected are directed at multi-agency groups of professionals that might include police forces, the judiciary and the social and the health sector, which represented a positive recognition that domestic violence needs an integrated and coordinated response.

The provision of training in dealing with domestic violence in formal education (official curriculum) is a crucial step forward to guarantee training continuity and systematic delivery. It represents a substantial condition for training activities to be effective in the medium- and long-term perspective and an indicator of the recognition of its relevance. The results of the study show that in the majority of the EU-27 and Croatia (64 %), training on tackling domestic violence is more frequently present in formal curricula for police forces.

Examples of mandatory ongoing training were found for police forces and the judiciary sector together with guidelines and/or protocols of intervention, which are sometimes an outcome of the training activity.

3.2. Awareness-raising

Social awareness remains an area that requires greater activity and public action: as stated by the Council of Europe (2009) ⁽⁵⁾, awareness-raising programmes and campaigns should be launched in all Member States to draw public attention to violence against women, and more specifically to its causes and damaging effects for both the victims and the community. In particular, it is suggested **that awareness-raising programmes and campaigns are required to emphasise the fact that violence against women is not a private matter, but a violation of human rights**. Awareness-raising activities and programmes should, in the long term, pursue the aim of altering the ideas, attitudes and prejudices which persist and which constitute factors that may lead to violence.

Awareness-raising is a two-way street, fostering communication and information exchange in order to improve mutual understanding, mobilising communities and wider society to bring about necessary change in attitudes and behaviour.

While situations are sometimes perpetuated by the attitude ‘this is how it has always been and nothing will or can change’, it is useful to underline the importance of awareness-raising efforts to convince target audiences that change is both desirable and possible. It is only by educating communities and providing them with knowledge, capacities and motivation that the process of social change can begin.

In most EU countries, social awareness of the issue corresponds to the extent of the phenomenon itself — due primarily to the ingrained socio-cultural attitudes that make violent behaviour against women tolerated and considered a private matter.

Awareness-raising is a fundamental component of primary prevention strategies aiming at:

- changing attitudes, behaviours and beliefs that normalise and tolerate domestic violence among the general public;
- preventing men and women from becoming victims or perpetrators of abusive relationships; and
- informing the wider public and especially victims and perpetrators about the resources available to tackle the problem.

Implementation of awareness-raising campaigns across the European Union

The results of the study show (or confirm) that public-awareness campaigns are widespread among the EU-27 and Croatia. They are widely represented as a key tool in the national action plans of most Member States (87.5 %), and to a lesser extent also in regional action plans (37 %). The importance of awareness-raising campaigns on domestic violence is also considered within legal provisions at both national and regional level in 25 % and 20 % of EU-27 and Croatia respectively. In addition, one fifth (20 %) of the EU-27 and Croatia have already identified good practice assessment criteria for domestic violence awareness-raising campaigns.

Awareness-raising initiatives: methods, tools provision and implementation

During the study, 144 examples of implemented domestic violence awareness-raising campaigns were collected all over the EU-27 and Croatia. Among those:

- 76 % have a national coverage and 22 % a regional one, while the remaining ones are transnational campaigns;
- 52 % are promoted by NGOs; 42 % by governmental bodies or statutory agencies; and 6 % by other actors like research institutes. Often, they are jointly conducted.

Collaboration between different stakeholders is one of the key factors for successful campaign-

⁽⁵⁾ <http://www.consilium.europa.eu/uedocs/cmsUpload/16173cor.en08.pdf>



ing: the involvement of governmental institutions adds strength to the campaigns and allows system-wide impact, while the expertise of NGOs can provide specialised knowledge and a link between the campaign's messages and support services in a specific locality/country.

Most of the examples of domestic violence awareness-raising campaigns collected are addressed to the general public with a significant proportion targeting boys and girls.

Leaflets, brochures, handbooks and manuals were also collected (total number of 157) implemented examples directed at professionals (61 %) and at victims (39 %), mainly with a national coverage.

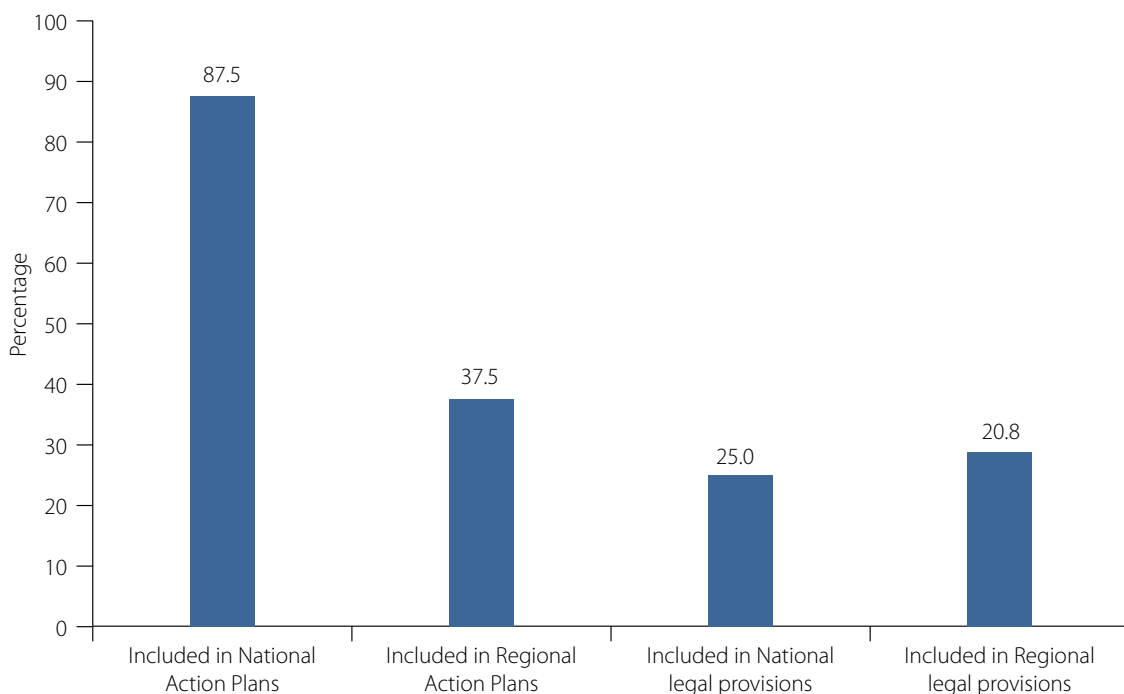
Handbooks and manuals are usually perceived as relevant tools offering professionals organised and handy knowledge which they can manage individually or in groups. Leaflets and brochures are fundamental tools to spread knowledge on victim

support services and programmes aimed at perpetrators and to promote the key message that a way out of violence is possible.

The most recent trends in awareness-raising methods and tools collected as part of this study include the following:

- websites and information materials specifically designed and conceived to meet the needs of ethnic minority and migrant women who are victims of domestic violence;
- websites and information materials specifically designed and conceived to meet the needs of disabled women who are victims of domestic violence, including deaf and blind women;
- lesbian and gay communication strategies directed to overcome the taboo of same-sex violence;
- minimum standards for domestic violence awareness-raising campaigns.

Awareness-raising initiatives: methods, tools, provision and implementation



3.3. Support services

‘The term “support service” encompasses organisations providing a range of options that enable women to create safety, seek justice and undo the harms of violence. Such options include: listening; advice; advocacy; shelter; self-help; counselling, protection and prosecution; and access to activism’ (Kelly, 2008, p. 10 ([http://www.coe.int/t/dghl/standardsetting/equality/03themes/violence-against-women/EG-VAW-CONF\(2007\)Studyrev_en.pdf](http://www.coe.int/t/dghl/standardsetting/equality/03themes/violence-against-women/EG-VAW-CONF(2007)Studyrev_en.pdf))). Victim safety, empowerment and protection are the paramount objectives of any support service.

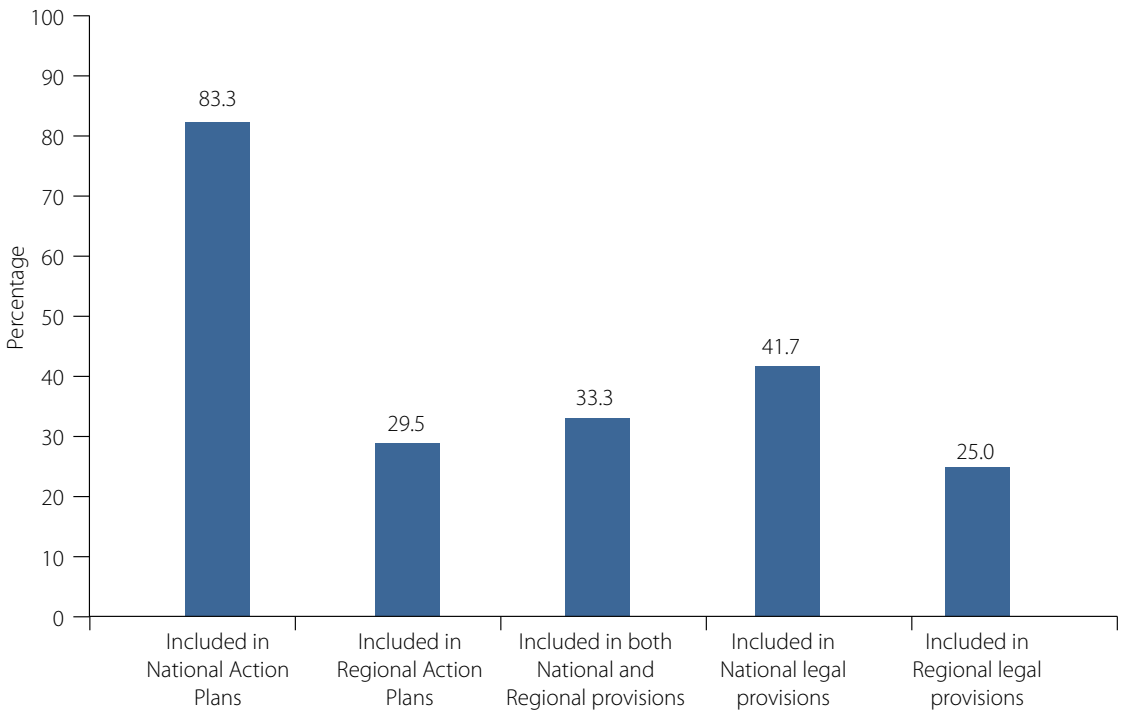
Support services dealing with domestic violence are specialised organisations or units within general services that provide help to the victims of violence, usually women and their children. They help them

escape from violence; seek protection and justice; and recover from traumatic experiences. Options include: listening; advice; advocacy; shelter; self-help; counselling; protection and prosecution; and access to activism. They were initiated in the 1970s by women’s NGOs and are now internationally recognised as key resources for domestic violence victims. These are now spread in almost all of the EU-27 and Croatia.

Since the end of the 1980s, the work with perpetrators ‘rooted in women’s safety and domestic violence prevention’ has increasingly become recognised as a key component of support services.

They both belong to tertiary prevention measures, aimed at avoiding further victimisation and lethal violence.

Victim support services: methods, tools, provision and implementation





Victim support services: methods and tools provision and implementation

The results of the study indicate that 83 % of the EU-27 and Croatia included victim support service methods and tools in relation to domestic violence in their national action plans and 42 % in national legal provisions. Regarding both sources, they are present in almost all countries (96 %) at both the programming and implementation levels. In almost three quarters of the EU-27 and Croatia (71 %), national and/or local standards for victim support services are also available.

A total number of 254 examples of implemented victim support service methods and tools were collected all over the EU-27 and Croatia and will be available on EIGE's website. Of these:

- 61 % have a national coverage, while 39 % are implemented at the regional level;
- 54 % are promoted by NGOs, while 44 % by governmental bodies or statutory agencies, and 2 % by other actors.

About half (49 %) of the collected methods and tools focus on victims: mostly women and children, but also families, couples and victims and perpetrators separately. The majority of support services include counselling, mentoring or coaching programmes; legal aid provisions; electronic devices for protection and other safety measures; and employ-

ment tools and methods supporting the victims in re-entering the labour market.

About one third (28 %) of the collected methods and tools represent different models of direct services.

Around 40 % of the collected methods and tools are aimed at professionals in cross-sectoral (or multi-disciplinary) groups or at professionals from individual sectors. The methods and tools collected include, among others: networks guidelines, codes of conduct, protocols, minimum standards, monitoring centres or schemes, performance assessment tools, administrative data collection, screening and risk assessment tools.

During the study, alongside victims' support services, programmes aimed at perpetrators have also been mapped and collected. A total of 48 examples of implemented methods and tools related to such programmes were collected.

The collected methods and tools are mostly directed at perpetrators (82 %), while a few at couples or victims and perpetrators treated separately (4 %). They mainly consist of counselling, mentoring or coaching programmes (69 %). The remaining part is directed at professionals (16 %) and consists of networks (11 %) and guidelines or minimum standards (7 %) required for the work with perpetrators.

4. Comparative qualitative
overview of the
implementation of methods
and tools at EU level



4. Comparative qualitative overview of the implementation of methods and tools at EU level

Recent trends in domestic violence training, awareness-raising and support services can be synthesised as follows.

- **Professionalisation and specialisation processes**

Further professionalisation of NGO personnel is mainly developed through training activities. The training activities are connected with the diversification of victim support services to meet specific needs and in consideration of the difficulties for victims to access qualitative and free services. Guidelines and minimum standards are also adopted to improve the effectiveness of services.

- **Coordination and integration**

The multi-agency work through 'top-down' processes usually involves multi-agency training activities and then leads to the creation of manuals and protocols of action. It can also involve the establishment of specialised coordinating bodies, at the local and/or national level.

- **Monitoring systems and administrative data collection**

The development of monitoring methods and tools usually goes together with administrative data col-

lection. They might be introduced through 'top-down' processes that involve the creation of institutional monitoring bodies; through processes started by the non-governmental sector and then supported by state agencies and adopted in new localities; or through the development of a domestic violence monitoring system at the state level with the purpose of getting administrative data on domestic violence from different agencies.

- **Specialised domestic violence networks and/or centres**

In the last decade, specific resources — like network and centres — have developed to collect materials, analyse them and monitor developments in specific fields of action such as domestic violence training or awareness-raising.

- **Multi-levels, multi-sectors and multi-methods and tools approaches**

Effective interventions are often conducted at multiple levels so as to mobilise a wide range of individuals, local groups, governmental institutions and other decision-makers for change.

4.1. Comparative qualitative overview

Professionalisation and specialisation processes

From the point of view of the non-governmental sector, that is NGO intervention, **a process of professionalisation and further specialisation emerges from the mapping of methods and tools** — especially in countries like Denmark, Germany, Sweden and the United Kingdom — where women's NGO activities started earlier. Manuals and standards of intervention have been produced in these countries to enhance the intervention skills and capacities of shelter workers, especially in relation to the diversity of victims, specific connected needs and to homogenise their methodology of intervention with service clients. Examples of methods and tools that produce further specialisation and/or professionalisation are: the Danish 'Counselling and treatment manual' (2012); 'Performance management approach' produced by the NGO Mothers' Aid for its staff; 'This is how we work' by Dannerhuset (2010); 'Intranet materials' on how to assist victims in shelters (2009); 'LOKK Information database' produced by LOKK (the national association of women's shelters for shelters workers) (2011); the German 'Access for all' guidelines for establishing appropriate first contact with disabled women (2011) produced by several women's NGOs amongst which are the Association of Women's Shelters and the German Network of Lesbians and Girls with disabilities; a 'Media Package' for shelters (2012), produced by Frauenhauskoordination e.V., directed to support shelter workers in professionalising their public presentations; the Swedish 'Study guide to female victims of violence with substance abuse or addiction problems' (2012) for both NGOs and statutory agency workers, produced by the Swedish National Board of Health and Welfare; 'Guidelines for making shelter facilities more accessible to women with disabilities' (2007) produced for shelter workers by the development centre Double Exposure; and the British 'national service standards for domestic and

sexual violence' (2009) drafted by a national umbrella organisation of women's aid for its member services.

The development of methods and tools to standardise perpetrator programmes either directly connected with the criminal justice system, that is delivered through the probation as alternative measures to prison or on a voluntary basis usually delivered by NGOs, might also be considered a recent trend found in countries like Germany and England, where perpetrator programmes have been spreading since the late 1980s.

From the point of view of state agency specialisation, training activities are the first and paramount tool of intervention, especially when mandated by the state. Amongst the methods and tools collected, there were identified examples of training provided in formal curricula — that is ongoing pre-training and/or in-service training — for police forces and the judiciary, especially in countries characterised by strong state 'top-down' intervention strategies and sometimes delivered in collaboration with professional institutions like the police or judicial academy or specialised NGOs. These training initiatives often go together with the production of guidelines and manuals to standardise intervention. Examples of training collected with these characteristics exist in the Czech Republic, Croatia, Poland and Slovenia. Mandatory pre- and in-service police training is also delivered in Ireland and Luxembourg (see good practice selection). Most frequently, however, domestic violence training takes place on a voluntary basis and is delivered by women NGOs — sometimes as spot initiatives, sometimes as ongoing initiatives with a long-standing tradition like the domestic violence training conducted by women's NGOs at the national police school in Austria, which started in the 1990s.

The analysis also shows that health and social service training usually takes place on a voluntary basis, with the health sector most often operating in a single rather than the multi-agency setting adopted in the social service sector. Amongst health sector personnel, hospital accident and emer-



agency doctors and general practitioners are the groups most often involved in training activities. Several tools, like screening tools guidelines and manuals, have been produced in a number of Member States to address three different aspects: early identification of domestic violence cases including when victims do not directly disclose the problem; properly approaching victims and addressing the consequences of violence as well as court evidence documentation; and appropriate referrals to specialised support services. Training, screening tools, manuals, protocols and/or guidelines directed to health personnel are to be found in the Czech Republic, Spain, France, the Netherlands, Poland and Sweden. **Where healthcare professionals are not a direct target of methods and tools they can still be targeted via multi-agency practices.** The training curriculum 'Violence against women and children' — victim protection in Vienna's hospitals (curriculum 'Gewalt gegen Frauen und Kinder' Opferschutz an Wiener Krankenanstalten) — has been implemented with the aims of improving responses to victims of domestic violence through early detection, establishing treatment standards, streamlining internal communication processes, defining emergency treatment plans, communicating know-how on *extra mural* assistance resources and establishing a victim protection group in hospital. Project implementation took about 4 years and started with research designed to detect training needs amongst professionals; it has involved about 900 participants from several hospital departments: physicians as well as nurses, midwives, psychologists, social workers and administrative staff. The feedback survey showed that participants were very satisfied with the training course and interdisciplinary multi-agency groups have been created on a permanent basis in some of the targeted hospitals. The medical intervention against violence project (model project Medizinische Intervention gegen Gewalt (MIGG)) is a 3-year training project based on international standards for health units which has been tested with several self-employed medical practitioners in five regions of Germany. A total of 136 doctors (77 female and 60 male with different specialties) were trained on how to approach women victims of violence and to signal where they

might get further help by supporting the network development of organisations working with women victims of violence. The training was very successful, as testified by interviews with both trainers and trainees. Organisations and authorities working with women victims of violence were also involved, in order to improve network structures and to integrate healthcare in the overall intervention. The best outcome with regard to the latter was in Berlin because networking was continued after the end of the pilot project and was financed by the Berlin government. Both good practice examples highlight the potential of successful training activities in producing long-term effects and impacts on both the individual targeted sectors and on the coordination and integration of responses to domestic violence, another important dimension of appropriate responses.

