TEN YEARS OF AUSTRIAN ANTI-VIOLENCE LEGISLATION

International Conference in the Context of the Council of Europe Campaign to Combat Violence Against Women, Including Domestic Violence

5 to 7 November 2007
Vienna and St. Pölten, Austria
Owner and publisher
Federal Chancellery – Federal Minister for Women and Civil Service

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Printed by
Druckerei Hans Jenzsch & Co GmbH

Vienna, December 2008
10 Years of Austrian Anti-violence Legislation and the International Situation in the Context of the Council of Europe Campaign to Combat Violence Against Women, Including Domestic Violence

5 to 7 November 2007
Vienna and St. Pölten, Austria
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Federal Minister for Women and Civil Service

Maria FEKTER
Federal Minister of the Interior

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Dear readers,

in 1997 the Federal Act on Protection Against Domestic Violence entered into force in Austria. This Act is based on the principle that victims of violence may stay in their homes and perpetrators have to leave the flat and the environment of the persons they have endangered by using violence.

This Act protects people who have suffered domestic violence. However, not everybody is affected by violence to the same extent: in most cases, the victims are women and children, while the majority of offenders is male family members, in particular husbands and live-in partners. Children are always affected by domestic violence, either directly, when violence is directed against them, or indirectly, when they witness violence or its consequences. Austria’s Federal Act on Protection Against Domestic Violence has served as a model for many countries in and outside Europe. It was prepared from 1994 to 1996 by interministerial working groups in which practitioners in this field such as judges, police officers and lawyers as well as workers in women’s shelters took part. The variety of know-how contributed by these experts from different fields laid the foundation for a law that is oriented towards the situation and protection of people affected by violence.

The Act focuses on the State’s obligation to protect women and children also in their own homes. The protection of people experiencing violence is effected by means of eviction orders issued by the police, under which the perpetrator has to stay away for 10 days, and by means of injunctions under civil law that extend over three months or until divorce or partition proceedings have been completed.

Still, it has been evident from the beginning that legal measures alone are not enough but that at the same time, victims have to have access to immediate comprehensive support services. Therefore, intervention centres against domestic violence were established in all provinces so that those affected by violence are actively assisted after eviction orders have been issued by the police.

Apart from this Federal Act, a number of other measures were also taken in Austria. What deserves special mention here is the Anti-stalking Act, which entered into force in July 2006, and the right to court assistance services: as of January 2006, all victims of domestic violence have been granted the right to cost-free psychosocial and legal court assistance during criminal proceedings, and in addition, the victims’ rights to information, considerate treatment and participation in proceedings have been expanded. Eventually, the Second Protection Against Violence Bill is a further step towards great improvements.
Still, our objective must be to prevent violence against women and children to the greatest possible extent. Therefore it is my task and my concern to continue to take active steps and do everything in my power to combat domestic violence and provide effective assistance to those affected by it. We do not have to start from scratch but can, and will, take over other countries’ knowhow in fields where there might be need for us to catch up. Occasions such as this international conference of experts are excellent opportunities to do this, and I would like to thank all international and national experts for their invaluable contributions.

Gabriele Heinisch-Hosek
Federal Minister for Women and Civil Service
Dear readers,

for many years, violence in the family and in other close social relationships has been at the centre of attention and also the subject of criminal policies and strategies. My major concern in this context is optimal protection and support for the victims.

In Austria we can look back on 10 successful years in which the anti-violence legislation was developed, implemented and well-established. The Act on the Protection Against Domestic Violence, which entered into force on 1 May 1997, was a significant step in this context. The main aspect of this Act has been to provide effective instruments to deal with and prevent domestic violence, such as the possibility to issue eviction orders and the corresponding barring orders. Another key element and essential focus has been the protection of victims. In the course of the reform process, a cooperation developed between the police and competent victims’ protection services, which will actively contact at-risk persons and offer support and counselling. In the meantime, the intervention centres and violence protection centres have become important and indispensable partners of the police. Victims’ protection should be our joint concern, and especially in this area continuous improvement is necessary. For me, the protection of victims has a clear priority over the protection of offenders.

In addition to statutory regulations it has been necessary to remove the taboo from the issue of domestic violence. Too many people think that what happens in the home is nobody else’s business. I clearly oppose that view. A lot has been achieved in this field, and the estimated number of unreported cases is going down. The cooperation at various levels and of different institutions and organisations is required for this purpose.