Coordination and integration of interventions

Coordination and integration of responses to domestic violence, that is multi-agency work, has emerged as a frequent objective of the domestic violence methods and tools found in many Member States. The main types of methods and tools adopted to promote this crucial feature is multi-agency training, manuals and guidelines usually targeting mixed groups of professionals which include: police forces, the judiciary, social and health sectors and specialised women's NGOs. Manuals and guidelines of multi-agency interventions, as well as protocols of intervention, sometimes stem directly from training experience. Examples of this type of practice are found in Bulgaria, the Czech Republic, Ireland, Greece, Italy, Cyprus, Malta and Finland. This 'horizontal' process often develops locally and might be very effective in making the connections — discussing and sharing definitions and principles of intervention amongst professionals that usually work in different segmented sectors — that are crucial to effective coordination. However, if no formalised agreements and/or protocols of intervention are signed, these initiatives might be fragmented and hardly sustainable over time. The fact that they might be promoted by the state does necessarily mean that

they are ongoing. Moreover, they still remain of crucial relevance in local and national contexts where no institutional initiative has been taken to enhance coordination and integration, as in Italy.

Amongst the collected tools there are some examples of 'top-down' processes of coordination, characterised by the creation of institutional coordinating bodies and/or entities, usually following the approval of a new law on domestic violence. An example of a model of coordination and integration is present in Poland where, promoted by the Ministry of Labour and Social Affairs, 35 specialist support centres for domestic violence crime victims were created, providing integrated (psychological, social, legal, financial) support in 2006. A similar process is evident in the Czech Republic where 18 intervention centres offering integrated responses in domestic violence cases, financed and coordinated by the Ministry of Labour and Social Affairs, have been operating since 2007. In Spain, after the approval of the law on gender violence (2004), and Luxembourg, after the approval of the law on domestic violence (2003), multi-agency work came to be a feature of institutional top-down intervention involving specialised support services NGOs.

Sometimes these functions are performed by the creation of an ad hoc single professional in charge of both coordinating agency interventions in individual case work and of keeping close contact with domestic violence victims. The independent domestic violence advisor (IDVA) might be considered an example of this approach, tailored to meet the specific needs of women at high risk of serious and/or lethal violence. The IDVA works in close collaboration with the multi-agency risk assessment conference (MARAC).

A professional role that shares some characteristics with the IDVA is the French *Référent violences conjugales*, promoted by the ministry in charge of women's rights. NGOs are involved in service delivery with the aim of promoting the sustainable and comprehensive care of women victims of violence within 'the couple',

giving them a response tailored to their circumstances and ensuring the support of the victims.

Monitoring systems and administrative data collection

The adoption of monitoring systems — usually connected with administrative data collection — is crucial to enable an assessment and evaluation of 'what works' and 'how it works' with regards to different types of intervention and subjects: from service delivery to awareness-raising campaigns, from hospital accident and emergency departments to the criminal justice system. Despite the existence of monitoring systems inside agencies — depending on national contexts — they represent a relatively new development because both detection and registration of domestic violence cases have been lacking.

Amongst the collected examples there are different methods of monitoring: centralised monitoring working at the state level collecting domestic violence data from all relevant statutory agencies and producing national reports is found in Poland; centralised domestic violence criminal statistics that take into account the relationship between victims and perpetrators, traditionally not available because of the 'offence centre' system of data registration in use is found in the Czech Republic; and individual agency administrative data that might be coordinated at the national level as for example women's NGO shelters are found in Denmark and Germany.

Two different methods of data collection or monitoring systems are worth mentioning because of their objectives, effectiveness and differences.

In Luxembourg, following the approval of the law on domestic violence in 2003, a specific structure, the 'Comité de coopération entre les professionnels dans le domaine de la lutte contre la violence' at the ministerial level (cooperation committee) was created. Since then, it has had an important role as a discussion forum amongst professional actors, it has ensured better coordination and cooperation in the field of domestic violence and has been a key instrument in reporting/evaluating positive outcomes and



pitfalls in the implementation of the new law. This is an example of good practice that stems from government initiative, open to the contribution of specialised NGOs working in the field, addressing the crucial problem of law implementation and monitoring the fundamental functioning related to specialised training for the bodies in charge, the police forces and the judiciary.

A different practice addressing a similar problem is the court watch project that started in 2006 at both the Varna regional and district courts in Bulgaria. The watch is conducted by four not-for-profit organisations — ‘Demetra’ association (Burgas), ‘Youth Alliance’ association (Varna), ‘NGO centre in Raggrad’ and ‘Bulgarian gender research centre’ foundation (Sofia) — with the aim of obtaining information on the demographic characteristics of the victims and the perpetrators that enter the criminal justice system; on the results of the imposed penalties; and on the quantity and the quality of the work the judges and their auxiliaries have carried out in order to improve the effectiveness of the protection of domestic violence victims, to raise the awareness of judges and prosecutors on the issue of victim protection and to increase the visibility and publicity of justice done in cases of domestic violence.

Domestic violence networks and/or centres specialised in specific domestic violence fields of intervention

There are **several examples of methods and tools in these fields, showing the high level of specialisation achieved.** There are specialised networks like the Andalusian network for training and awareness-raising against gender violence (‘Red FORMMA’) that supports the public health sector via training courses and awareness-raising activities on domestic violence and promoted by the Ministry of Health and the Regional Health Office (‘Consejería de Sanidad’), and the Gesine network developed in Germany (Ennepe-Ruhr region) to make professionals in the health service aware of domestic violence,

its extent and consequences for victims, to implement basic standards in the care of women affected by domestic violence and to strengthen resources for referrals. Specialised tools like the inventory and analysis of the training materials and awareness on gender violence by the National Delegation for Gender Violence and Women’s Institute are directed to identify, locate and collect copies of existing training materials; generating an inventory of materials; analysing the content of such materials against a range of criteria consistent with objectives — product quality, training, use of inclusive language and transferability, etc.; and to translating findings from this analysis in a general assessment report. In addition, the Ready Reckoner Tool, available in the United Kingdom through the Home Office, enables commissioners of services from a range of providers, such as health, policing and housing, to estimate the need for local services for domestic violence, sexual violence and stalking in their area and domestic violence statistics that can be directly downloaded. Specialised domestic violence training and research centres have developed both autonomously, like the Coordinated Action Against Domestic Abuse (CAADA), and within main national NGOs like the training centre for women’s aid, offering professionals a range of awareness-raising and training tools.

Multi-levels, multi-sides, multi-methods and tools practices

Several practices were implemented through a range of different methods and tools working at multiple levels — involving different target groups in the community. This is, in fact, the feature of good practice that needs to be highlighted as a dynamic factor that enhances overall effects and impacts. Amongst identified valuable approaches, it is worth mentioning awareness-raising campaigns like ‘Silence is not golden’ (Šutnja nije zlato), implemented in Croatia and directed to raise awareness on domestic violence and gender stereotypes amongst the young, or the well-known Scottish ‘Zero tolerance’ campaign.

Annex

Good practices



Annex

Good practices

The good practices were assessed in a consultation meeting, in September 2012, in Vilnius.

The meeting gathered experts and stakeholders from EU Member States working on gender-based violence.

The selected good practices, chosen among 30 practices with potential, do not intend to represent the whole range of experiences in all Member States but they are supposed to present effective approaches adopted in the EU to tackle and eradicate domestic violence, with specific focus on awareness-raising initiatives, training and support services.

Awareness-raising

Austria	'Behind the façade' — travelling exhibition
Croatia	'Silence is not golden' ('Šutnja nije zlato') — national campaign to prevent gender-based violence
Denmark	Break the silence — stop violence against women
France	2010 Grande Cause Nationale
Netherlands	MySecrets Cosmetics

Training

Austria	Curriculum 'Violence against women and children'
Luxembourg	Specialised training on domestic violence for future members of police forces in the Grand Duchy
Slovakia	Specialised training for professionals working in public institutions represented in the Working Group on Prevention and Elimination of Intimate Partner Violence Against Women in Košice
Spain	Master's on abuse and gender violence
United Kingdom	Independent domestic violence advisor (IDVA) training

Support services

Bulgaria	Court watching to monitor the implementation of the law on victims' protection against domestic violence
Germany	Medical intervention against violence (MIGG)
Germany	Standards and recommendations for working with male perpetrators in the context of inter-agency cooperative alliances against domestic violence
United Kingdom	Multi-agency risk assessment conferences (MARACs)
United Kingdom	The Respect accreditation standard

‘Behind the façade’ — travelling exhibition (Wanderausstellung: ‘Hinter der Fassade’), Austria 2005–14

Taking the message to the masses

Summary

In 2005, Austrian NGOs active in supporting victims of domestic violence decided to take their message to the masses by means of a travelling exhibition. They came up with the idea of telling the story of abuse in the home by mocking up a stand to look like the interior of a flat. Visitors walk from one room to another, undergoing an immersive experience which heightens the emotional impact. On the way, they gain an understanding of the causes of family violence, what it means in practice, what the law says and what the sources of help are.

The exhibition has won several prizes, and has toured 29 locations all over Austria as well as being invited to events abroad. So far it has been seen by 15 000 people, many of them visiting in school groups.

The initial investment came from public sources, but the exhibition now pays its way by charging a fee to cities and organisations that hire it.

Act on Protection against Domestic Violence entered into force in May 1997 ⁽⁶⁾. Following several amendments, in 2009 a comprehensive second package of laws on violence protection was adopted ⁽⁷⁾. The state and its institutions acknowledge that violence against women and children is a public concern, and it provides means for concrete protection measures. As regards the policy approaches adopted, the main focus lies on prevention programmes and support for victims of violence. The former is mainly developed through awareness-raising campaigns, the latter through the establishment of men’s and women’s counselling centres throughout Austria.

An exhibition on domestic violence

One of these awareness-raising activities was the creation of a travelling exhibition. The ‘Behind the façade’ exhibition was designed in 2005 with the aim of helping to end violence in the family and in society by presenting strong visual awareness-raising tools and giving detailed information on the problem of domestic violence, legislation, available support facilities for victims and how to work with perpetrators.

It was put together by Gewaltschutzzentrum Oberösterreich (Upper Austria Centre for Protection against Violence) and Verein Autonome Österreichische Frauenhäuser (Austrian Association of Independent Women’s Shelters) together with the ministries of equal opportunities and home affairs.

Context analysis



Although Austria has no national action plan on domestic violence against women, it is often taken as role model for legislation and in particular for the implementation of anti-violence legislation. The Federal

⁽⁶⁾ Logar, 2005.

⁽⁷⁾ Initiated by the Women’s Minister, Johanna Dohnal, in close cooperation with Caspar Einem, Minister of the Interior, an interministerial working group was convened, composed of staff of women’s shelters, police officers, judges and lawyers. This resulted in the Federal Act on Protection Against Domestic Violence (Federal Chancellery — Federal Minister for Women and Civil Service, 2008, 12ff).



It uses powerful visual messages and displays research data on domestic violence and useful information on resources available on how to tackle the problem. The exhibition addresses the general public, and its effectiveness is shown by the fact that it has been visited by 15 000 people, mainly school pupils, in 29 different locations. It has also produced an impact at the local level through the involvement of organisations supporting victims of domestic violence and treating perpetrators. These are in fact the subjects that most frequently hire the exhibition.

The exhibition's design is innovative: it is built like a flat consisting of a kitchen, a bedroom, a children's room and a living room. The four rooms constitute the 'stage' to present the exhibition's themes: the social causes of domestic violence, its dynamics, the forms it takes, children as witnesses to domestic violence, a historical overview of Austrian legislation and ways to seek help and find the resources that are available.

Three or four audiovisual installations enable visitors to listen to and watch the stories of eight women who were subject to domestic violence, but managed to flee from it. For example, in the video 'Do you know that too — true stories of home' (BiG), five girls and boys relate their experiences of witnessing domestic violence. The video 'The problem is my wife' (Calle Overweg) presents working with violent offenders who beat their wives.

Finally, the first steps taken to break the taboo on violence in the family are presented together with the public measures approved, for example through the Violence Protection Act.

Prize-winning show

The exhibition has not been formally evaluated, and internal monitoring only registered the number of visitors and the feedback they gave. However, a proxy for its value can be found in the fact that the

exhibition has won several prizes and was selected for a roadshow in Britain. In December 2006 it won the Green Award in the category of women. During International Women's Day in 2007, the exhibition was shown in Vienna at the Federal Chancellery and opened by Chancellor Alfred Gusenbauer and Minister Doris Bures. On 29 and 30 April 2008, on the occasion of the EU equal treatment event in Vienna, 'Behind the façade' was presented in the Parliament building. In 2009, it was presented in Glasgow and London, and in June 2010 in Vaduz, the capital of the Liechtenstein.

However, its impact could have been improved through the translation of the exhibition brochure into other languages (for example English and Turkish).

'Behind the façade' is also financially sustainable. It covers its running costs by charging a fee of at least EUR 4 500 to organisations or cities who ask to host it. In many cases, these fees are paid by the local authorities and governmental offices in the cities where it is displayed. There are no plans to try to raise additional funding. Its design and production were supported by ministerial funding, while national ministries also contribute to its ongoing use through, for example, financing the brochure. Because the exhibition is paid for directly by the organisers in various Austrian cities, the practice is considered to have a good balance between cost and result (efficiency).

Challenging cultural perceptions

The exhibition is a successful way of raising awareness on domestic violence, helping people to understand its causes and consequences, and communicating practical information on victims' rights and on resources available for them, as well as information on how to work with perpetrators. All these factors contribute to gender equality, by helping to dislodge the cultural perception that domestic violence is a private problem alone.

The exhibition's audience appeal comes from its being based on victims' experiences, yet also giving a complete overview of the causes of domestic violence. The exhibition brochure is short and gives a good overview of the main issues related to domestic violence, and thus many people have had the chance to read it.

From the organiser's point of view, the construction is flexible and can be moved to different towns, thus reaching a nationwide audience. There are however some technical drawbacks. It takes 2 or 3 person-days to dismantle and rebuild, and is heavy, requiring a van to move it about.

The experience of the exhibition teaches that the 'theatrical' presentation of the issues of domestic violence by setting them in a reconstructed domestic environment is a good way to involve people emotionally. It works by involving not only the general public but also local organisations working with victims and perpetrators, thus enhancing impact in the community.

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Brochure: http://www.gewaltschutzzentrum.at/ooe/down/Fassade_Broschuere09.pdf



‘Silence is not golden’ (‘Šutnja nije zlato’) — national campaign to prevent gender-based violence, Croatia 2007–08

Using creative techniques to change attitudes to violence

Summary

The ‘Šutnja nije zlato’ (‘Silence is not golden’) campaign, carried out in Croatia in 2007–08, used a national multimedia campaign backed up by work in schools to raise awareness of the different types of gender-based violence — family violence, violence in relationships (date rape) and human trafficking — and the connections between them.

The project first researched public attitudes, and then used the results to mount its campaign. It used television spots (provided free of charge by broadcasters), billboards, illuminated signs, magazine advertisements as well as leaflets and the Web.

The campaign also wanted to change the attitudes of tomorrow’s decision-makers. It organised seminars for 64 secondary-school teachers, which were recognised by the Teacher Training Agency. Once they had been trained, the teachers organised creative projects with 1 200 of their pupils, who produced films, plays, newspaper articles, comics and a radio show. The best of these were awarded prizes at a final ceremony.

The results are striking. There was almost unanimous praise for the campaign, and it provoked an uncommonly high degree of civil engagement: as many as 31 % of pupils who took part said they would like to join an organisation supporting victims of gender-based violence.

Two main lessons emerged: that a well-researched and well-executed media campaign can change attitudes and that offering a change to be creative can successfully engage boys and young men in the fight against gender-based violence

Putting policy into practice

Gender-based violence (GBV) is widespread in Croatia and has been tolerated for decades. While violence in the community, and particularly youth violence, is highly visible and generally labelled as criminal, GBV is generally hidden from the public view. Moreover, the police and courts are less prepared to target such hidden violence or to take action against it.



However, at policy level, things have improved significantly in recent years. The Law on Protection against Family Violence was adopted in 2003 and was followed in 2007 by the national strategy on protection against family violence for 2008–10. These were accompanied by the rules of procedures in cases of family violence. Although the national strategy deals with family violence in general, it specifically refers to international documents on violence against women and, following the Council of Europe Recommendation (Rec (2002)5), quotes the definition of violence against women (page 4). On this basis, the government formulated and implemented the national campaign against family violence against women 2006–08.

The campaign aimed to raise awareness of gender stereotypes and other causes of GBV among young people — the decision-makers of the future — and to promote the values of gender equality in young people’s attitudes and behaviour. It was principally targeted at secondary-school pupils

and teachers and at decision-makers, but also at the general public.

The organisers were Centar za Edukaciju, Savjetovanje i Istraživanje (CESI) (Centre for Education, Counselling and Research) and Otvorena Medijska Grupacija (OMG) (Open Media Group). Financial help came from the European Commission, the Ministry of Science, Education and Sport and CARE International. Its efficiency was boosted by the broadcasting of TV clips ensured by Croatian television and RTL Croatia free of charge.

A multi-channel campaign

‘Silence is not golden’ researched the recognition, understanding and frequency of GBV among adolescents, and then, based on the results, launched a media campaign. The main themes were family violence, violence in relationships (‘date rape’) and human trafficking. It used several channels: four TV spots were broadcasted for 2–3 months on national television, a range of printed materials was distributed, billboards and illuminated signs rented, magazine advertisements placed and a campaign web page created.