Regrettably, in many cases domestic violence not only occurs just once. In many families, violence has become a part of everyday life, which should not be underestimated. Therefore, one single contact or police intervention alone will hardly solve the problem in a sustainable way. So it is important to promote and continually improve the already effective networking among all the authorities and services that are active in this context.

In my capacity as Minister of the Interior I would like to thank everyone who is active in this field for the great interest and particularly the commitment and dedication they have shown over the last 10 years. Domestic violence should continue to be discussed so it will not be hidden away in the dark. Victims should know there are services they can turn to that will provide the best support they can get. Violence must not be tolerated.
In the course of this three-day international conference many relevant issues regarding prevention of violence and its further development at national and international level were reported and discussed. The aim of this documentation is to give the interested reader an overview of the themes pursued at this conference, in order to stimulate a lively exchange of opinion among all stakeholders in the field of domestic violence.

Each and every one of us can continue to discuss measures against domestic violence in public and thus contribute our share to making people aware of this issue and to reducing fears in this context.

On that note I wish all readers an interesting time with the present collection of contributions.

Federal Minister of the Interior
INTRODUCTION
NATIONAL AND INTERNATIONAL MEASURES TO PREVENT DOMESTIC VIOLENCE AGAINST WOMEN AND CHILDREN

This publication is based on the Conference Stop Domestic Violence Against Women: 10 Years of Austrian Anti-violence Legislation in the International Context, which took place in Vienna and St. Pölten, Austria, from 5 to 7 November 2007. It deals with numerous aspects of prevention of domestic violence against women and presents successful developments and promising good practice models as well as critical analyses and suggestions for improvements. The themes covered in the individual contributions include international measures to prevent violence against women and children, experience with the Austrian anti-violence legislation, building support services for women and children, the situation of immigrants, the role of the health care system and of the police, new statutory measures and their implementation, models of multi-agency cooperation, as well as awareness raising and public relations work and the coordination by the State of policies to combat domestic violence against women and children. In sum, the contributions give a picture that is both comprehensive and detailed of the present state of research and practices in Europe aimed at preventing violence, and thus provide essential reference material for future developments.

The problem of domestic violence against women and children

According to studies on the extent of male violence against women, one out of four to five women have experienced physical violence at least once during adult life, and one out of ten women have suffered sexual violence. Between 12% and 15% of all women over 16 has experience of domestic violence or violence in a relationship, committed by husbands or partners.¹ The problem of domestic violence is definitely related to gender: women and girls are disproportionately often affected by violence committed by male members of the family. According to the definition by the United Nations, violence against women is gender-based violence as it ‘is directed against a woman because she is a woman or violence that affects women disproportionately’.² Regarding the causes of violence against women, the United Nations state that it is ‘a manifestation of the historically unequal power relations between men and women, which have led to domination over and discrimination against women by men and to the prevention of women’s full advancement’.³

Children always suffer when violence is directed against their mothers: either directly, if they are abused as well, or indirectly, by witnessing violence and seeing the effects that it has on their moth-

¹ IFF/ infas
² United Nations 1992
³ United Nations 1996, p. 75
ers. Violence brings about human suffering, and also enormous costs, as several studies have shown.

**The right to a safe place: The history of the women’s shelters movement**

In Western Europe, the issue of violence against women was made public by the new women’s movement in the 1970s. The first response to this problem was to find safe places for women and their children so that they could escape from the violence of their husbands. The first women’s shelter was opened in London in 1972, and others followed soon. In 1976 Berlin established its first women’s shelter, and Vienna in 1978. In the Warsaw Pact states, the problem of violence against women officially did not exist, and only after the collapse of communism women’s organisations emerged in the individual states. The first East European shelter was opened in Zagreb in 1992. Afterwards, numerous independent women’s initiatives against violence were founded in Central and South-Eastern Europe. However, in many of these former communist countries, no adequate public funding has been made available to women’s agencies: they depend on foreign foundations and project funds.

Establishing women’s shelters has never been an easy task, because it was often denied that the problem of violence against women actually existed. Feminists again and again faced the allegation that they made up or exaggerated this problem. Still, reality spoke for itself: each women’s shelter that was opened was overcrowded within short time, which definitely pointed to the need for additional shelters.