It then organised seminars for teachers in order to enhance their skills and knowledge on GBV. These were followed up by creative workshops with young people. In the 5 months following the seminar, each teacher who attended organised at least one project on the issue of GBV with their students, such as a film, comic or play. These were presented at an award ceremony at the final gathering and on a CD. The campaign educated 64 teachers on the use of creative techniques in work with youth on preventing GBV, and 60 schools exchanged their ideas and practices. In these schools, 1 200 young people gained knowledge and awareness on GBV, and they produced 25 films, 16 theatre plays, 10 newspaper articles, one radio show and 34 comics.

The campaign also held public discussions between celebrities and young people on their views and experiences with GBV, and attempted to influence public policy by advocating the inclusion of a gender perspective in prevention programmes for young people.

A unique intervention logic

The project progress was monitored by the Regional Monitoring Office in Sarajevo which is charged by the Commission services with the monitoring of EU assistance to the western Balkans and Turkey.

An external evaluator conducted field research, and analysed internal documents and management procedures. The conclusion was that the project fulfilled all its objectives by implementing a unique intervention logic whereby research results were used to raise awareness and influence decision-makers, and at the same time to create educational programmes for young people and their teachers to prevent GBV. Moreover, a national media campaign addressed the most alarming findings of the research.

The campaign proved to be very effective in raising concern about the problem and involving young people, teachers, the general public and politicians. It proved that a wide impact and long-term effects could be achieved by training teachers and involving young people. Its activities spread good practice, and also improved collaboration between institutions and schools.

Its web page reached 250 000 people, and 810 young people used an online counselling service to get advice on GBV, gender/sexual identity and sexual and reproductive health and rights (SRHR). Taking part in GBV awareness projects had a positive influence on the attitudes of students: they have been sensitised to recognise stereotypes and GBV, and empowered to remove themselves from violent relationships.



A leap in civic engagement

The participants were clearly very satisfied. Some 94 % of teachers plan to continue with educational activities and many said that involvement in the project has improved student–teacher relationships, increased confidence levels and provided insights into young people’s ways of reasoning, enabling a much better mutual understanding. Meanwhile, 80 % of students involved in project activities trust their teachers’ abilities to help them or their friend, should they find themselves facing or witnessing GBV, in the form of direct assistance, advice and support.

The high level of students’ satisfaction with the project is evident from the fact that 97 % of those who responded to the evaluation questionnaire said that they would like to participate in further activities dealing with the prevention of GBV in adolescent relationships, and 31 % said that they would like to join an organisation supporting victims of GBV. This is a significant unexpected result of the project since, according to numerous studies, the Croatian population in general is not very interested in civic engagement. The students’ self-assessment of knowledge and skills related to GBV prevention reflects an average increase from 3.08 % expressing engagement at the beginning of the project to 4.01 % at the end.

Media research agency HendaL evaluated ‘Silence is not golden’ using the AdVisor campaign tracker. It surveyed a nationally representative sample of 400 young people aged 15–18 and asked whether they had noticed the campaign and understood its message. The biggest success was that 91 % of those surveyed saw the connection between the three types of violence presented — violence in the family, date rape and trafficking. Viewers reacted strongly to the TV clips, which were the focus of the whole campaign: 92 % of them were familiar with the slogan and

it proved so strong that people have taken to using it themselves. The slogan gained a very high percentage of recognition in all clips, indicating that the campaign designers did a good job in its creation. This finding is corroborated by the fact that the slogan was also used as the leitmotif of the university students’ protests in 2009.

A sustained effect

To make the initiative sustainable, CESI established cooperation and built up relationships with the relevant state institutions, in order to inform them about project activities. All of them supported it and provided relevant information. The Teacher Training Agency recognised CESI’s teachers’ training on GBV as a relevant component of the teachers’ professional development programme and included it in its curriculum.

If there is a weakness, it lies in the fact that the legislative framework is still incoherent and is slow to be implemented. Preventing GBV requires systematic education, both formal and informal, at all levels, the elimination of gender stereotypes and the mainstreaming of gender equality into the entire formal educational system. The long-term approach to ending GBV requires efforts at all levels, including stronger partnerships among public institutions, civil society and local communities. Some progress has been achieved, but greater efforts are needed to ensure that all stakeholders work together to challenge gender stereotypes and other causes of GBV.

Creative ideas

The campaign’s success is a result of a good evidence base gained through research, which led to a well-targeted campaign. It used a strong communications strategy using a wide range of tools and media support, and was well executed. Preparatory work with the media ensured that they do-

nated free space, and recognition by the Teacher Training Agency encouraged teachers to take part. There is a particular lesson to be learned about how to engage young people in work on GBV. Creative activities such as creating films and comics were especially attractive to boys and young men. The competitive element in the project design as well as a paid trip to Zagreb were additional incentives to take part.

Some elements of the campaign have been used in other projects, mainly in the context of youth work, but a shortage of funds makes any repeat unlikely in the near future. As the campaign is well documented it can be easily transferred. Moreover, there have been some replication efforts. There was an intention to carry out the project in Macedonia, but it was not accomplished due to the lack of financial sources. CESI conducted education for teachers and distributed materials in Bosnia and Herzegovina and Serbia.

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CESI: <http://www.cesi.hr>
<http://www.cesi.hr/en>



'Break the silence' ('Bryd tavsheden'), Denmark 2010

Danish campaign targets diversity in domestic violence

Recognition of diversity in domestic violence

Summary

The Danish 'Bryd tavsheden' ('Break the silence') campaign in 2010 specifically targeted ethnic minority women to help them to escape from violence by their partners. It was carried out by the Ministry for Gender Equality in cooperation with LOKK, the national association of women's shelters.

Its strategy was to formulate a strong simple message, and to direct this at ethnic minority women in a way they would understand. The campaign therefore published its information leaflets in nine languages, and distributed them in places where ethnic minority women would come across them. This multilingual approach also made it easy for ethnic minority media, which often do not have the budgets to pay for translations, to come on board the campaign. It obtained endorsements from popular ethnic minority role models, and produced short films in 10 languages. The campaign's website is still in use to this day.

It also created a simple but imaginative tool in the form of a hairbrush bearing the number of the 24-hour telephone hotline for battered women. The brushes stimulated debates in hairdressers' and beauty salons and many women took the brushes home, thus spreading the message further.

An external evaluation was built into the project design. It found that the campaign had been a great success in terms of reaching its targets, but for the future it recommended also including men and the native Danish media within its scope. It also discovered a significant stumbling block in the lack of response from trade unions representing ethnic minority women.



Since 2002, Denmark has adopted national action plans (NAPs) to stop violence against women according to the definition of the UN Beijing protocol of 1995. In the first of these, adopted in 2002, one of the main aims was explicitly to break the taboo surrounding domestic violence against women. This has proven right, and domestic violence is now less considered as a private affair and it seems more legitimate for politicians as well as for the public at large to address violence against women. The terminology has changed accordingly, and rather than talking about domestic trouble (*husspetakler*), the term is now 'partner violence' or the more precise term 'men's violence against women'. The first Danish NAPs encompassed women in general but also specific groups such as women of ethnic minority background, who were considered to be particularly vulnerable. This attention to ethnic minority women is also present in the Danish national strategy to prevent violence in intimate relationships (2011) which explicitly recognises that ethnic minority women have specific and bigger difficulties in getting out of violent relationships than native Danish women. As a matter of fact, they often go back to their violent partners and very seldom establish their own homes after leaving the crisis centre. Various initiatives (especially those of the Ministry of Refugee, Integration and Immigration Affairs) have been taken to tackle this issue and to make these women aware of the opportunities available.

A campaign for ethnic minority women **Multilingual leaflets and films**

Seven years previously, on 10 November 2003, a month-long ‘Stop violence against women — break the silence’ awareness-raising campaign was launched. The target audience was the public in general and victims of domestic violence. This first campaign addressed domestic violence and used outdoor posters, buses, trains, television and the Internet as media channels.

Given the increasing attention being paid to ethnic minority women, in 2010 it was decided to conduct a communication campaign addressed specifically to them. Its aim was to break the taboo surrounding violence against women in local ethnic communities and to inform ethnic minority women about their rights and the sources of support they could turn to. The campaign was organised and carried out with the direct involvement of Landsorganisation af Kvindekrisecentre (LOKK), the national organisation of shelters for battered women. A number of professionals were also involved, especially those already working in the networks of battered ethnic minority women.

The campaign’s relevance stems from the fact that it allowed for diversity amongst victims of domestic violence, provided a wide range of communication tools, advertised a 24-hour hotline on violence against women and distributed handy cards which gave victims of domestic violence all the information they need to find help in their local communities.

The campaign took place in February–May 2010 and was financed by the state with a budget of EUR 212 800, including evaluation. At the time it fell under the responsibility of the Ministry for Gender Equality and Ecclesiastical Affairs and the Ministry of Integration, but it is now under the Ministry of Children, Gender Equality, Integration and Social Affairs. The campaign was successful in involving ethnic minority community networks, which had a large impact on the wider environment within which abused ethnic minority women live. Its effectiveness is proved by the results obtained.

An information folder was produced and distributed in credit-card format. It is headed ‘Stop the violence against women — break the silence’ in Danish and eight other languages (Arabic, Bosnian, English, Farsi, Russian, Somali, Thai and Turkish). The information folders were distributed throughout the country in libraries, general health practitioners, police stations, hospitals — and also hairdressers (hairbrushes with the 24-hour hotline number on them were distributed to ethnic hairdressers’ and beauty salons) and other meeting points in local communities. The folder is also accessible on the Web at <http://www.voldmodkvinder.dk>. It contains information about shelters along with practical advice to women exposed to violence. The publication also refers women to the 24-hour hotline (70 20 30 82) and mentions the availability of cultural mediators and interpreters.

Nine well-known women with different ethnic minority backgrounds were used as role models (‘ambassadors’) to express their dissociation from domestic violence. Dialogue meetings with relevant networks in contact with ethnic minority women were held. Besides the campaign, information films addressed to ethnic minority women about their rights and opportunities of assistance in Danish society have been produced. The films show battered women’s encounters with the police, the shelter, the municipality, the county and the lawyer. The films were prepared in 10 languages (Arabic, Danish, English, Farsi, Greenlandic, Russian, Somali, Thai, Turkish and Urdu) and distributed to shelters, language schools, high schools for women, counselling facilities for women and ethnic minorities, local communities, counsellors, municipalities and the libraries of relevant educational programmes — for example the Police College and the College of Social Work. The five films are still available on various websites, including <http://lige.dk/en> and <http://www.voldmodkvinder.dk>.

Reaching illiterate victims

An external ex post evaluation carried out by international consultancy group COWI showed that the



campaign was successful in gaining a high number of mentions in ethnic media, in boosting the number of calls to a nationwide hotline by ethnic minority women and in scoring high satisfaction ratings among the actors involved. It has also made efficient use of resources, as the tools it created are still available after its conclusion and being used. It is notable for its multilingual approach.

The evaluation identified the campaign's strengths and weaknesses and made suggestions on how to improve communication with the target victim groups (for example, communicating information through films means that it is also possible to reach women who cannot read). The campaign was very positively evaluated in relation to the objective of informing ethnic minority women on their rights and options.

Several elements of the campaign's design were particularly effective. The use of the minority communities' own languages was a major factor in reaching the target women, and it also enabled cash-strapped ethnic minority media, which could not afford to pay for translation, to promulgate the message. The promotion of female role models as 'ambassadors' was particularly successful in involving a number of networks. Dialogue meetings with local networks helped to identify key actors who spread the campaign's message more widely. And the hairbrushes bearing the 24-hour hotline number were a particular talking point: they stimulated debates at hairdressers' and beauty salons. Many customers took the hairbrushes and accompanying information home with them, thus spreading the message further.

However, the evaluation also made some suggestions for improvement:

- the campaign's profile in the Danish media could have been higher;
- the website <http://www.voldmodkvinder.dk> needed improvement;
- any future campaign should make more use of district nurses and networks of battered ethnic minority women to carry the message;

- future campaigns should also target men. All men should be considered so to avoid stigmatising ethnic minority men.

It also noted that one of the outreach methods used, dialogue meetings with trade unions which had a lot of ethnic minority women members, had not brought the expected results. This may have been because most trade union representative are men, who find it difficult to tackle the issue, that ethnic minority women are under-represented and their problems are not visible in the workplace and that domestic violence is still considered to be a private problem.

Give violence against women the red card



These lessons were taken on board in a wave of campaigns aiming to include men in the fight for gender equality and make them aware of their role in the fight against violence against women. The campaigns addressed men as abusers, but also as fathers, husbands and sons of the victims of violence. Inspired by a Spanish campaign, Denmark has run the 'Give violence against women the red card' campaign twice.

In 2011 the Ministry of Children, Gender Equality, Integration and Social Affairs teamed up with the Danish football association and two young football players, acting as role models and spokespersons for the message: 'Don't hit! We demand fair play on the football pitch — and in the family!'. The intent was to engage a new audience — boys and men — in fighting violence against women. Interest among the Danish champion's league clubs was very positive and the campaign

succeeded in getting a fair amount of attention from the press. Owing to the immense interest that Danish handball attracted at the time, the ministry chose to repeat the campaign, now also including a top player from the national handball team. He and a football 'icon' were the faces that were linked to the campaign.

The 'White Ribbon' campaign

In March 2013 Denmark launched the 'White Ribbon' campaign, which is a worldwide initiative to end men's violence against women. White Ribbon is an independent network for men, engaging other men to pledge to the following three things:

- not to commit violence against women;
- not to defend other men's violence against women;
- not to be silent about men's violence against women

Until the end of 2013, the Ministry of Gender Equality had the main responsibility for running the campaign, after which it was taken over by volunteers. The start was slow and difficult, but the dedicated voluntary spokesperson has succeeded in creating partnerships with various private companies and public agencies. The number of 'likes' on the campaign's webpage has gone up considerably, and the spokesman often makes speeches in various settings about the campaign and the facts about violence against women

Patterns of violence change over time

Denmark's four national action plans (NAPs) show a progressive broadening of the scope of work against gender-based violence. Since Beijing 1995, the overall approach has been that violence against women is a gender equality problem, that domestic violence is totally unacceptable and that all relevant means must be used to prevent it, to stop it and to support the victims. Denmark has so far implemented three NAPs and the fourth plan was launched in July 2014.

With the **first NAP** (2002) to stop violence against women, the issue became a part of the political agenda and the results were significant:

- abused women got easier access to help;
- professionals increased their knowledge and awareness;
- there was a special focus on men's role in breaking the cycle of violence

Not least, national data on the prevalence of domestic violence were published, showing that approximately 42 000 women each year were exposed to violence from a present or former partner. An external evaluation concluded that the action plan had confronted the most critical areas regarding violence against women, but also that future actions should focus more on preventive initiatives

The **second NAP** (2005) widened the scope of the issue, which is indicated by the title: 'National action plan to stop men's domestic violence against women and children'. It still focused on support to victims, it continued to offer treatment to perpetrators, it advocated a strong multi-disciplinary effort and it emphasised the need for more knowledge among all stakeholders. The external evaluation found that the plan had raised victims' awareness of their rights and of the possibilities for support. It noted that knowledge and information about violence against women and domestic violence had increased and that professionals and authorities had benefited from it to some extent. But the evaluation also concluded that professionals and front-line staff at the local level did not know enough about domestic violence and the way it influences the whole family, especially the children





The **third NAP** (2010–13) expanded the scope once more. The plan was called the ‘National strategy to prevent violence in families and intimate relations’, which acknowledges that partner violence also takes place when family relations have changed. The target groups for the strategy were women, children, male perpetrators and front-line staff working in a variety of job functions in the municipalities. The external evaluation concluded that the plan had contributed to a holistic and coordinated approach to the many different activities which characterise the area. The existing support and treatment services were strengthened, and new methods to reach and support battered women were developed

The fourth NAP — young people, bi-directional violence and stalking

In preparing for the fourth NAP, it became very clear that people other than women may be exposed to domestic violence. Surveys show that the number of men who are exposed to domestic violence has increased, and that far too many young people are exposed to violence from a girlfriend or boyfriend. Organisations who work with perpetrators reported that one out of five abusers that they see for treatment is a woman. Furthermore, these organisations also reported that the extent of so-called bidirectional violence is huge — a general finding which is backed by American research. Finally, it became clear that stalking is a major problem and that victims of stalking lack sufficient support from the general public system. The fourth NAP therefore embraces the fact that the patterns and target groups of violence change over time.

Violence against women is still at the core of the government’s measures in this area, because women remain those most affected. However, with its fourth NAP, the government wishes to continue and improve measures in favour of a broad target group of people exposed to violence in intimate relations. So far the established system has not focused particularly on bidirectional violence between adults in a family, or on the fact that a man can be exposed

to physical and psychological violence from a woman. Neither has focus been on support to victims of stalking or on preventing and treating the consequences of non-honour-related violence in ethnic minority families. Finally, it has proved difficult to address violence in relationships between young people, and the various services and facilities for young people who have been exposed to dating violence typically depend on whether the young person is above or below the age of 18.

To sum up, NAPs have been a very effective means to break the silence about domestic violence and violence in intimate relations: nowadays a majority of Danes do not consider violence against women to be a private problem, and also know where abused women can seek help and guidance. The NAPs maintain a constant focus on domestic violence within the administration, and create an institutional framework within which many different stakeholders can join forces to solve the problem. They supplement the established social, health and legal system and give room for pilot projects in order to find effective ways to combat domestic violence. Finally, the action plans have financed research and mapping that have broadened the knowledge base for all who work in this field.

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Special communication campaign in 2010 on violence against women — 2010 Grande Cause Nationale, France 2010

Setting up a helpline to combat domestic violence

Summary

Each year since 1977, the French government has nominated one social issue, proposed by an NGO, to receive special state support. The NGO selected can collect donations from the public, and also receives an allocation of free airtime on the national media. In 2010 that issue — the Grande Cause Nationale — was violence against women.

To capitalise on this special time-limited status, a coalition of 25 associations put together a year-long campaign. It used the full range of media channels: film, TV, radio, posters, press, seminars, conferences and public debate.

The key message of the campaign was that victims of domestic violence should ring the helpline 3919, and the message evidently got through, because the number of calls doubled during campaign periods.

The campaign was accompanied by a new law (of 9 July 2010) which strengthened the protection of victims and children.

awareness of the phenomenon. Since 2004, it has been translated into global 3-year plans to combat violence against women. Describing and analysing the adaptation of the legal and policy framework helps to understand the changes in public priorities. At first, the approach to violence against women was a legal one, focusing on the definition and punishment of sexual violence, from rape (1980) to sexual harassment (1992). Legal measures then focused on violence within the couple, considering it as an aggravating circumstance (1994), on strengthening sanctions and on preventing repeat offending (2004–06). Four triennial plans have been adopted, covering the period from 2005 until 2016.