Thanks to the initiative of many committed women it has been possible in Europe to build a network of women’s agencies in order to provide adequate support to women who have suffered violence. At present, Europe has approximately 1,500 women’s shelters, but still, this support network has often shown to be insufficient. In many regions, no shelters exist. Even in the United Kingdom, with a high density of women’s services compared to other countries, there are great gaps in regional supply structures, and much remains to be done.

In the 1990s violence against women, not least because of the activities of the women’s movement, became an issue also for the international community. One effect of the Women’s Rights Are Human Rights campaign launched by international women’s organisations was that the issue of violence against women was top of the agenda at the United Nations Conference on Human Rights that took place in Vienna in 1993. At the conference it was stated that violence against women is a violation of human rights and that it is the States’ responsibility to protect those affected and to act when women suffer violence in private relationships. ‘Under general international law and specific human rights covenants, States may also be responsible for private acts if they fail to act with due diligence to prevent violations of rights or to investigate and punish acts of violence, and for providing compensation.”

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4 Erikson et al.; Kavemann/ Kreyssig  
5 Walby  
6 Elman  
7 Schröttle  
8 Tölle  
9 Logar 2008  
10 Council of Europe 2007  
11 Coy at al.  
12 Bunch/ Reilly  
13 United Nations 1993  
14 United Nations 1992, Art. 9
The right to a safe home: Austria’s first Protection Against Violence Act

The next stage, i.e., after support services for women had been established, was characterised by discussions with state institutions and efforts to achieve adequate legal measures to protect women and children against violence.\textsuperscript{15}

In Austria, similar to other countries, women’s agencies were not satisfied at all with the way in which the police used to respond to women’s experience of violence. Before the police intervened, a woman had to enter the police station with her head under her arm, so to speak. In most cases, violence against women was regarded as a private matter, and women who turned to the police were sent back home immediately. After insistent criticism of such non-response by the police, in the late 1980s the police asked representatives of the local women’s shelters to carry out training programmes for police officers. The women accepted the challenge and entered this men’s stronghold (at that time, no women worked in the regular police force of Austria).\textsuperscript{16} The women’s organisations showed stamina also here: today the theme of responding to violence against women and children has become an integral part of police training in Austria.

In the early 1990s the women’s shelters increasingly often voiced criticism of the situation that women and children had to flee to a shelter in order to escape from violence, while violent men could simply stay in the family home. This was regarded as unjust and gave rise to an international research of models that protected those suffering violence while making it possible for them to stay in their own homes. Eventually the experts of Austria’s women’s shelters movement identified the DAIP project as one of the first good practice models of coordinated multi-institutional cooperation.\textsuperscript{17} The 1993 United Nations Human Rights Conference of Vienna mentioned above also gave important impulses for the advancement of anti-violence activities. Initiated by then Women’s Minister Johanna Dohnal and in close cooperation with Caspar Einem, then Minister of the Interior, an interministerial working group was convoked, composed of staff of women’s shelters, police officers, judges and lawyers. The result of this collaboration was the Federal Act on Protection Against Domestic Violence, which entered into force in May 1997.

The Act consists of three elements that are linked to each other:
- eviction order by the police: the perpetrator has to leave the flat for 10 days;
- interim injunction under civil law, which provides protection for a longer period;
- support of victims by domestic abuse intervention centres.

The latter measure is most essential, because victims need active assistance to enforce their rights vis-à-vis the perpetrator. The Minister of the Interior actively supported the establishment of intervention centres, by stating that it was an essential task of the police to protect victims but that in cases of domestic violence the police alone was unable to perform this task and assistance by victims’ protection agencies was needed. Consequently, the Ministry of the Interior took over half of the cost of establishing and running intervention centres. The other half was covered by the Federal Minister of Women. Eventually, it was possible to open intervention centres in all nine provinces of Austria, which pursue a proactive approach: the police communicates to the intervention centre in charge the reports on interventions in cases of domestic violence, and the centre actively contacts the victim and offers assistance.\textsuperscript{18}

\textsuperscript{15} Humphreys/ Carter et al.
\textsuperscript{16} Egger at al.
\textsuperscript{17} Ibidem
\textsuperscript{18} Logar 2005
The Federal Act on Protection Against Violence does not exist on paper only. It has already been amended twice, and since its entry into force the number of eviction orders issued by the police has steadily risen: from 2,673 in 1998 to 6,347 in 2007. This most probably is not the result of an increase in violence but indicates a change in attitude among the authorities concerned, in particular the police: violence against women and children is no longer regarded as a private matter, but the State intervenes and those affected have access to concrete protection measures. According to police statistics, more than 90% of victims of domestic violence is women, and more than 90% of perpetrators is male family members, especially husbands and live-in partners.