Information campaigns and awareness policies, targeting the general public and professionals, have been a feature of all three plans, and victims were added to the list in the third plan. Then, in 2010, the prime minister nominated violence towards women as the Grande Cause Nationale, a status which enables non-profit organisations to make free broadcasts on public radio and television and to collect funds from the public.

This gave 25 associations working on violence against women the opportunity to pool their forces to form a collective which submitted a bid for this privileged status. They were successful. The access this gave them to free media time was of particular importance for the members of the collective, which lacked communication departments or budgets.

Context analysis



The policy approach to violence against women in France has steadily followed the growing social

Film, web, social media, press, posters and public debate

The campaign they put together had the simple long-term objective of reducing domestic violence. Its immediate aim was to raise awareness among the



public, perpetrators and victims that violence against women is not acceptable. More specifically, it wanted to make violence against women visible, to address inequalities between women men and social gender relations between girls and boys, to promote support structures for women and to strengthen support for associations involved in the fight against violence across France.

Benefiting from the diversity of the collective's member associations, the campaign adopted a multi-sector and multi-level approach which covered all areas of society and all occupational categories. The associations in the collective carried out extensive consultations to define violence and the way the public understands it.

The actions followed a logical sequence. Starting in January 2010, they comprised media campaigns on specific topics, a year-long programme of seminars and conferences, discussions around the country based on the film *La Domination Masculine* (Male domination) by Patric Jean, local initiatives and a closing research seminar and celebration evening. The campaign benefited from the support of film-makers and photographers who developed communication tools for free.

Media channels used included television, cinema and radio spots, radio interviews on 120 stations, publications, a film, public events and a website. The key message to be got across was the national helpline number 3919.

A 30-second TV spot was broadcast three times in prime time (before or after the news): first for the launch of the campaign in January, as a reminder in second half of the year and again at the close of the campaign. In addition to its entitlement of 12 free slots on public channels, the collective negotiated additional airtime on private channels. Videos were published on the site of the 2010 Great National Cause and on YouTube and Dailymotion.

The Internet was brought into play through the 'Stop cycles of violence' website, which presented videos and testimonies from victims and associations, as well as social network accounts on Facebook and Twitter.

Three posters with the phrase 'Petite vous rêviez sûrement d'un Prince Charmant, pas d'un homme qui vous frappe le soir en rentrant' (As a little girl you dreamt of a Prince Charming, not a man who hits you back home).

These were buttressed by press campaigns through the year, seminars and conferences organised by the associations in the collective and local public debate around the film *La Domination Masculine*.

Better protection for victims and children

As part of the 2010 campaign, the government ran information campaigns on the national helpline number 3919, and extending its scope to cover all types of gender-based violence. Along with this it improved information for victims through the website <http://www.stop-violences-femmes.gouv.fr> to help them to quickly find sources of support.

It also passed the law of 9 July 2010, which improves protection for children (by regulating parental power, contributions to household expenses and the use of the family home) and also improves victim protection by enabling the eviction of offenders from the home, the issue of protection orders for victims of domestic violence and the recognition of psychological violence.

Government action has continued since the end of 2010. New national plans have been adopted for 2011–13 and 2014–16, and the website has been kept updated. Most visibly, information and awareness campaigns are held each year. On 25 November 2011 the theme was 'Denounce hidden violence' and on 8 March 2012 'The world's best mum'. Each 25 November, the International Day for the Elimination of

Violence against Women, is marked by panel discussions, press articles, videos and TV spots.

Political will is the key factor

The campaign's message evidently got through to victims, because evaluation of the 3919 helpline number, which receives 80 000 calls a year, noted that the number of calls doubled during campaign periods. It was noteworthy that the greatest number of calls came from Paris, Rhône-Alpes and PACA (Provence-Alpes-Côte d'Azur), a fact which may be explained by victims having better information, but at the same time also suggests an explosion of violence.

The campaign's success rests on strong political will and involvement, a strong communication strategy, the active involvement of media professionals and the press and a multi-level approach that involved many different stakeholders. Of these, the key factor in ensuring a coherent and sustained policy against gender-based violence is political will.

The main obstacles it faced are that many women are still ashamed to denounce violence and that victim support organisations are facing huge difficulties as they need to cope with cuts in their budgets.

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La Domination Masculine: film trailer: <http://www.ladominationmasculine.net/home.html>



‘Enough is enough. It is up to you to ask for help’ (‘Nu is het genoeg. Hulp inschakelen heb je zelf in de hand’), Netherlands, 2007–12

MySecrets Cosmetics — a hoax advertising campaign spreads the message against domestic violence

Summary

Dutch policy on domestic violence is based on addressing three of its causes: intergenerational transmission of the use of violence, invisibility of the use of violence and gender-related power differences between perpetrators and victims. Targeting the general public and victims of domestic violence, it tries to raise awareness of the issue, break the taboo that many women have on speaking out and convey information on where to go for help. It works hand-in-hand with policies to improve early signalling by professionals and to improve the quality of shelters for battered women.

Every year, the government runs a media campaign against domestic violence, using radio, television and the Internet. In 2010 it used an innovative tool: it launched a hoax range of cosmetics designed specifically to allow women to hide the injuries they sustain when they are battered. The products were branded MySecret Cosmetics, and were promoted using a make-believe television interview on a programme called Women & Business. The interview lasted less than 2 minutes, but attracted so much attention that it merited an item 3-minutes long on the evening television news.

The campaign has had measurable effects. Phone calls for help increased by between 35 % and 50 %, and willingness to call rose from 50 % to 59 %. Knowledge of the available support centres and what to do in cases of domestic violence rose from 6 % to 11 % among the general public and from 10 % to 21 % among people already involved in episodes of domestic violence. Willingness to visit the website increased from 58 % to 72 % for the general public and from 63 % to 76 % for victims. During the campaign period, the campaign’s website had 21 900 visits. This is considered to be very efficient, given that the campaign’s total spend in 2010 was EUR 505 000.

A joined-up policy on domestic violence

The approach of the Dutch Ministry of Justice ⁽⁸⁾ to domestic violence is set out in the last action plan on domestic violence 2008–12, which describes three causes of domestic violence: intergenerational transmission of the use of violence, invisibility of the use of violence and gender-related power differences between perpetrators and victims.

Consequently, policies are directed towards combating intergenerational transmission, promoting openness about the issue and taking a gender-specific approach to domestic violence. With its gender-specific analysis and approach to power differences, the policies are directly linked to policies on emancipation ⁽⁹⁾. Their central objective is to prevent and combat domestic violence by promoting a so-called continuous approach (prevention, signalling and intervention) for all target populations.

The approach is comprehensive: criminal justice measures and assistance should reinforce each other. Therefore, criminal justice and social service institutions work closely together ⁽¹⁰⁾.

In parallel, the Ministry of Health, Welfare and Sport has developed a policy on violence in dependence relationships, as set out in the policy memorandum ‘Beschermd en Weerbaar’ (‘Protected and em-

⁽⁸⁾ ‘Plan van aanpak Huiselijk geweld tot 2011 “De volgende fase” ’; Ministerie van Justitie (Ministry of Justice), The Hague, 2008.

⁽⁹⁾ See also Merens, A. and Hermans, B., ‘Emancipatiemonitor 2008’ (Emancipation Monitor 2008), Sociaal en Cultureel Planbureau/Centraal Bureau voor de Statistiek, The Hague, 2009.

⁽¹⁰⁾ ‘Plan van aanpak Huiselijk geweld tot 2011 “De volgende fase” ’; Ministerie van Justitie (Ministry of Justice), The Hague, 2008.

powered⁽¹⁾). Although this policy has a broader approach and targets a larger population, it has a comparable objective: prevention and early signalling by professionals; shelter for victims; and assistance for victims, perpetrators and children. It coincides partly with the action plan on domestic violence mentioned above. Important elements in this programme are the reinforcement of the advice and support centres on domestic violence and the improvement of the quantity and quality of shelters. This ministry also insists on the context in which this policy has to be placed. It refers explicitly to the emancipation of women and men as necessary conditions for successfully combating domestic violence.

This overall approach has allowed the Netherlands to be among the European countries with the highest figures of reported and/or registered domestic violence and violence in dependence situations. More than 60 000 instances of domestic violence are reported to the police every year. These figures reflect the high level of public awareness and the adequacy of infrastructures for notifying and reporting.

Annual campaigns — enough is enough

In 2007 the national government started an information campaign for the general public (using radio, television and the Internet) under the title 'Nu is het genoeg. Hulp inschakelen heb je zelf in de hand' ('Enough is enough. It is up to you to ask for help'). The campaign was repeated in 2008, 2009, 2010 and 2011. A specific telephone number and website were created. It was based on a television commercial in which a witness of domestic violence tells his story. The commercial is intended to encourage on-lookers to seek help. The radio commercials call on victims, bystanders and perpetrators to seek help.

⁽¹⁾ 'Beschermd en weerbaar: Intensivering van de opvang en hulpbijgeweld in afhankelijkheidsrelaties. Brief van 10 december 2007; Ministerie van Volksgezondheid, Welzijn en Sport (VWS) (Ministry of Health, Welfare and Sport), The Hague, 2007.

Each year the campaign identifies a specific message and tools to transmit it, thus signalling a growing emphasis on prevention especially through public campaigning and information. Within this context, the campaign run in 2010 is particularly interesting because it uses a mix of traditional communication tools (editorials in magazines and newspapers and programmes on radio and television) and innovative ones (the MySecrets Cosmetics online video).

MySecrets Cosmetics for battered women

In 2010, the awareness-raising campaign brought the 'hidden' problem of domestic violence to the public's attention in a special way via the special online shop MySecrets Cosmetics.

This online shop ⁽¹²⁾ was promoted as selling a brand of make-up specifically designed for every woman who has something to hide: a unique range of products that helps mask bruises, seals and shines cut lips and removes blood stains. Banner ads, mock advertorials on fashion and beauty websites and an online film (a make-believe webcast of a show called *Women & Business* that interviews the founder of MySecrets Cosmetics) drove traffic to the site, where the hoax was revealed. In reality, a click on the website led to the campaign message: 'There is a better solution to the problem of domestic violence. Call 0900 126 26 26 for advice and help. Or visit www.steunpunthuiselijkgeweld.nl.'

Awareness raised by over 10 %

The 2010 awareness-raising campaign aimed to increase prevention and social and public awareness on the issue of domestic violence. Its expected outcomes and impact were an increased demand for support and reports motivating victims to seek assistance and support. With this campaign the government — through the online video MySecrets

⁽¹²⁾ www.mysecretscosmetics.nl has now been taken offline.



Cosmetics — also wanted to convey the message that domestic violence is unacceptable and that there are no justifiable excuses. The campaign took literally the idea that domestic violence cannot be covered up.

An evaluation was carried out in order to assess the campaign's reach. It found that 74 % of the general public recognised the campaign statements. The entire campaign was well appreciated by the general public (7.3/10) as well as by the people already experiencing domestic violence (7.4/10). The radio spots, banners and television spots were individually highly appreciated and the whole campaign was assessed higher than average in all aspects by both the general public and people already experiencing domestic violence. The campaign was described as 'remarkable', 'attractive' and 'able to provide new information'. The most spontaneously mentioned message was 'It is important to seek help'.

Generally speaking, during every campaign period there is an increased demand for police assistance and help from support centres with an increase in the number of requests for help. In the 2010 campaign, the number of phone calls increased by between 35 % and 50 %. Among the general public the willingness to call rose from 50 % to 59 %. Knowledge of the available support centres and what to do in cases of domestic violence also increased. Prior to the campaign, only 6 % of the general public and 10 % of people already involved in episodes of domestic violence knew where to go for help and advice. After the campaign, these percentages had increased to 11 % and 21 % respectively. Willingness to visit the website increased from 58 % to 72 % for the general public and from 63 % to 76 % for people already experiencing domestic violence. Actually, during the campaign period, <http://www.shginfo.nl> site had a total of 21 900 visits. On average they looked at six pages and stayed connected to the website for between 5 and 6 minutes.

An efficient and effective campaign

The campaign also presents a clear, appropriate and comprehensive definition of domestic violence and conveys its message through a strong communication strategy that uses an innovative tool. Moreover, it takes a victim-centred approach and is aimed to transmit the helpline number to victims.

The national awareness-raising campaign contributes to the wider policy of breaking down the unequal gender power structure that is at the basis of domestic violence. Thus its impact on the wider environment is linked with an increase in gender equality. Awareness-raising initiatives are also important from an effectiveness and efficiency point of view. The costs of domestic violence include costs for assistance by the authorities (police, judicial system, healthcare and shelter), production losses, claims for social security and immaterial damage. A tentative calculation of the first item only indicates that assistance given by the Dutch authorities in relation to domestic violence costs about EUR 271 million a year ⁽¹³⁾ while the overall cost of the campaigns (including media and website maintenance) were EUR 1 256 000 in 2007, EUR 914 000 in 2008 and EUR 505 000 in 2010.

'Enough is enough' was a joint initiative of the Ministerie van Justitie (Ministry of Justice), the Ministerie van Volksgezondheid, Welzijn en Sport (Ministry of Health, Welfare and Sport) and the Steunpunt Huiselijk Geweld (Dutch Domestic Violence Support Centre). It was financed by the national action plan on domestic violence. The national policy gives the policy sustainable financing. From January 2012 a new domestic violence campaign with the focus on partner violence, elderly abuse and child abuse started. The budget for this new campaign is approximately EUR 1.2 million.

⁽¹³⁾ 'Huiselijk geweld: Cijfers en feiten', Movisie, Utrecht, 2009.

Success factors

Some of the reasons for the campaign's success are that the messages were directed to the general public as well as victims and perpetrators, and that it used as a provocative tool — the hoax advertising campaign which caught the public's imagination. The controversial idea of using victims of domestic violence as a business opportunity triggered discussions via blogs and twitter. Daily newspapers picked up on the buzz this campaign generated, and MySecrets Cosmetics got a whole 3-minute slot on the evening television news. Nevertheless, many women are still ashamed to denounce violence and this can still represent an obstacle for any campaign.

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Further information

Steunpunt Huiselijk Geweld:

<http://www.steunpunthuiselijkgeweld.nl>

MySecrets Cosmetics video:

<https://www.youtube.com/watch?v=AKLN7zFfrxg>

Publicis showcase on MySecrets Cosmetics campaign:

<http://www.publicisgroupe.com/#/en/videos/info/id/17280>



Curriculum 'Violence against women and children' — victim protection in Vienna's hospitals Austria, 2001–14

A curriculum to improve hospital response to violence

Summary

In Austria, the first port of call for most women victims of domestic violence is their hospital or other health-care centre. To improve their response to the issue, a multi-agency group of hospitals and local governmental women's support agencies created a curriculum on how to deal with victims of domestic violence. It comprises five modules covering the forms and effects of violence against women and children, securing evidence, legal issues and victim protection groups.

The curriculum was delivered for the first time in Vienna's SMZ Ost hospital in 2001, and was later extended to five hospitals in all. Though it had to struggle to find enough time in the working day to deliver the curriculum, the project trained 880 healthcare workers, 70 % of them nurses and the majority women. They were overwhelmingly positive about the benefits they gained. They expressed the wish that more doctors should also take the course.

Participants were given a handy pocket checklist listing 10 steps to take when dealing with a victim of violence.

Victims turn first to health services



The Federal Act on Protection Against Domestic Violence entered into force in May 1997 ⁽¹⁴⁾. Since then several amendments to it have been adopted and in 2009 a comprehensive second violence protection law package was implemented ⁽¹⁵⁾.

The state and its institutions acknowledge that violence against women and children is a public concern and provide means for concrete protection measures. The healthcare sector has increasingly been involved in the development of new intervention strategies in this field. Health workers play a key role in identifying early signs of violence and offering support to abused women and children. Women who have experienced violence and are suffering from injuries or health problems are much more likely to turn to an emergency room or to general practitioners than to a counselling centre, a women's shelter or the police. Healthcare professionals therefore have contacts with a large number of victims of domestic violence ⁽¹⁶⁾. This is why in several provinces of Austria educational projects consisting of seminars, workshops and public information events for medical personnel have taken place in recent years.

To improve their response to the issue, a multi-agency group of hospitals and women's support agencies created a curriculum on how to deal with victims of domestic violence. The members of the consortium were the Vienna women's health programme, the 24-hour women's emergency hotline of the Vienna Municipal Department of Women's Affairs (MA57),

⁽¹⁴⁾ Logar, 2005.

⁽¹⁵⁾ Initiated by Women's Minister Johanna Dohnal in close cooperation with Caspar Einem, Minister of the Interior, an interministerial working group was convoked, composed of staff of women's shelters, police officers, judges and lawyers and resulting in the Federal Act on Protection Against Domestic Violence (Federal Chancellery — Federal Minister for Women and Civil Service, 2008)

⁽¹⁶⁾ Federal Chancellery — Federal Minister for Women and Civil Service 2008.

the Youth and Family Offices of Vienna (MA11) and Vienna Hospital Association (KAV).

A five-module curriculum

The curriculum was drafted on the basis of the results of an analysis of the status quo and comprises five modules:

- forms and effects of sexual and physical violence against women;
- forms and effects of sexual and physical violence against children;
- securing evidence and DNA analysis;
- legal information;
- implementation of victim protection groups at Vienna hospitals.

There were four stages to its planning and implementation:

Phase 1: Establishment of the steering group, development of the education and training concept, staff survey, preparation of information material.

Phase 2: Implementation of the training programme at two model hospitals, with 20 training units of 1.5 hours each.

Phase 3: Revision of the education and training concept on the basis of an analysis of the results of phase 1: adjustment of the training structure.

Phase 4: Implementation of the training courses in four of Vienna's municipal hospitals.

The City of Vienna first launched its 'Violence against women and children' curriculum in 2001 at the municipal hospital SMZ Ost with the aim of enhancing the sensitivity of health professionals in dealing with victims, by establishing victim-focused standards, ensuring adequate support and creating awareness and

an effective response among providers in all the main hospitals in the City of Vienna.

The curriculum was implemented over a period of 5 years, and all training courses were held in the individual hospitals with an interdisciplinary and inter-professional audience. The appropriate time frame (4 years of pilot projects) allowed important results to be achieved.

Ten points to remember

A specific tool, that is a small pocket card, was prepared to provide health professionals with the following essential 10-point checklist.