So far, two studies evaluating the Protection Against Violence Act have been drawn up. Both conclude that the intervention centres are of great significance for the empowerment of women suffering violence. However, the continued rise in eviction orders resulted in capacity problems in the agencies providing assistance to victims of violence. In 2006 it was not possible in seven (out of 23) districts of Vienna to deliver services to all victims. After intensive efforts by then Women’s Minister Doris Bures and then Interior Minister Günther Platter, 2007 saw an increase by 60% of the budgets of the intervention centres. Since then it has again been possible to support all victims of domestic violence after eviction orders have been issued. The Women’s Minister also achieved a budget increase by more than 30% for women’s agencies active in the field of violence. This has been another important step to support women suffering domestic violence, because not all of them can, or wish to, turn to the police or court authorities. Therefore we need both options: the right to stay in one’s own flat and the right to safe accommodation in a women’s shelter. The number of women and children fleeing to shelters has not gone down after the Protection Against Violence Act entered into force. Women’s shelters, women’s counselling centres, phone hotlines and counselling services for immigrants continue to be of vital importance in the prevention of violence against women and children.

It was not possible in 1997 to take on board also the criminal justice system, which for a long time constituted the missing link in Austria in the chain of measures of protection against violence (see article 10 Years of Experience with Austrian Anti-violence Legislation: Present Situation and Perspectives). This gap has had massive effects because eviction orders by the police and interim injunctions under civil law are inadequate instruments to prevent dangerous perpetrators from committing further violence. Rather, this requires measures under criminal law, especially the arrest of offenders.

Austria would have the statutory prerequisites for this measure, but there are problems regarding practical application. Because of a lack of problem awareness and knowhow on the part of prosecuting authorities, even repeated threats and acts of violence were not taken seriously but dismissed as “typical of certain social environments”. In two cases, the consequence of this attitude was that husbands were able to carry out their threats and kill their wives (see contribution by Tamar Çitak). In 2004 the Association for Women’s Access to Justice and the Domestic Abuse Intervention Centre Vienna, on behalf of the surviving children of the two women, submitted a complaint to the UN Committee on the Elimination of Discrimination against Women (CEDAW), stating that Austria had not met its obligation to protect the two women with due diligence. In 2007 the two Communications by the CEDAW Committee were published, in which the Committee agreed with the complaining parties.

While it was recognised that Austria had introduced statutory measures to address violence against

19 Dearing/ Haller; Haller et al.
20 CEDAW is the abbreviation of Convention on the Elimination of All Forms of Discrimination Against Women. Austria ratified this UN Convention in 1982. The CEDAW Committee is a body composed of 23 experts watching over progress made regarding implementation of the Convention.
21 CEDAW 2007a and 2007b; the two CEDAW Communications 5/2005 and 6/2006 are available for download on the website of the UN Division for the Advancement of Women, in the six official UN languages (Arabic, Chinese, English, French, Russian and Spanish): www.un.org/womenwatch/daw/cedaw/protocol/dec-views.htm
women, it was also pointed out that it was not enough to have good laws but that also their practical realisation has to be ensured by the State party. The Committee also stated ‘that the perpetrator’s rights cannot supersede women’s human rights to life and to physical and mental integrity’.22

**New statutory regulations in Austria**

However, in recent years Austria has seen significant improvements regarding victims’ protection also in the field of criminal law. What deserves special mention here is the Anti-stalking Act that entered into force in 2006, and the amended Code of Criminal Procedure, under which victims, since 2006, have been granted the right to psychosocial and legal court assistance (see article on court assistance by Birgitt Haller).

The discussions regarding the two CEDAW complaints have also shown positive effects: under the 2006 amendment to the Criminal Code, the consent of victims is no longer required in order to initiate criminal prosecution in cases of dangerous threats in family contexts. This has been an important step towards the State’s taking over responsibility and reducing the stress for victims. Another positive development is that in 2008 specialised structures in public prosecutor’s offices were introduced, thus a model that has already proven its worth in other countries now also exists in Austria (see article by Heidi Winterer).