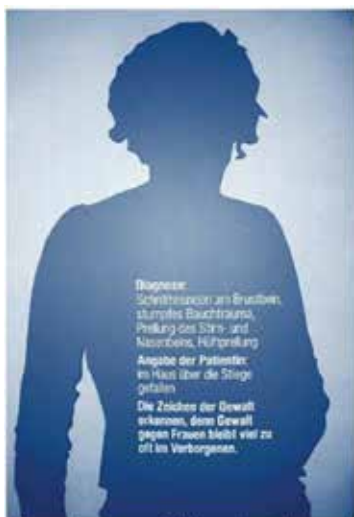
1. Check injuries, time and place of incident, perpetrator.
2. Mention reasons for your suspicion and offer support.
3. Provide information on planned examinations and action.
4. Routine examination, securing of traces and collection of evidence.
5. Treat as outpatient or inpatient depending on indication.
6. Document all injuries — size, localisation, age, statements by the patient.
7. Clarify risk level, safety issues, possible assistance within social environment.
8. Refer to in-house specialist departments, psychologists, social workers.
9. Contact, e.g. women's emergency helpline, women's refuges, police.
10. Provide information on victim protection agencies, hand out information material.

Besides the curriculum, the Vienna Hospital Association, the 24-hour women's emergency hotline, the police and the Forensic Medicine Institute prepared a trace preservation kit that ensures uniform procedures in the preservation of evidence and was established as a treatment standard in hospitals of the City of Vienna when examining victims of sexual violence.



At the Danube Hospital a group of committed staff in the accident surgery department, as a direct response to the curriculum, founded a victims' protection group, motivated by the example of the existing victims' protection group at Vienna Wilhelminen Hospital, which the curriculum presented as a good practice example.

During its first period of implementation (2001–05), about 560 health professionals working in emergency departments; internal medicine; ophthalmology; dermatology; surgery; ear, nose and throat (ENT); gynaecology; and psychiatry were trained. At the end of the project a total of approximately 880 staff completed the 'Violence against women and children' training scheme in Vienna: 110 at Kaiser Franz Josef Hospital, 259 at Danube Hospital, 147 at Rudolfstiftung Hospital, 57 at Hietzing Hospital and 200 at Vienna General Hospital. The advanced workshop on use of the trace preservation kit was attended by 110 staff of Kaiser Franz Josef Hospital, Wilhelminen Hospital and Danube Hospital. In all three hospitals, a definite trend was that more women than men took part in the training scheme, with nurses accounting for the largest occupational group: around 70 % of participants worked as nurses, 15 % were physicians and 15 % came from other groups.



Violence against women and children as an issue to be confronted in health care was visualised during the 2001 Project Weeks by placing life-size figures in the lobbies of outpatient centres located in the participating hospital.

After the pilot project had been completed in all the hospitals of the City of Vienna, the hospitals of the Vienna Hospital Association agreed to offer internal training events on victim protection for their staff at regular intervals, modelled on the curriculum. This is an important step in creating sustainable support for staff in their key role with regard to early detection of domestic violence. Nowadays, permanent interdisciplinary groups on domestic violence have been set up in three of Vienna's hospitals and co-operation between hospitals and extramural institutions has greatly improved.

Satisfied participants

The Vienna Hospital Association conducted an anonymous post-training survey among the curriculum participants at two hospitals. The feedback showed that participants were particularly satisfied with the training course with regard to the presentation of the subject matter as well as its practicability. Three months after the training, they said that the know-how they had acquired was very useful in their daily work and that the information materials provided were of great help. Many of them said they were interested in further training events on domestic violence, in developing better links among departments as well as other institutions and more active participation by physicians.

Two improvements could have been made: external evaluation of the results would have enhanced the curriculum's potential for transfer, and the formalisation of agreements among all the institutions participating in the training would have enhanced its sustainability over time.

Victim protection groups made mandatory

The project's efficiency was guaranteed through a low-cost approach: existing staff were activated as trainers: employees of the City of Vienna, of the women's shelter association, of the Vienna Feder-

al Police and of the University Institute of Forensic Medicine trained the hospital staff. Its sustainability has been ensured by the Vienna women's health programme and by the involvement, since its start, of the city councillors for health, women and children/youth. More broadly, in January 2012 a federal law on mandatory children's and victims' protection groups in Austrian hospitals entered into force ⁽¹⁷⁾.

These groups should contribute to the early detection of domestic violence and raise hospital staff's awareness of violence against women and children, thus contributing to the sustainability of similar actions in the future.

The curriculum has long-term effects and the global approach adopted was to move from a preliminary analysis of the specific training needs of health personnel to the design of a training curriculum and the implementation of training activities. It has made hospital staff aware of domestic violence. Post-training questionnaires indicate that the training was considered by participants as a good opportunity to enhance their knowledge and skills in dealing with victims.

A basis for better prevention

The practice was effective in terms of the number of trained professionals, thus increasing the detection of early warning signals and ensuring that domestic violence victims receive immediate and specialised support. It also produced an impact on the wider environment through the involvement of health institutions on the topic of domestic violence, and by increasing the coordination amongst agencies that support victims.

The elements that work particularly well are improving responses to victims of domestic violence through early detection, establishing treatment

standards, streamlining internal communication processes, defining an emergency treatment plan, communicating know-how to extramural assistance resources and establishing victims' protection groups in hospitals.

These successes were achieved on a basis of close multi-agency cooperation among healthcare institutions, abuse intervention centres, women's shelters, police and welfare offices; an appropriate length and time frame; and the provision of both training materials and a checklist for early warning signals.

A particularly difficult obstacle the project faced was the rigid time constraints that health workers are under. A great deal of effort was necessary to fit the training agenda inside their working hours. Also, the mixed top-down strategy adopted to involve the hospital staff was successful but very costly in terms of time and energy.

The Viennese training programme was the first in Austria to sensitise hospital staff. Many other cities followed the Viennese example.

The lessons learned from the process are that:

- the development of the curriculum and the establishment of a capacity-building process was particularly important in improving the response of the health sector;
- the multi-sector collaboration generated through the curriculum development process presented provided a good basis for strengthening prevention as well as providing assistance and care to those who are already in situations of violence;
- although the training programme has been implemented with the support of all hospital directors in a top-down strategy, sustainability finally depends on the personal commitment of individual staff members.

⁽¹⁷⁾ 69th Federal Law: Change of the Federal Law on Hospitals and Convalescent Homes, § 8e, Children's and victims' protection groups.



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Further information

Website:
http://www.frauengesundheit-wien.at/export/sites/fsw/diesie/downloads/broschueren/Violence_Manual_2006.pdf
<http://www.gewaltgegenfrauen.at>

Specialised training on domestic violence for future members of police forces in the Grand Duchy, Luxembourg 2004–14

Training the police to handle domestic violence

Summary

In 2003, Luxembourg adopted a law on domestic violence, which includes provisions to evict perpetrators of domestic violence from the family home. The law also established a nine-member strong Cooperation Committee of Professionals on Fighting Violence, which brings together the actors concerned, i.e. the ministries, law courts, police and NGOs working on domestic violence.

NGOs and the Grand Duchy's police force have developed a special training module which is delivered to all new police officers as part of their basic training, and has also been delivered to existing officers during in-service training. This is accompanied by tools for police officers to use, such as guidance on writing reports for submission to the public prosecutor and an information card for victims and perpetrators.

One provision of the law is that perpetrators of domestic violence can be evicted from their homes for an initial period of 4 days, which the victim can apply to extend. The training has enabled the law to be implemented very smoothly, and only 1 % of cases are problematic.

An exchange programme with neighbouring German *Länder* allows the respective police forces to compare notes on the best ways of dealing with domestic violence.

Domestic violence is addressed in Luxembourg's national action plan for equality between women and men. The plan follows a double approach, aiming both to mainstream the gender dimension in all government policies and to take affirmative action. The current plan covers the period from 2009 to 2014 and forms part of the government

programme for this legislative period. The plan addresses the 12 critical areas of concern identified in the Beijing Platform for Action.

At ministerial level, a specific structure, the Comité de coopération entre les professionnels dans le domaine de la lutte contre la violence (Cooperation Committee of Professionals on Fighting Violence) deals with domestic violence as defined by the law on domestic violence of 8 September 2003. As outlined in Article III of this law, the committee is to centralise and study statistics. Also, it is to oversee the practical implementation of Articles I and II of the law and to monitor any potential problems, as well as to supervise the implementation of Articles 1017-1 to 1017-12 of the new code of civil procedure and Article 3-1 of the code of criminal procedure. Furthermore, the committee is to make any suggestions it deems helpful to the government.

The nine committee members are nominated by the ministers of equal opportunities, justice and the interior, the judicial service, the police force and the Service d'Assistance aux Victimes de Violence Domestique (SAVVD), which is an NGO serving domestic violence victims. They are appointed by the equal opportunities minister for a renewable term of 5 years.

Mandatory training for all police officers

In order to ensure that the law on domestic violence was implemented appropriately, a special training course was designed for all Luxembourgish police officers. The course and tools to support the correct implementation of the law were developed by the victims' support organisations Profamilia,



Femmes en Détresse and Fondation Maison de la Porte Ouverte. It has been included in the 2-year basic training that all police officers receive on their recruitment. It consists of three parts:

1. psychological aspects of domestic violence (e.g. cycle of violence);
2. police interventions in the context of the law on eviction and how to work with domestic violence victims and perpetrators: the new mechanisms provided by the law;
3. how to record incidents and interventions in notes and reports to the state prosecutor.

The training was also offered to police officers already in post in 2003 when the law was adopted. Besides the training, specific tools to support the police have been designed, including checklists, intervention protocols, crime reports and an information card for victims and perpetrators of violence (available in 13 languages).

In 2004, 36 week-long training sessions were delivered to 20 to 30 participants at a time, so reaching approximately 1 000 police officers. Since then an additional 60 police staff have been trained each year. This specific training of police officers ensures that victims are protected, that police give all necessary information to all parties involved (victim and perpetrator) and that the public prosecutor can take an informed decision on the eviction of the perpetrator.

The law is a clear signal to victims and authors that Luxembourgish authorities do not tolerate domestic violence and that it is the perpetrator of the violence who should leave his house and not the victims.

Smooth implementation of the law

The training has proved to be an effective tool to implement the law on domestic violence. Police action in the field of domestic violence has steadily increased (except in 2010) as has the number of

decisions to evict perpetrators (evictions are for an initial 14-day period which the victim can apply to extend). In 2011 there were 675 police actions and 331 decisions by the public prosecutor (49 %) to evict. In 2013 there were 801 police interventions resulting in 357 evictions.

In 2011, only four interventions (1 %) were reported by NGOs as having been problematic, which is very low in comparison with other types of police action. This shows that the training of the police force, and the cooperation between all actors in the cooperation committee, have had a great impact and have allowed a smooth and appropriate implementation of the law. Permanent dialogue between the police force and other actors entails constant adaptation and finding concrete answers in domestic violence cases.

The implementation of the 2003 law on domestic violence was evaluated in 2006 and is monitored regularly by the cooperation committee. This confirms that the training, within the whole range of measures adopted, works well and no major problems have been found in its implementation by the police. The training itself has not been evaluated. In the future, a satisfaction questionnaire will be systematically distributed and collected at the end of each training course.

The law was amended in 2013 to add a component on support services for perpetrators. This will require an adaptation of police intervention and an update of the training for police officers. In the future, following the ex post evaluation questionnaire to trainees, it will be possible to see if improvements to the training course itself are needed.

Stakeholders learn from each other

The initiative's success has relied on the training course being part of the formal police curriculum. It is complemented by regular monitoring of police action by a specific committee established by law, which involves all the actors concerned. Specialists

working with victims are involved in delivering the training course.

Annual exchanges with police forces from neighbouring German *Länder* are organised to share good and bad operational experiences in dealing with domestic violence. The Luxembourgish and German laws on the eviction of perpetrators share a lot of similarities, so these exchanges are valuable for police officers. However, there are some barriers to transnational transfer because the content of the training course depends on the detail of the law, and has to change if the law is amended. Even where laws are similar, intervention principles sometimes differ between countries.

The law has two main lessons to teach. Firstly, the creation by the law itself of a cooperation committee allows all actors involved in the fight against domestic violence to report regularly on their practices and the difficulties they encounter, thus allowing the development of good practices. Secondly, it is important that all partners know what the others are doing and can discuss and adapt their practices to ensure the smooth implementation of the law. This is constantly reflected in the basic training of police officers, which is delivered by trainers from the police and from NGOs working with victims of domestic violence.

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Further information

Government website on combating domestic violence:

<http://www.mega.public.lu/fr/societe/lutter-violence-domestique/index.html>

Cooperation committee:

<http://www.mega.public.lu/fr/acteurs/comites/cooperation-violence/index.html>

National action plan on the equality of women and men 2009–14: <http://www.mega.public.lu/fr/publications/publications-ministere/2010/pan-egalite/plan-egalite2009-2014.pdf>

Law of 30 July 2013 amending the law of 8 September 2003 on domestic violence: <http://www.legilux.public.lu/leg/a/archives/2013/0150/a150.pdf#page=2>



Specialised training for professionals working in statutory agencies represented in the Working Group on Prevention and Elimination of Intimate Partner Violence Against Women in Košice Slovakia, 2008

Training for a multi-agency approach

Summary

A monitoring exercise carried out in Košice in 2008 showed that public agency personnel working with women surviving domestic violence had no access to training. A course was therefore devised by the local women's NGO Fenestra with ministry support.

The course was delivered in four districts of the city. Thirty-six professionals — police officers, social workers, health professionals, psychologists and lawyers — working in these institutions attended specialised training workshops, which sensitised them to the subject of partner violence. The main topics covered were common myths related to intimate partner violence, its real causes and nature, the risk factors, the safety of women, who is responsible for violence against woman and the health impact of partner violence on women and their children.

A manual was created describing in detail the competences and procedures of each support agency, and the course has inspired a similar project in another region of Slovakia, Prešov.

A holistic approach requires coordination

In Slovakia, the national political agenda on domestic violence and violence against women (VAW) is closely associated with gender equality policies. Equality between women and men was put on this agenda in the second half of the 1990s, mainly as the result of international commitments made as part of the EU accession process. Until 2004, VAW was included in the national plans for women (1997) and was

framed within the context of equal opportunities for women and men (2001). The approval of a strategy addressing VAW went together with numerous struggles, discussions, staff changes and pressure from NGOs. The main conflict was related to the recognition of the concept of gender-based violence and the choice of exclusively targeting women⁽¹⁸⁾. It was decided to follow a holistic approach embracing criminal law, delivery of assistance, prevention and research. Close coordination among all stakeholders was deemed to be essential⁽¹⁹⁾. This was especially true as the cross-cutting nature of the issue means that the actors in the VAW policy represent a wide range of areas: security and protection, criminal law, social and health services, civil society and research. The ministries most closely involved have been those for labour, social affairs and family, interior, justice and health. In accordance with the decentralisation and democratisation process, more and more responsibilities have been delegated to the regional authorities. At the same time, NGOs play a significant and indisputable role, even taking over the state's responsibility for tackling domestic violence.

A need for training

In 2008, the situation of support and protection of women surviving domestic violence in the town of Košice was monitored. This monitoring revealed strengths, weaknesses and opportunities for development. One of the weaknesses revealed was the lack

⁽¹⁸⁾ Barbara Holubová, 'Violence against women and the role of gender equality, social inclusion and health strategies', National report prepared for the EGGS Network, European Commission, 2010.

⁽¹⁹⁾ The national strategy on prevention and elimination of violence against women and in families.

of training and education of public agency personnel working with women surviving domestic violence.

A training course was therefore developed, targeted at police officers, social workers, health professionals, psychologists and lawyers. The training aimed to improve the effectiveness of the work of professionals belonging to the Working Group on Prevention and Elimination of Intimate Partner Violence Against Women in Košice (which was set up in 2008), to encourage cooperation among them and to create a learning platform for meetings and the exchange of knowledge among the institutions involved.

Developing the course was an initiative of Fenestra, a women's NGO in Košice, and was funded by the Committee for Crime Prevention under the auspices of the Ministry of the Interior. Four districts of Košice were chosen for delivery: Sever, Západ, Dargovských hrdinov and Nad jazerom.

The main institutions responsible for domestic violence service delivery in each district were chosen. The first criterion was the potential of the institution to be the place of first contact for women surviving partner violence and searching for support. These were police stations, social and family services offices, hospitals, field social workers, centres of psychological consulting and prevention and prosecutors' departments.

Professionals working in these institutions attended specialised training workshops, which sensitised them to the subject of partner violence. The main topics covered were common myths related to intimate partner violence, its real causes and nature, the risk factors, the safety of women, who is responsible for violence against woman and the health impact of partner violence on women and their children.

A manual was created describing in detail the competences and procedures of each support agency in case of partner violence. The chapters on specific areas of intervention were written by the represen-

tatives of the agencies — members of the Working Group on Prevention and Elimination of Intimate Partner Violence Against Women in Košice.

Thirty-six people were trained. They rated highly the information delivered during the training and the opportunity to exchange their experiences with people from other professions. This has opened up useful informal channels of cooperation among professionals.

Exchange between professionals

The training course was useful in bringing together professionals with different backgrounds and roles in dealing with domestic violence, and was embedded in a broader project fostering a multi-agency approach among the members of the Working Group on Prevention and Elimination of Intimate Partner VAW in Košice. It proved to be an effective way of disseminating standardised procedures to support women survivors of domestic violence, and it enabled agencies to exchange information and knowledge.

It is based on a victim-centred and multi-agency approach that brought together several different organisations involved in domestic violence, who signed formal protocols. During its implementation, it involved experts directly working with victims.

It was built on a definition of domestic violence based on international documents and agreements that define VAW as gender-based violence, and as the cause and consequence of a historically and socially constructed imbalance of power between men and women. These assumptions give a good foundation for impacting on the wider environment because they highlight gender inequalities in areas such as the risk of poverty for women experiencing violence, and the threat to women's bodies as a consequence of inappropriate or insufficient responses from state and local government agencies.



No evaluation or monitoring of the training course as such has been conducted. However, there are several ways in which its effectiveness could have been improved. A first step would be to formalise procedures through the approval of protocols of intervention within each agency and amongst agencies that work together. A second step further would be to transform the training course into an ongoing practice. Thirdly, the delivery of the training course would benefit from periodic evaluations. In spite of the involvement of the national Ministry of the Interior in the initiative, no specific plans have been made to continue the initiative.

A model for other regions

Good points about the training course were that it was grounded in practice and aimed to remedy the deficiencies revealed by monitoring the situation on the ground. It was built on a multi-agency approach involving different representatives from statutory agencies working with domestic violence victims, and it has created a manual, written by agency representatives, which describes the appropriate intervention procedures for each agency involved and is of long-term value. The manual is available online on Fenestra's website and can be used by any statutory agency that wants to improve its professional support in cases of domestic violence.

The transferability of the training course may be limited due to the specific people and institutions

involved. Moreover, the typology of institutions involved in the training is associated with the legislative setting and the resulting responsibilities of each institution. However, the training course has served as a model for other regions to start similar cooperation (e.g. the region of Prešov), showing that the practice could be transferred and be a learning example in other contexts.