Eventually, in September 2008 a Government Bill on the reform and expansion of statutory measures of protection against violence was adopted by the Council of Ministers and submitted to Parliament for debate. This Bill includes essential improvements such as:

- a new type of criminal offence with imposition of more severe punishment in cases of repeated violence against a victim;
- the right to apply for protection measures under civil law is granted to any person affected by violence, independent of their family relationship to the abuser;
- extension of interim injunctions to six months and one year, respectively;
- victims are granted the right to court assistance also in civil law proceedings.

These plans show that attempts are made in Austria to repair the existing shortcomings in the field of protection against violence. It is to be hoped that the Bill will soon be adopted by Parliament.

**International standards for comprehensive, coordinated responses to violence against women and their children**

The individual states are obligated by international agreements to act with due diligence to prevent, and protect women from, violence. This obligation means that each woman has the right to protection and support. Under the 1989 UN Convention on the Rights of the Child, every child is granted the right to protection from all forms of physical or mental violence as well as neglect and all forms of abuse and exploitation. According to this definition, witnessing violence against their mothers also is violence against the children.

More than 30 years of experience have shown that isolated measures are not enough to prevent violence against women and their children. At institutional level, all agencies and authorities involved in this problem have to act in a determined and coordinated way. It is necessary to create chains of intervention by multi-agency cooperation bodies. The cases mentioned above demonstrate how dangerous gaps in the intervention chain are.

22 CEDAW 2007b, Para 12.1.5
At statutory level, comprehensive and well-coordinated measures have to be taken to prevent violence against women and their children so that victims, in addition to protection measures under criminal law and civil law, are also granted social and economic rights, such as:

- the right to safe accommodation in a women’s shelter;
- the right to comprehensive psychosocial assistance by specialised women’s services working to prevent violence against women;
- the right to a flat of their own;
- the right of residence independent of the husband;
- the right of children not to be obliged to have contact to violent fathers; and other necessary measures.

Legal protection measures should be granted at several levels, in the form of:

- eviction orders by the police in cases of acute danger;
- protection measures under civil law for which victims may apply;
- measures under criminal law against perpetrators, initiated and imposed by the State.

In all measures, empowerment and support of victims should play a focal role, as is the case regarding support services for victims by the intervention centres.

Good laws alone are not enough: they have to be implemented and applied by State actors in each individual case. At the political level, comprehensive long-term measures in the form of plans of action to combat violence against women and their children are required in order to eliminate all forms of violence against women. However, for plans of action to be more than printed paper, consequent implementation and adequate budgets are needed. Sweden’s new plan of action to combat violence against women, with a budget of 80 million euros, is a good practice model in this context. States have to ensure that all political and legal measures regarding violence against women are coordinated nationwide and focused on the needs of the victims and that relevant state institutions as well as non-governmental organisations (NGOs) be associated with the elaboration and the implementation of the necessary measures.

The Council of Europe Campaign to Combat Violence against Women, which was run from November 2006 to June 2008, has shown, among other results, that significant progress has been made in the 47 Member States of the Council of Europe in the field of prevention of violence against women but that there continue to be great gaps in many areas which urgently need be closed. Therefore the Council of Europe Task Force to Combat Violence against Women, including Domestic Violence stresses the importance of introducing a convention to combat violence against women that is orientated towards a gender-based and human rights approach.

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10 YEARS OF EXPERIENCE WITH AUSTRIAN LAWS ON VIOLENCE PREVENTION
On the first day of the Conference on 10 Years of Austrian Anti-violence Legislation in the International Context, six experts described and discussed their experience with Austria’s anti-violence laws, and attempted to present the strengths and weaknesses of this legislation from their points of view.

The six experts on the panel were:

- Birgitt Haller, Institute of Conflict Research
- Sylvia Löw, Counselling Centre of Vienna’s Women’s Shelters
- Karl Mahrer, Provincial Police Commander, Vienna
- Petra Smutny, Judge at the Superior Provincial Court of Vienna
- Anna Sporrer, President of the Association for Women’s Access to Justice
- Rosa Logar, Executive Director of the Domestic Abuse Intervention Centre Vienna.

The panel discussion was moderated by Christine Stromberger, who formerly worked for Women’s Ministers Johanna Dohnal and Helga Konrad and played a leading role in the preparation of the first Federal Act on Protection Against Domestic Violence (Protection Against Violence Act). Below, the experts’ statements and contributions to the discussion are summarised.