The lessons learned from the process are firstly that the starting point for a positive training experience is the analysis of training needs amongst the targeted professionals. Secondly, multi-agency training has the potential to initiate cooperation amongst different agencies. Thirdly, knowledge exchange amongst different agencies on how to respond to domestic violence can be stimulated by the compilation of a manual that takes stock of individual agencies' procedures.

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Abuse and gender violence: an interdisciplinary vision (Los malos tratos y la violencia de género: una visión interdisciplinaria), Spain 2006–14

Master's course in gender violence improves professional practice

Summary

The Master's degree course on 'Abuse and gender violence: an interdisciplinary vision' was launched in 2006, not without problems, but it was pushed through by persistence on the part of the teaching staff.

Its launch in 2006 was not without problems, but it was pushed through by persistence on the part of the teaching staff. Since then it has grown to be one of the top-rated courses among students.

It has a multidisciplinary approach, and considers the issue from the educational, psychological, sociological, medical, media, social assistance and judicial viewpoints. It also takes the effects of violence on groups of women such as women with disabilities into account and has won an award for this. The course consists of 10 obligatory courses plus an optional one involving 700 hours of research work.

One of the keys to its success is that it uses an online platform which allows students from all over Spain to take part. It also brings in expert professionals as trainers, meaning that it can attract high-level professionals such as judges, senators, policemen and psychologists as students, and that these can then apply what they learn in their working lives. This means it has a real impact on the way gender-based violence is dealt with by the various institutions.

With an intake of between 220 and 370 students each year, the course has so far attracted 1 800 students from different areas of Spain and other countries.

From domestic violence to gender-based violence

The Organic Law on Comprehensive Protection Measures Against Gender Violence ⁽²⁰⁾, approved in December 2004 and coming into effect in January 2005, is the cornerstone of the Spanish approach to fighting gender-based violence (GBV). The law addressed GBV for the first time in Spanish legislation, as opposed to the former domestic violence approach. The new legislation defines GBV as a manifestation of discrimination, inequality and power relations of men and women. It covers aspects ranging from preventive, educational and social to care and aftercare for victims, and it tackles GBV from a comprehensive and multidisciplinary approach. This is the law's most noteworthy feature.

According to the mandatory evaluation of the application of the law, published in December 2009 ⁽²¹⁾, the law has led to an unprecedented deployment of measures and actions and the mobilisation of major resources. Since this law came into force, the Spanish government has invested almost EUR 800 million in policies to prevent and fight GBV.

Specific support institutions, such as information and legal advice helplines and healthcare units specialising in GBV have been set up, along with special courts and public prosecution offices as well as specialised security services. Specialists in violence have been hired in healthcare and forensic services, and resources have been allocated to help women escape from violent situations.

⁽²⁰⁾ Organic Law 1/2004 of 28 December 2004 on Comprehensive Protection Measures Against Gender Violence ('organic' or fundamental laws are those which have to pass by an absolute majority of the Congress of Deputies, rather than by a simple majority).

⁽²¹⁾ An evaluation of the application of Organic Law 1/2004 of 28 December on Comprehensive Protection Measures Against Gender-Based Violence (2009), Ministry of Equality, Government Delegation for Gender-based Violence.



The principles of the strategic approach, as stated in Article 2 of the law, are:

- awareness-raising with the aim of prevention in the fields of social services, education, health, and media and publicity;
- guaranteed access for victims to a comprehensive system of support services, including economic support;
- strengthening of the legal framework in order to ensure the comprehensive and rapid protection of victims of GBV.

Additionally, the focus on vulnerable groups, such as immigrant and women with disabilities, has resulted in the approval of a specific plan, the plan against GBV in the immigrant population (2009–12) ⁽²²⁾.

Changing the working practices of influential professionals

In 2006, Spain's national distance learning university, Universidad Nacional de Educación a Distancia (UNED), based in Madrid, launched a Master's de-

gree course entitled 'Los malos tratos y la violencia de género: una visión interdisciplinaria' ('Abuse and gender violence: an interdisciplinary vision').

The course is interesting because it brings a multi-dimensional and holistic approach to domestic violence into a formal university curriculum. It attracts a lot of students, and the number has increased over the years it has been taught. More than that, it attracts students who can make a difference. It has a significant impact since the students, who include judges, senators, policemen and psychologists, apply the knowledge they have learnt, from practising professionals, in their professional lives.

The course has a strong basis in human rights and gender analysis as well as a clear, appropriate and comprehensive definition of domestic violence. These are presented in a well-developed and multi-level course, which benefits from specialist expert trainers who deal day to day with the issues involved. The mix of online and on-site activities contributes to its reach and to its efficiency.

Students learn how to implement methodologies and practices in order to improve the protection of women at risk of domestic violence, which contributes to gender equality. Groups that stand to benefit professionally include judges, senators, prosecutors, lawyers, psychologists, teachers and police officers. With between 220 and 370 students a year, the course has so far involved 1 800 students from different areas of Spain and other countries.

The specific outcomes in terms of gender equality are indirect. However, the Master's is a key instrument in developing the day-to-day work of professionals involved in fighting domestic violence such as police officers, psychologists, judges and lawyers. It transforms their traditional practices in favour of a different and more sensitive approach, helps them to decide on the correct action and raises awareness on the subject at the highest levels. An important feature is that the course approaches GBV from an interdisciplinary

⁽²²⁾ [https://www.msssi.gob.es/ssi/violenciaGenero/Documentacion/medidasPlanes/DOC/Plan_atencion_prevenicion_violencia_genero_poblacion_extranjera_inmigrante\(2009_2012\)_INGLES.pdf](https://www.msssi.gob.es/ssi/violenciaGenero/Documentacion/medidasPlanes/DOC/Plan_atencion_prevenicion_violencia_genero_poblacion_extranjera_inmigrante(2009_2012)_INGLES.pdf)

standpoint, which improves the quality of the actions taken to tackle it. The Master's also influences individual attitudes towards gender violence.

A holistic approach

The topic of gender violence is studied holistically, that is to say from very different viewpoints including the educational, psychological, sociological, medical, media, social assistance and judicial.

The Master's aims to provide an understanding of gender violence, giving the participants the capacity to identify situations in which it occurs. Following this approach to the subject, it presents effective measures for the protection and rehabilitation of victims, and tools for prevention. It combines on-site and online activities. It includes a virtual platform for online classrooms, 92 conferences and teaching material available in PDF format.

It encompasses 10 obligatory courses: the origin and transmission of gender violence; language as an instrument of oppression; the victims of gender violence: the offender and the victims; children as victims of gender violence; the persistence of violence against women; the law and gender violence in Spain; the recovery of victims; psychological features of offenders; immigration and gender violence; and disabilities and gender violence. There is also one optional course which includes 700 hours of research work.

The Master's provides a professional expert certificate for those students who have not attended tertiary education.

One of the university's best-rated courses

Two different evaluations are conducted every year at the end of the course. On one hand, the university (UNED) launches a survey on global satisfaction on the training provided including the seminars, conferences, teaching material and the virtual platform.

This shows that the Master's has been one of the best UNED courses out of more than 600. The professors also conduct their own internal evaluation, and this comes up with similar results as regards the students' global satisfaction. Many of them remark how the Master's has changed the way they understand and tackle domestic violence in their own work.

Nevertheless, three ways of improving the course are frequently mentioned:

- the training material could be updated, although the texts are generally from 2008–11;
- the virtual platform causes some technical difficulties at first but they can be rapidly resolved;
- it is difficult to organise face-to-face activities such as workshops as the students are spread widely across Spain. However, some workshops are already available and the majority of the students can follow them online through the virtual platform. In some cases the Master's has arranged local workshops with municipalities.

Factors of success

The launch of the course was problematic and its success was due to the efforts of the staff that identified the experts and proposed the course to the UNED foundation. One of the main problems experienced since then is the selection of students as, occasionally, male perpetrators of domestic violence enrol in the course in order to control their wives or boycott the course.

The main factors in the course's success are that it pays attention to the effects of domestic violence on different groups of women (it received the 2011 CERMI Award ⁽²³⁾ for its attention to disabled women); the online platform allows it to reach a considerable number of students; it is independent of political and educational entities; students have a high

⁽²³⁾ An award given by the Spanish Committee of Representatives of Disabled People of Andalucía to acknowledge individuals and entities in the fight to eliminate barriers in this community.



level of responsibility and are hence highly motivated; and professors do not belong to the university but are the best experts in each subject taught.

The experience of running the course teaches the following.

- Independence from other politically influenced organisations is a basic necessity.
- The means and resources have to be adequate.
- The Master's boosts open-minded relations, tools and schemes in order to understand the scope of domestic violence. The approach employed throughout the course led to interdisciplinary practices and overturned stereotypes and traditional perspectives.
- As a diverse range of professionals are involved in the course, their interaction is quite positive and leads to the discovery of alternative solutions to real problems the students experience in their work.
- The Master's should be in permanent evolution depending on the profile of the students and professors.

The course has been offered for replication in other universities.

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The Coordinated Action Against Domestic Abuse's independent domestic violence advisor training, United Kingdom 2005–14

A training course for domestic violence advisors

Summary

The Coordinated Action Against Domestic Abuse (CAADA) has developed a training course and professional qualification for independent domestic violence advisors (IDVAs), who work with victims who most risk serious harm. It leads to a qualification recognised in the national system at level 3. Since 2005, CAADA has trained 1 400 IDVAs, two thirds of the number required for national coverage.

The training is organised in five classroom blocks, each lasting 14 days, and includes five assessed worksheets which are submitted online. The course gives professionals the opportunity to develop an essential 'IDVA toolkit' of skills including motivational interviewing, applying the stages of change, active listening, assertiveness, negotiation and pro-social modelling.

The final result of the course is to produce qualified professionals who have the skills to help make victims of domestic abuse and their children safer, and this has been proven by evaluation research. More than half (57 %) of the victims reported that the abuse stopped after the intervention of an IDVA, and 76 % of victims said they felt safer. The most significant reductions were in respect of physical abuse. Direct risks to children were also reduced. In terms of more general well-being, an improvement in individuals' social networks was reported for 47 % of cases and an improvement in coping abilities in 63 % of cases.



The importance of independent advice to violence victims



In the United Kingdom, support services for victims of domestic abuse first developed with the refugee movement in the 1960s and 1970s. Today, the Women's Aid Federation of England supports more than 500 domestic and sexual violence services nationwide. In recent years, important changes have been made to the way in which victims of domestic abuse are supported to live in safety. In particular, more attention has been focused on keeping victims safe in their homes rather than being obliged to move to temporary accommodation.



A key part of this process has been the introduction of the independent domestic violence advisors (IDVAs). IDVAs are specialist caseworkers who work with high-risk victims of domestic abuse, those most at risk of homicide or serious harm. IDVAs work from the point of crisis on a short- to medium-term basis and play a key role in multi-agency risk assessment conferences (MARACs). They work with the victim to assess the level of risk, discuss the range of suitable options and develop coordinated safety plans. IDVAs are able to access multiple resources on behalf of victims by coordinating the response of a wide range of agencies who might be involved with a case, including those working with perpetrators and children. IDVAs work in partnership with a range of statutory and voluntary agencies but are independent of any single agency. In common with other specialist domestic abuse services, their goal is safety.

What a domestic violence advisor needs to know

The IDVA training course was established in early 2005 with the aim of giving practitioners in this field a recognised qualification and a common framework for their practice and the development of service standards for IDVAs. The effectiveness of the training is proved by the fact that the training model gained formal recognition: it is accredited by the Open College Network at level 3. The CAADA is the Home Office endorsed provider of specialist IDVA training, with a contract to provide training until 2015, which guarantees sustainability until then. The efficiency of the training is evidenced by the number of learners passing through the training programme: in its first 7 years the organisation trained over 1 400 IDVAs, around two thirds of the number required for national coverage.

The CAADA provides the only specialist foundation IDVA training course in the United Kingdom, run in partnership with the Home Office. The course provides IDVAs and domestic abuse practitioners with the skills and tools they need to effectively support high-risk victims of domestic abuse. The

course equips learners with a clear understanding of how to identify risk, support clients and address the issues that they face in a consistent and professional way. The CAADA IDVA training course has been designed to help build skills, knowledge and confidence, enabling professionals to provide the best possible support to improve the lives of high risk-victims of domestic abuse and their children. The ultimate aim of the course is to make victims of domestic abuse and their children safer. Motivating and empowering each client to make changes in their lives are key skills for effective IDVAs.

The course comprises 14 days of in-room training, delivered in five blocks, and the completion of five assessed worksheets which are submitted online. The curriculum is as follows.

- Block 1: The IDVA role and toolkit, self-care and vicarious trauma, diversity considerations
- Block 2: Risk management, MARACs, multi-agency skills
- Block 3: Criminal justice response to domestic violence, case management, individual tutorials
- Block 4: Civil law, safeguarding children, mental health and substance misuse
- Block 5: Housing, black and minority ethnic (BME) clients, sexual violence

The course aims to expand skills to respond to abuse by developing an 'IDVA toolkit' of practical skills which include motivational interviewing, applying the stages of change, active listening, assertiveness, negotiation and pro-social modelling. It develops expertise and confidence in identifying, assessing and managing risk; provides expert input on criminal justice agency work; discusses safety options; builds confidence in multi-agency working; and introduces specialist tools, techniques and knowledge to respond to high-risk victims. It also builds understanding of risk management strate-

gies, individually and in a multi-agency setting, such as MARACs, 'defensible decision-making' — how to ensure accountability — and how to relate risk directly to individual client safety plans.

In recognition of the research and reporting information from all the key agencies responding to domestic abuse, the main focus of the training is on work with women experiencing domestic abuse from male partners or ex-partners. However, some training is provided on responding to women and men experiencing abuse within lesbian and gay relationships, and men experiencing abuse from a female partner.

All-round approval

The course meets with overwhelming approval, and 98 % of learners say that they feel more confident in their role after receiving the training. Qualitative feedback reflects this, in that learners say they intend to change the way they work to improve the victims' experience. It is also viewed positively by the authorities that employ IDVAs, and many service commissioners specify CAADA-trained IDVAs as a service requirement. The programme has Home Office funding until 2015. By sending staff on the course, services can demonstrate to funders that they are commissioning-ready.

The success of the IDVA training shows the effectiveness of multi-agency work, as well as the importance of having highly skilled professionals with a clear understanding of how to identify risk, to support clients and address the issues in a consistent and professional way. It has also shown the value of having a professionally trained independent advocate to represent victims of domestic abuse in a multi-agency setting.

Its existence has improved services for high-risk victims of domestic abuse, with over 1 400 IDVAs trained since 2005. More than half (57 %) of the victims asked reported that the abuse stopped after the intervention of the IDVA, with a range from 44 %

for those receiving limited support to 67 % for those receiving intensive support. The most significant reductions were in respect of physical abuse. IDVAs reported reduced risk in 79 % of cases, backed up by 76 % of victims reporting that they felt safer, and direct risks to children were also reduced. In terms of more general well-being, an improvement in individuals' social networks was reported for 47 % of cases and an improvement in coping abilities in 63 % of cases.

Finally, the work of IDVAs and MARACs has saved public money. The CAADA estimates that existing high-risk services cost GBP 70 million (EUR 87 million) to run and for every GBP 1 spent, GBP 2.90 is saved ⁽²⁴⁾.

Continuous improvement of the course

The IDVA training programme is regularly updated so that the content reflects the sector, for example any changes in legislation, policy or best practice. This ensures that learners have the most up-to-date skills and knowledge to support their clients and are able to use all available options to make them as safe as possible.

Over the next 5 years, the CAADA aims to work in partnership to halve the number of victims experiencing high-risk domestic abuse from 100 000 to 50 000, and halve the average time it takes victims to seek help from 5 years to 2½ years.

To achieve this, plans include:

- promoting the early identification of domestic abuse, by finding ways to extend the reach of IDVA services to marginalised women who are not visible, or who are unwilling to access the criminal justice system, by integrating them more with health services;

⁽²⁴⁾ 'A place of greater safety', CAADA, Bristol, 2012.



- providing training, support and practical tools to shape service provision nationally (especially for victims with complex needs);
- sharing and embedding best practice both in terms of sustaining the multi-agency response and through the leading lights programme;

The CAADA's continuous professional development (CPD) programme will assist in achieving these plans. The CPD programme offers additional training on particularly complex issues linked to domestic abuse and offers those who have graduated from the IDVA training course further opportunities to specialise and develop. Courses developed so far include safeguarding children living with domestic abuse, substance misuse and sexual violence.

Spin-offs

The course has had several spin-off effects: other training providers have developed further qualifications for professionals working in the domestic abuse sector. The CAADA is working in partnership with specialist services to develop CPD courses on subjects such as substance misuse, safeguarding children, working with young people, sexual violence and mental health. As part of the leading lights programme (a programme that has developed and supported services to achieve minimum standards of service provision), the CAADA training course will be developed for domestic violence ser-

vice managers. Increased funding could increase the scope and scale of the training programme, opening it up to greater numbers of learners. However, ongoing funding cuts to domestic violence services nationwide are decreasing the number of services operating and reducing the training budgets of surviving services.

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'A place of greater safety', CAADA, 2012: http://www.caada.org.uk/policy/A_Place_of_greater_safety.pdf
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Court watching to monitor the implementation of the law on victims' protection against domestic violence, Bulgaria 2005–14

Bulgaria's court watch reduces discrimination and delay in the courts

Summary

The job of court watching involves trained volunteers attending court cases involving domestic violence, to note down a set of indicators such as the demographic characteristics of the victims and perpetrators, whether or not a protection order is issued and how many cases are withdrawn or delayed.

The court watch project in Bulgaria started at both Varna regional and Varna district court in 2006, after a memorandum of cooperation was signed between Varna regional court and SOS Families at Risk Foundation. It is carried out by four local NGOs.

Court monitoring reduces the incidence of bias and discrimination, and also improves indicators such as the number of immediate protection orders, the range of measures included in the final decisions and the average duration of the lawsuit. The statistics show that between 2010 and 2011, the number of protection orders issued more than doubled.

Court monitoring costs very little — approximately EUR 8 000 a year per court, but does rely on the time given by committed volunteers.

The project was funded by the Open Society Foundation, and because of its success has now extended the project to cover four other Bulgarian towns. Other donors are also making this form of action a priority.

Improving implementation of the law on domestic violence



The most specific feature of the policy approach to violence against women in Bulgaria is the importance of the legal framework and the involvement of law enforcement institutions. There is a firm belief that only a law can change the situation in a case of serious social problems such as domestic violence and trafficking in human beings. These are not just individual problems of the people who are suffering from violence, but public problems. In accordance with the Law on Protection against Domestic Violence (adopted in March 2005) the responsible institutions elaborated a national programme on prevention and protection against domestic violence. The first programme was approved for the period 2007–08. While challenges remain for all sectors, the response has been encouraging. The law's effective implementation is essential to make victims safe and bring offenders to account. Bulgaria's NGOs have been instrumental in this process through their initiatives in training, victim support and coordination among government sectors.

Why watch courts?

The main benefit provided by domestic violence court watch is that it provides independent monitoring of the law's implementation. Its methodology stands for an active civil society and it supports judicial reform efforts. Observation of judicial prac-



tices prevents or at least limits the effect of bias, prejudice and discrimination and makes the rule of law a little more predictable. It also enhances the law's impact by communicating what is observed via the media.

Bulgaria's first court watch project started in 2006 at both Varna regional and Varna district court. It was inspired by the experience of a lawyer who took part in court watch in the United States, and is enshrined after a memorandum of cooperation signed between Varna regional court and SOS Families at Risk Foundation. The memorandum itself is not limited in time, and may be extended to cover other laws soon, such as the law to combat trafficking in human beings and cases under the criminal code. The watch is conducted by four non-for-profit organisations: the Demetra Association in Burgas, the Youth Alliance Association in Varna, the NGO centre in Ragzrad and the Bulgarian Gender Research Centre Foundation in Sofia.

Its aims are to obtain information on the demographic characteristics of the victims and the perpetrators, the results of the imposed penalties (for instance, whether the fines have been paid) and the quantity and the quality of the work the judges and their auxiliaries have carried out. Using this information, it hopes to improve the protection of victims of domestic violence, make judges and prosecutors more aware of the issue of victim protection and increase the visibility of the justice done in cases of domestic violence.

The job consists of weekly monitoring of domestic violence cases in the district and regional courts by specially trained monitors, following a questionnaire designed ad hoc for each proceeding. The questionnaires are then processed.

Protection orders double

Court watch appears to be transforming court performance. Comparing the statistical data from 2010 and 2011 shows that the number of immediate pro-

tection orders rose from 13 to 34, and the number of subsequent protection orders rose from 18 to 29. Taken together, this represents nothing less than a doubling. The number of cases terminated or withdrawn by the client was 11 in 2010 and 10 in 2012. The average duration for lawsuits under the Law for Protection against Domestic Violence shows a falling trend from over 2 months to less than 2 months. There is also an improvement in the range of measures included in the final decisions.

The estimated cost of performing extensive court monitoring of the Law for Protection against Domestic Violence is EUR 8 000 a year, which shows that it is quite a low-cost and efficient intervention.

Lawyers need to be trained

The project assessed how the law was being implemented according to parameters including the way the court's activity was organised, meeting deadlines and the reasons cases were delayed or postponed. A year after the law was adopted, court watch helped to identify a number of significant problems, and therefore made the following recommendations:

- the court can only intervene effectively in cases of domestic violence in combination with the victim support and perpetrators' social programmes stipulated in the law;
- most cases under the Law for Protection against Domestic Violence are heard in the big cities where civil society organisations supporting victims and watching the courts have been set up. However, very few people outside these organisations are familiar with the law, and so victims do not take advantage of the opportunities it offers. This shows that there is a need to run campaigns to promote the law, and to educate lawyers.

There are a couple of ways in which the system could be improved. The court observer's card needs to be revised and re-elaborated periodically, to respond to current aims and gain new significant

information. Secondly, annual feedback questionnaires and interviews with lawyers, judges, prosecutors, etc. could be carried out.

Court watching spreads to other towns

The court watching project in Varna has inspired emulation. The Open Society Institute (Sofia) funded the first project as part of its programme for promoting judicial reform and human rights protection in Bulgaria. A year later, given the positive results it achieved, it extended its support to other regions of the country, and chose four projects for funding, in Sofia, Varna, Burgas and Razgrad. The concept has also been disseminated in 11 towns in Bulgaria through the Alliance for Protection against Domestic Violence, which brings together 13 local NGOs across the country. Between 5 and 10 volunteers in each of 10 towns have been trained and prepared to conduct observations in their local courts.

The first projects attracted a lot of interest, and other donor organisations such as the judicial system strengthening initiative of the US Agency for International Development also gave court watch a high priority. This provides other civil society organisations with a chance to use and develop this practice as well. Annual projects within the national programme on prevention and protection against domestic violence financed by the Ministry of Justice may support the activity on a local level. Resources gathered by the alliance may be dedicated to the action as well.

More organisations are deciding to develop programmes for perpetrators, because one of the measures under the law obliges perpetrators to participate in rehabilitation programmes, and this will possibly increase the effectiveness of the process.

Court watching is successfully providing the judicial system with an external independent monitoring system. It provides empirical data on the implementation of the law, enhances public information on the effectiveness of the law and supports legal reform.

Given the agreement of the relevant court, the sustainability of this practice depends on two main factors: on the one hand finance for those activities which require it (such as conducting surveys, preparing reports and organising events) and on the other motivated volunteers. There is an obstacle to expanding court watch to cover a wider range of cases, not only those cases initiated by the NGOs, which is that it depends on the court providing in good time a schedule of cases being heard under this specific law. This aspect proved to be critical.

The lessons learned from the process are that where institutional bodies or initiatives are lacking, court watch is a powerful tool available for civil society organisations to monitor the implementation of the law and to promote law reform. The watch also proved to be useful and effective in the assistance and support of victims.

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Medical intervention against violence (Model project MIGG), Germany 2008–11

Setting standards for the medical care of victims of gender violence

Growing awareness leads to legislation

Summary

Reducing the impact of sexual violence depends as much on the medical system as it does on the legal system, so it is important that hospitals and general medical practitioners should know how to detect whether their patients may be victims of it. A partnership of NGOs and university institutes therefore decided to develop and pilot a standard for treating victims of violence.

It identified a systematic routine screening procedure to detect domestic violence victims in emergency rooms, and created an intervention model. This covers how to approach women, what the 'red flags' to look out for are, where to find information, what the law is and how to prepare documentation for use in court. It also took the needs of groups such as migrant women and women with disabilities into account.

The partners knew the need for different agencies to work together on this issue, and therefore also put effort into establishing multi-agency networks involving anti-violence associations, medical organisations and associations of general practitioners.

The pilot trained 136 doctors in five areas of Germany, both urban and rural, and received very positive feedback from them. It was particularly successful in Berlin, where it continued with city funding after the end of the project.

The project ran up against some reluctance from doctors to recognise the need to improve their treatment methods, but these doubts were overcome through personal contact backed up by the views of the medical associations.

The Medizinische Intervention gegen Gewalt (MIGG) (medical intervention against violence) project is still under way in some of the pilot areas, with the financial support of the respective *Land* governments. If it is to be extended across the whole country, it will need to gain the support of the remaining *Länder*.



In Germany, public awareness of gender-specific violence was given a boost in the 1970s as a result of the emergence of the women's movement, which opened up discussions on rape and sexual violence. The subsequent creation of women's refuges, helplines and programmes to protect and support girls made the topic an integral part of political discourse. In the 1980s, sexual abuse within families was systematically defined as a crime (Straftaten gegen sexuelle Selbstbestimmung) and was followed by the foundation of help facilities for victims of sexual abuse. Through this, domestic violence against women and children was recognised and received increased public attention. To combat gender-specific violence, since 1999 the government has developed national action plans (NAPs). The core of the first NAP was legislation (such as the Protection against Violence Act (Gesetz zur Verbesserung des zivilrechtlichen Schutzes bei Gewalttaten und Nachstellungen, Gewaltschutzgesetz — GwschG)) to ramp up the criminal prosecution of violence — especially domestic violence. Federal programmes are interconnected with initiatives at state (*Land*) level and with projects by NGOs. Several initiatives at *Land* level aim to raise the awareness of the public in general and of experts in this field in particular.

In September 2007, the federal government launched the second action plan of the federal government to combat violence against women in order to respond to the current challenges regarding the protection of women affected by violence and

their children. A key focus of the plan is the health-care sector. As part of this action plan, and following positive experience in the clinical area, the Federal Ministry for Family Affairs, Senior Citizens, Women and Youth launched a pilot project to ensure that women victims are given the right assistance.

Creating an intervention model

The Medizinische Intervention gegen Gewalt (MIGG) (medical intervention against violence) project developed unified standards for the treatment of women victims of violence in emergency rooms and specialist outpatient departments, and identified the main warning signs — known as red flags — that may indicate domestic violence and merit attention from health personnel. It also considered the needs of specific victim groups such as migrant women and women with a disability.

The main aim of the 3-year project, which was piloted in five locations, was to introduce and test an intervention programme to train and raise the awareness of physicians in their own practices. It also tested the all-important cooperation and networking between outpatient departments and regional emergency violence support centres.

The MIGG created a medical intervention model to improve the healthcare treatment of women victims of domestic violence and to increase healthcare professionals' awareness of the issue. The project helped doctors to identify and address the consequences of violence, and to document evidence for use in court.

It did this through conducting an intense exchange with universities and healthcare units, offering doctors support in documenting injuries for use in a court of law, giving specialist advice, distributing posters and information for patients to support health education, training and information events and setting up an Internet platform.

International standards

The intervention model was based on international standards for health units in different medical sectors, and was tested with several self-employed medical practitioners in five regions of Germany, including both rural and urban areas in Berlin, Düsseldorf, Kiel, Munich and Ennepe-Ruhr-Kreis.

The project trained 136 doctors (77 female and 60 male with various qualifications, including inter-nists and gynaecologists in outpatient departments) in how to approach women victims of violence, and in where to find information. It provided information and training materials on documentation, communication, the law and regional networks working with women victims of violence (both NGOs and the judiciary system). It presented and implemented standards for practice. The intervention standards are an evidence-based plan of action for the medical care of women victims of domestic violence. During implementation, doctors were supported by the pilot project partners. The training was very successful, as testified by interviews with both trainers and trainees.

The project also involved organisations and authorities working with women victims of violence, in order to improve networking and enable them to integrate healthcare in their overall intervention. The best outcome in this regard was in Berlin, where networking has continued since the end of the pilot project with additional finance from the Berlin government. In general, the pilot project produced multiplier effects in all five locations.

Relevance, sustainability, impact and effectiveness

Given that the healthcare sector plays such an important role in fighting domestic violence, the MIGG pilot project is of particular relevance because it identifies a synergic way in which medical intervention to victims of violence can be carried

out. The project has had a wide impact by creating a model that can be implemented nationwide. Its activities in five different areas proved its effectiveness in building the capacity of doctors, medical associations and local networks of organisations working with victims of domestic violence.

The MIGG spent public funds well as the practice increased the efficiency of the public health sector and professionals in tackling these issues. The practice was based on a clear, appropriate and comprehensive definition of domestic violence, which helped health professionals to increase their capacity to provide comprehensive and tailored information and support to the victims. It is based on a multi-agency approach involving many different public and private organisations dealing with domestic violence.

The project was carried out by the Gesellschaft für Sozialwissenschaftliche Frauen- und Genderforschung e.V. (GSF e.V.), Signal e.V. (Berlin), Gesine-Netzwerk (Ennepe-Ruhr-Kreis) and the Institute of Legal Medicine, University of Düsseldorf (for Kiel and Munich) in cooperation with the local institutes of forensic medicine at the university hospitals. It was funded under the second action plan of the federal government to combat violence against women.

Multi-agency cooperation is important

The pilot project was evaluated by Gesellschaft für Sozialwissenschaftliche Frauen- und Genderforschung e.V. (GSF e.V.) which interviewed trainers and trainees during the project. Other methods of evaluation were questionnaires for trainers and trainees, participatory monitoring of the training sessions, interviews with board members and continuous counselling of the project managers. The evaluators included social scientists, medical doctors and self-employed practitioners. An additional result of the evaluation is an implementation guide, including practical examples and recommendations, for those who want to implement the model.

The project's success resulted from the partners' great experience and competence in the field. The Gesine network is the WAVE (Women against violence Europe) ⁽²⁵⁾ focal point on health in Germany, and since 2004 has been working on intervention models for improving the treatment of women victims of violence, and helping health professionals to better recognise violence and treat it adequately, including considering psychological aspects. It also benefited from a multi-agency approach with strong and committed networking involving anti-violence associations, medical organisations and associations of general practitioners.

It identified a systematic routine screening procedure to detect domestic violence victims in emergency rooms and other health departments, supported by comprehensive tailored information and support. Its federal government finance allowed the partners to dedicate to it the time and resources needed to obtain good results.

Nevertheless, it did find that doctors are a difficult target group to work with, because they have their own standards and procedures, so at the outset it was quite hard to convince them that domestic violence and the treatment of victims is important and that they had to improve the quality of their approach. In overcoming this obstacle, and introducing new standards and procedures, the commitment of medical associations was an important tool, but it was not enough: personal contact with all the doctors involved proved more effective.

At the moment, the model is still under way in Berlin and Ennepe-Ruhr-Kreis, financially supported by the governments of Berlin and Nordrhein-Westfalen. In Munich, Kiel and Düsseldorf the outpatient services at the university institutes of legal medicine are working with women victims of domestic violence, also financed by the respective Land governments. Extending the model country-wide will depend on gaining the support of the remaining *Länder*.

⁽²⁵⁾ <http://www.wave-network.org>

The MIGG pilot shows that multi-agency cooperation is essential in achieving an impact on the whole system. Support from medical associations is quite important, but it is also essential to build personal relationships with the doctors involved. Having good expert trainers on board is crucial in attracting health professionals to take part. Finally, in moving from a pilot project to a stable activity, extra financial support is needed in order to increase the number of practitioners that can be trained, and to support networking.

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Gesine: <http://www.gesine-intervention.de>

MIGG pilot project at Institute for Legal Medicine, Ludwig-Maximilian University, Munich: http://www.rechtsmedizin.med.uni-muenchen.de/wissenschaft/klinische_rechtsmed/migg/index.html

Articles on results of MIGG pilot project:

<http://www.gesine-intervention.de/images/DeutschesAerzteblatt2012.pdf>

<http://www.gesine-intervention.de/images/DeutschesAerzteblattGrass2012.pdf>



Standards and recommendations for working with male perpetrators in the context of inter-agency cooperative alliances against domestic violence, Germany 2007–14

Standards for work with perpetrators

Summary

It is recognised that working with the perpetrators of domestic violence pays big dividends: correctly done, it can lead to real changes in behaviour, and not only reduce the level of violence but also save public money in the long run.

Thirty-seven organisations working with violent men across Germany came together under the aegis of the Federal Association for Work with Perpetrators of Domestic Violence (BAG TäHG) to develop a standard for their work.

The standards were developed through a 3-year process of consultation sponsored by the federal ministry. They were based not on theory alone, but on the evaluation of previous projects and on the experience of people working with the issue day to day. The results of this work were discussed with organisations providing counselling, helplines and women's shelters.

The standards are propagated through a 21-day training course for professionals nationwide. However, a shortage of public funding may limit their take-up.

How to hold perpetrators to account

Standards und Empfehlungen
für die Arbeit
mit männlichen Tätern

The German public became increasingly aware of gender-specific violence in the 1970s, when the emergence of the women's movement made rape

and sexual violence an issue for public discussion. In response, from 1999 onwards, the government has formulated national action plans (NAPs) on gender-specific violence. The programmes at federal level are linked with initiatives at state (*Land*) level and with projects by non-governmental actors.

Alliances against domestic violence started to emerge in the 1980s and sexual abuse in families was systematically defined as a crime (Straftaten gegen sexuelle Selbstbestimmung). This was followed by the foundation of help facilities for victims of sexual abuse, and there was increasing pressure for perpetrators of domestic violence to be held accountable for their behaviour. For a long time, there was no consensus on what form this accountability should take. However, work with perpetrators has become increasingly common, especially since 2002, and a number of agencies can now look back over several years of experience in providing social training courses.

Professionalisation of work with perpetrators

The need has therefore arisen to professionalise this work, and one of the key tools in this professionalisation is the development of quality standards.

The first standards were adopted in May 2007 in Mainz by all the 37 organisations working with perpetrators in Germany and explain the way they approach their work and their methodology. Since then, a working group of the Federal Association for Work with Perpetrators of Domestic Violence (BAG TäHG) has continued to develop the standards, to adapt them to the way society is developing, new research and their accumulated experience.

The standard defined by BAG TàHG constitutes a new tool for working with perpetrators of domestic violence. It provides counselling services with different modules for working with perpetrators, supports their work with violent men and makes their activities more transparent and verifiable.

The design of the standards was based on a long process which brought together many years of experience and scientific knowledge. From 2005 until 2007 meetings of professionals from across Germany were held with the support of the Federal Ministry for Family Affairs, Senior Citizens, Women and Youth (BMFSFJ). These meetings involved 37 organisations working with offenders from all over Germany and developed common quality standards for their work. The draft standards were discussed with representatives of the national conference of intervention projects, the federation of counselling centres and helplines and the federation of women's shelters. This process could have been sped up if the specialised task groups had worked simultaneously on different issues addressed by the standards.

Behaviour can be changed

The definition of the standards was based on the scientific monitoring of intervention projects against domestic violence. Between 2000 and 2004, eight programmes for perpetrators of domestic violence were evaluated, and this showed that perpetrators' programmes, supported by judicial requirements, can achieve changes in behaviour. Perpetrators' programmes share a focused and structured approach to acts of violence by men towards their partners or ex-partners. The methods used vary, but on the whole they are based on cognitive behaviour therapy.

The majority of men who have completed a perpetrator programme accept responsibility for their violent behaviour and are able to cope with their partner's needs and to accept their autonomy. Furthermore, participants completing the course showed better general social skills, an understand-

ing of their own needs and the ability to deal with conflict. Several of the participants' partners who were interviewed during the course of the evaluation backed up this finding.

Through the development of standards, work with perpetrators has become much more professional all over Germany and this has led to the current situation where working with perpetrators is seen to make an important contribution to victim protection.

Work with perpetrators saves public money

Successful work with perpetrators has had a strong impact on protecting women and children from further violence. If a perpetrator really changes his behaviour and his attitudes concerning violence and gender roles, this has to be regarded as a great success for gender equality as well as for crime prevention. This work can even be said to have an economic value: the project evaluation estimated the costs of domestic violence for the general public, and concluded that a reduction in domestic violence is cost-saving. Thus, working with perpetrators according to the standards of BAG TàHG was evaluated as being quite effective, even if the samples were quite small and there has not yet been a large national study proving the effectiveness of this methodology.

The approach shows several aspects of good practice. It holds perpetrators accountable for the violence they use. Moreover, it is based on a multi-agency approach that was able to effectively coordinate all the 37 organisations working with perpetrators in Germany. And the approach was empirical: the standards were designed after a long monitoring and evaluation process of the interventions with perpetrators already in use in Germany, in order to base them on well-grounded experience and not only on theoretical assumptions.

Three essential factors have made the standards a success. Firstly, as a basic requirement it was agreed



that working with perpetrators in cooperative alliances is an important precondition for effective work. Secondly, it was particularly important that the standards were developed in cooperation with women's shelters, which brought in the victims' point of view. Thirdly, the standards were not prepared in an abstract way, but were grounded in the experience of associations working with both perpetrators and victims.

The main obstacle the initiative faced was the shortage of public funding, something that may limit the development of the initiative. At the moment the BAG TäHG is only supported by its membership fees, but there are plans to raise funds from foundations and public sources.

In-service training

The practice is sustainable because it is supported by the BAG TäHG, which has continued to work on these issues. The standards are not binding, but the association has become a national contact point for work with perpetrators that many *Länder* are now carrying out. It currently runs fee-paying in-service training courses on how to apply the standards in practice. The courses last for seven 3-day blocks and cover the basics of domestic violence and working with offenders, the practice of working with offenders in groups and individually, risk analysis, diagnostics, documentation and evaluation, working with partners, working with violent family systems, and self-reflection and clarification.

The key lessons learned from the process are that it is important to break the cycle of domestic violence by working with perpetrators in order to make them take responsibility for their actions and stop their violent behaviour. Work with perpetrators is a necessary complement to the protection of women and children.

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Summary of standard for work with perpetrators: http://www.bag-taeterarbeit.de/images/pdf/Standards_THG_Kurzfassung.pdf
Complete standard for work with perpetrators: http://www.bag-taeterarbeit.de/images/pdf/Standards_THG_Langfassung.pdf
Standard in English: http://www.bag-taeterarbeit.de/images/pdf/BAG-THG-Standards_english_V.pdf

Multi-agency risk assessment conferences (MARACs), United Kingdom 2003–14

Effective coordination between local agencies cuts repeat domestic violence by 60 %

Summary

Multi-agency risk assessment conferences (MARACs) are meetings which bring together public and private organisations concerned with domestic abuse to discuss high-risk cases and formulate coordinated action plans. There are some 260 MARACs across England and Wales, partially funded by the government as part of its call to end violence against women and girls strategy. They process around 56 500 cases each year at a cost to the public purse of some GBP 1.4 million (EUR 1.7 million).

The MARACs have been shown to reduce repeated abuse by 60 %, and are extremely cost effective, saving EUR 6 of public spending for every euro they cost. They show that sharing information among agencies and following a simple action-planning system can speed things up and lead to more effective protection. An effective multi-agency response to high-risk domestic abuse is particularly effective in reducing repeat victimisation and potentially lethal violence.

They take a partnership approach, and bring statutory and voluntary agencies together around the same table, to discuss the cases of individual high-risk victims and formulate an action plan for each of them.

A set of 10 good practice principles has been laid down. Key factors for their effectiveness are a strong chair, an efficient secretary and committed and consistent attendance by the organisations involved.

Focus on high-risk victims



In the United Kingdom, 100 women die each year as a result of domestic violence. Gender-based abuse has traditionally been framed as a criminal justice issue and focused predominantly on domestic abuse. Since the 1990s the Home Office has promoted policies to enhance the protection of domestic abuse victims through pro-arrest policies, better evidence gathering, perpetrator programmes and multi-agency work. At the beginning of 2000 the Crown Prosecution Service introduced national policies to improve prosecution, including the introduction of specialist domestic violence courts (SDVCs) to improve sentencing. Within this general framework, action has also been taken to address the problem of high-risk victims of domestic abuse, i.e. victims in danger of being killed by their partner or ex-partner. The first initiatives emerged from civil society organisations, and were later embraced by the Home Office. The multi-agency risk assessment conference (MARAC) model was first developed in Cardiff in 2003, in response to the lack of systematic risk assessment among agencies responding to domestic abuse, and the need for a forum for local agencies to share information about victims experiencing extremely serious levels of abuse. MARACs show a partnership approach to tackling high-risk domestic abuse.



Bringing agencies together

MARACs are meetings where statutory and voluntary agency representatives share information about high-risk victims of domestic abuse in order to produce a coordinated action plan to increase victim safety. They operate as one element of a wider infrastructure which includes SDVCs and independent domestic violence advisers (IDVAs). The agencies that attend MARACs will vary but are likely to include the police, probation service, IDVAs and children's, health and housing services as well as a range of other adult and child-focused services. Any agency may refer a case to a MARAC, based on its assessment of risk.

Referrals to a MARAC are made in cases (a) that reach a threshold level of risk, determined through the use of a standard risk assessment tool; (b) where there is serious concern about the victim's situation based on the professional judgement of the referrer; (c) where there is evidence of escalation of abuse (i.e. a specified number of police call-outs in a certain time period); or (d) where there are repeat incidents within 12 months of the first referral. A typical MARAC meeting will last half a day and discuss 15 to 20 cases using a very brief and focused information-sharing process. This is followed by a simple multi-agency action plan being put in place to support the victim and to make links with other public protection procedures, in particular safeguarding children and vulnerable adults and managing perpetrators. By working together, agencies are able to get a better picture of the risks victims face, including the frequency and severity of abuse. This enables them to develop an action plan to increase the safety of each victim and their children. It also gives victims the confidence that a number of different agencies are aware of the abuse and will offer support and protection.

Sharing information, independent advisers and action planning

The three core components of the MARAC model are enhanced information sharing, the IDVAs who represent and engage the victim in the process

and effective action planning. Apart from tackling high-risk domestic abuse cases, MARACs improve the understanding and identification of domestic abuse across agencies, improve information sharing and referral mechanisms between agencies, facilitate access to the services available to victims and improve consistency and accountability across agencies, through shared policies and procedures.

There are approximately 260 MARACs currently in operation across England and Wales which, in the 12 months to June 2012, discussed around 56 500 cases (including repeat cases). On average 45 % of cases result in a total cessation of abuse and an additional 20 % of cases result in a reduction in the number of repeat police incidents. Multi-agency approaches may contribute to improving outcomes for victims, potentially saving lives.

Since 2008, the Home Office has provided MARACs with funding for administrator/coordinator posts, training and quality assurance (which has now been superseded by self-assessment for MARACs). In the financial year 2011/12, it provided funding of GBP 1.4 million (EUR 1.7 million).

Ten principles

Ten principles have been identified for an effective MARAC ⁽²⁶⁾.

1. **Identification** — All agencies and services identify high-risk victims through completing a risk assessment and/or referral to a specialist agency within safe time frames once domestic abuse is disclosed.
2. **Referral to the MARAC** — All high-risk victims who meet MARAC referral criteria are referred to the MARAC by a range of agencies within safe time frames.

⁽²⁶⁾ http://www.caada.org.uk/marac/The%2010%20principles_Oct%202011%20v2_with%20sub%20principles.pdf

3. **Multi-agency engagement** — All relevant agencies are appropriately and consistently represented at the MARAC.
4. **Independent representation and support for victims** — All high-risk victims are consistently supported and represented by an IDVA or other independent representative who prioritises safety throughout the MARAC process.
5. **Research and information sharing** — MARAC representatives research cases and share relevant and proportionate information that identifies risk and informs safety planning. Procedures are followed to ensure that safety and confidentiality are maintained at all times.
6. **Action planning** — Action plans are developed which address the risks identified.
7. **Number of cases and capacity** — The MARAC has the number of referrals and capacity to ensure that all high-risk victims who meet the MARAC threshold can receive support from their local MARAC.
8. **Equality** — The MARAC is committed to delivering equality of outcome to all.
9. **Operational support** — Consistent coordination and administration support the effective functioning of the MARAC.
10. **Governance** — Effective governance oversees the performance, sustainability and accountability of the MARAC.

Strong leadership is needed

Successful MARACs rely on two key roles being carried out efficiently. The first is strong leadership by the chair. The chair's role is to ensure all agencies at-

tend with the right information and that meetings are used for action planning and not just 'talking shop'. Having a chair who can keep discussions focused and within a time schedule is important in encouraging busy people to attend consistently. The second is good coordination. The coordinator's role is to ensure that the agenda goes out before the meeting in sufficient time so that agencies can prepare for meetings, to follow up on actions agreed at the meeting and to ensure that bureaucracy is minimised (i.e. the right amount of information is shared) and that confidentiality is maintained.

They also depend on strong partnership links (including a commitment from agencies to tackle domestic violence in general) and the availability of training and induction procedures.

However MARACs do face some obstacles to improving their performance. There are no agreed protocols and systems for identifying and referring high-risk cases to a MARAC in a timely way, and there are difficulties in identifying the appropriate representation from statutory agencies, specialist domestic violence services and voluntary and community organisations. Overall, an inadequate number of cases is identified, considering the local populations covered.

A 60 % reduction in repeated abuse

Findings from evaluation studies show that MARACs significantly reduce the risk of repeat victimisation and increase the chance of victims reporting and making a complaint about abuse to the police. A study looked at rates of revictimisation for cases heard at the first Cardiff MARAC, and found that approximately 6 in 10 victims reported a complete cessation of abuse in the 6 months following a MARAC, and approximately 4 in 10 victims remained free from abuse after 12 months. In addition, the agencies involved in the MARAC perceived the process as helping to improve awareness and to strengthen



the links between key agencies (Robinson, 2004 ⁽²⁷⁾; Robinson and Tregidga, 2005 ⁽²⁸⁾).

The CAADA's analysis ⁽²⁹⁾ suggests that MARACs can achieve up to a 60 % reduction in abuse, reducing to 43 % if adjusted to account for serial perpetrators and cases where the abuse would have stopped regardless of the MARAC intervention (CAADA, 2010). They also save EUR 6 of public money for every euro they cost.

The CAADA has recently launched a self-assessment process which enables MARACs to monitor and manage their performance for continuous improvement. It is felt that there is scope to increase the number of non-police referrals and the number of agencies represented, in particular organisations representing minority communities such as black and minority ethnic (BME) and lesbian, gay, bisexual and transgender (LGBT) organisations.

The call to end violence against women and girls (VAWG) strategy, published in November 2010, announced that a review of MARACs would be undertaken in order to improve understanding of how MARACs are working and potential areas of development, including considering the case for making MARACs statutory.

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Information about MARACs: http://www.caada.org.uk/marac/Information_about_MARACs.html

Saving lives, saving money: MARACs and high-risk domestic abuse: http://www.caada.org.uk/policy/Saving_lives_saving_money_FINAL_VERSION.pdf
UK Home Office Research Report 55 — Supporting high-risk victims of domestic violence: a review of multi-agency risk assessment conferences (MARACs):

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/116537/horr55-report.pdf

Call to end violence against women and girls: <https://www.gov.uk/government/publications/call-to-end-violence-against-women-and-girls>

⁽²⁷⁾ Robinson, A., 'Domestic violence MARACs (multi-agency risk assessment conferences) for very high-risk victims in Cardiff, Wales: A process and outcome evaluation', Cardiff University, Cardiff, 2004 (<http://www.cardiff.ac.uk/socsi/resources/robinson-marac.pdf>).

⁽²⁸⁾ Robinson, A. and Tregidga, J., 'Domestic violence MARACs (multi-agency risk assessment conferences) for very high-risk victims in Cardiff, Wales: Views from the victims', Cardiff University, Cardiff, 2005 (<http://slb.cf.ac.uk/socsi/resources/robinson-tregidga.pdf>).

⁽²⁹⁾ http://www.caada.org.uk/policy/Saving_lives_saving_money_FINAL_VERSION.pdf

Respect — accreditation of perpetrators' programmes, United Kingdom 2003–14

A quality standard for work with violent men

Summary

Respect, the British membership organisation for people working with perpetrators of domestic violence, male victims and young people, has established a quality standard designed to give the public and commissioners in the public sector confidence in the quality of the services they are using or paying for.

The standard allows for two levels, 'safe minimum practice' (SMP) and full accreditation. Since the system was launched in 2008, nine organisations have achieved full accreditation and five have achieved SMP. They range from small voluntary bodies to nationwide charities and multi-agency partnerships.

The development of the standard involved a 2-year process of consultation with stakeholders and testing of the accreditation system. To achieve accreditation, organisations must supply information about their practices and systems, and be assessed through interviews and a site visit. An independent panel decides whether or not to award full accredited status.

The system is financially self-supporting through a GBP 7 000 (EUR 8 750) accreditation fee. However, faster take-up is hindered by the financial insecurity of many service providers, which leads to short-term thinking rather than investment in quality.

The competitive tendering environment



In the United Kingdom, violence against women has traditionally been seen as a criminal justice issue and the focus has been predominantly on domestic violence and to a lesser extent sexual violence. Since 1997 action has been taken to improve provision for victims of these crimes in criminal justice terms. New laws, new specialist domestic violence courts and specialist advisers have been introduced. In England and Wales there have been some important legislative and policy developments which improve the ways victims of violence are handled by the criminal justice system. There have also been policy developments addressing perpetrators' programmes, especially those connected with the criminal justice system. As far as service provision goes, competitive tendering processes are becoming increasingly commonplace, bringing a need for transparent ways of ensuring service quality.

Developing a standard

Respect, the British membership organisation for people working with perpetrators of domestic violence, male victims and young people, addressed the problem of standardising perpetrators' programmes, by setting minimum standards to guarantee their quality. The development of the standard and the pilot of the assessment process were supported through grants from the Lankelly Chase Foundation and the Home Office. Accreditation provides a recognised framework for delivering programmes in many different ways, allowing skilled practitioners and effective projects to gain recognition for their work, to support safe practice and to assist with fund-raising.

The standard was launched in 2008 after a 2-year period during which Respect members consulted external stakeholders and tested the assessment processes. Respect assessed 24 organisations providing a domestic violence prevention programme



(DVPP) and an integrated support service (ISS) for the partners and ex-partners of those attending the DVPP. The organisations assessed range from charities with an annual turnover of more than a million pounds (EUR 1.25 million) to small organisations operating on less than GBP 100 000 (EUR 125 000) a year. They include multi-agency partnerships, stand-alone charities, statutory agencies and large national charities where the domestic violence prevention service (DVPS) makes up only one element of their overall service provision. The background of the organisations and the staff they employ varies, including criminal justice, child protection, family counselling, psychotherapy, psychology and specialist domestic violence professionals.

The effectiveness of the process is proven by its take-up: there are now nine Respect-accredited organisations in the United Kingdom and a further six have reached the initial 'safe minimum practice' (SMP) level. Take-up would have been quicker had not Respect underestimated the amount of support that organisations would need to achieve the levels of quality required. Organisations with accreditation have been better at weathering the current financial crisis because they are good value for money, have strong management and because they are organisations that are thinking ahead.

The accreditation process has had an impact on new services that are now setting up using the standard as the template for the service, making their journey to accreditation smoother. Since the launch of the accreditation process Respect aimed to make it self-financing to guarantee sustainability. For the past 4 years Respect has managed to meet costs through accreditation fees and has also managed to hold fees at the same level since accreditation started, so efficiency has been guaranteed.

Accreditation has been developed so that the public, funders, commissioning agencies and other professionals can be assured of a high-quality, safety-focused service. The requirements have been developed from the lessons learnt from available re-

search and practice. Practitioners, policymakers and researchers have all been involved in developing and testing these requirements. The standard and assessment methods will be reviewed every 3 years to ensure that they are updated as knowledge and experience expand. The second edition of the standard, introduced in 2012, has drawn on lessons from the first 24 assessments and integrates the feedback from a consultation with Respect members and external stakeholders.

The process holds perpetrators accountable for the violence they use. It has a strong basis in human rights and gender analysis and it is based on an anti-discriminatory approach with the recognition of women/victims and men/perpetrator diversity. It provides a clear, appropriate and comprehensive definition of domestic violence, guidance and supervision.

Applying for accreditation

The Respect accreditation standard is appropriate for organisations providing DVPPs working with men who use intimate partner violence (IPV), and also providing integrated safety services (ISS) for partners and ex-partners of these perpetrators. It sets out all the requirements for the management and operation of these services, and the evidence that will be sought to demonstrate that an organisation meets these requirements. It also provides guidance on how the requirements can be met.

The accreditation process is supported by Respect's membership officer, development director, assessors, accreditation panel chair and members. An organisation's initial accreditation costs GBP 7 000 (EUR 8 750). To help its members reach the required standard, Respect offers its members training, information and support including a resource manual containing sample policies, procedures and other documents, the Redamos case and data management system and pre-accreditation support including an on-site service review. Members also receive regular updates, information and discounted training.

Members of Respect can apply for an initial SMP assessment or for full accreditation. If the information they submit is complete, Respect assigns two (or in the case of SMP assessments, one) assessors to conduct site visits, review recordings and policies and conduct interviews with staff.

The assessors submit their report to Respect and the applicant organisation. In the case of SMP assessments, Respect decides whether the organisation has reached the minimum standard. On the other hand, full accreditation requests are judged by an independent accreditation panel, which questions the assessors on their judgements before deciding whether to pass, fail or give the organisation a further 6 months to meet the required standard.

To ensure the quality of provision, adherence to the standard is verified through spot checks, and, if there is evidence which demonstrates a breach, the standard can be revoked.

Barriers to adoption

The strong points of establishing the standard are that there was intense prior consultation among key stakeholders and the assessment processes were tested before being introduced.

However, it has run up against some barriers to more rapid adoption. Implementing service standards requires a culture change: it is about developing services that have long-term sustainability. However, many candidate organisations rely on short-term funding and cannot invest in sustainability when their immediate future is uncertain. In addition, some organisations are led by experienced practitioners who have little interest in succession or in creating something that will outlive their working lives. Commissioners too sometimes fail to understand the broad range of tasks involved

in an effective intervention with domestic violence perpetrators. And it is a demanding standard: organisations seeking accreditation are required to be as effective at supporting victims of abuse as they are at working with perpetrators. They have to be able to work across a range of institutions, specifically those dealing with child protection, criminal justice and health, and need the skills and systems to identify and manage risk. This requires skilled staff and facilitators and investment in organisational learning.

The lessons learned from the introduction of the standard are that the practice of self-assessment that was common before the implementation of the accreditation system is inadequate to give the public and commissioners confidence in a service. Transparency and accountability are needed. Secondly, accreditation is about an organisation's ability to monitor, learn and improve its own practice, so it is important to focus on practice as well as on systems.

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Website: <http://www.Respect.uk.net>
SMP standard: <http://respect.uk.net/wp-content/themes/respect/assets/files/safe-minimum-practice-standard.pdf>
Accreditation standard: <http://respect.uk.net/wp-content/themes/respect/assets/files/accrediation-standard.pdf>

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