The origin and effects of the Protection Against Violence Act

Sylvia Löw pointed to the fact that the Protection Against Violence Act, which entered into force in 1997, eventually was a product of the continuous cooperation of Austria’s women’s shelters movement with

- the police and individual court representatives on the one hand; and
- Johanna Dohnal, then Minister of women, who had defined violence against women as one of the focuses of her work, on the other.

Women’s organisations, and especially the Association of Women’s Shelters in Vienna, were involved in the preparation of the Act from the very start. Karl Mahrer, Vienna’s Provincial Police Commander, who had contributed to the Act himself, said that he was convinced that ‘without cooperating and meeting at round, and square, tables, we could not have achieved this’.

1 Summarised by Rosa Logar, Michaela Krenn and Klara Weiss
The experts agreed that the Act, with all its additions and modifications, is a milestone in the history of preventing domestic violence against women and children. Birgitt Haller, a political scientist who drew up two studies evaluating the Protection Against Violence Act, also emphasised that Austria has been one of the first countries in Europe to adopt an Act on Protection Against Domestic Violence, and has thus served as a model for other states.

By means of police orders to evict the endangering person, as the wording of the Act is, the spiral of violence is disrupted, and at the same time, women suffering violence are supported by the intervention centres in order to find ways out of the violence they are experiencing. The Act is based on the principle that the person who has committed violence has to leave the family home so that the victim of violence is not forced to flee from the violence.

Mahrer expressed his conviction that the Act has contributed to a change in public opinion, and as a result, domestic violence is no longer regarded as a private matter. Interventions by the police and issuing of eviction orders are clear signals to the perpetrator, showing him that he has committed a crime and that this is not a petty offence. One of the reasons for this change in ‘culture’ is that the Act has met with positive response on the part of the police and that many police officers understand themselves as multipliers communicating the principle that violence is not a private matter.

Petra Smutny, Judge at the Superior Provincial Court of Vienna, stated that in 1996, when she was a young family judge, she had been sceptical about the chances that the Act would be applied in the intended way: here, a quick communication of data played a key role, but the actual situation was that at best, it took several days for a fax to arrive at an office three floors away. However, it fascinated her from the very beginning to see how carefully the corresponding proven, if modified, legal instruments were linked – temporary injunctions had existed also before – in order to optimise protection and safety and to facilitate decision-making by the actors involved: the police, the courts and the newly established intervention centres, as qualified NGOs. Each of these institutions was interested in implementing the new legal provisions in an effective way. According to Ms Smutny, this commitment could be felt to an extent she had never experienced before nor afterwards; and the goal was defined very clearly: those who hit have to go.

For Sylvia Löw an important effect of the Act has been that both people suffering violence and those providing assistance now have more options available to them. The new intervention measures make it possible for the police to take preventive steps, i.e., before physical violence is committed. Another positive point mentioned by Löw is that under the Act, the police is obliged to act in cases of acute danger to life, health and freedom and that it is not up to the victims to make the corresponding decisions. Moreover, the transition to self-determined actions by the women concerned is also part of the steps to be taken, which is an important principle in the process of empowerment: it is the women who have to apply for an extension of barring orders or further protection measures.

Several experts underlined the fact that the Act has set the course for the cooperation of the institutions in charge of domestic violence, in particular cooperation between the police, intervention centres, youth welfare departments and family courts. Another positive point mentioned was that in

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2 According to statistics on the application of the Protection Against Violence Act of 2007, more than 92% of victims of domestic violence is women and girls: thus, domestic violence is not ‘gender-neutral’ but a problem that is related to gender. Therefore the language used in this context often specifically refers to this group of victims, which is by far the largest, and male victims are included implicitly. Regarding persons committing violence, the gender relation is exactly the opposite: more than 92% is men, therefore male pronouns are used, and women offenders are not mentioned expressly.

3 In recent years, the intervention centres have been renamed in a number of provinces and are now called violence prevention centres. The fields of activity of violence prevention centres and intervention centres are identical; if the term ‘intervention centre’ is used in this publication, this always also includes the violence prevention centres.
2007, the Federal Ministers of Women and of the Interior increased by 60% the budget for the intervention centres in order to ensure that all victims received assistance after police interventions.

Haller pointed to the annual increase in the number of eviction and barring orders that has been registered since the Act entered into force. During the first eight months, from May to December 1997, the police issued approximately 1,400 barring orders; the number rose to as many as 2,700 in 1998, and 2006 saw a total of 7,200 barring orders in Austria. As the Protection Against Violence Act has been applied increasingly often, the number of dispute settlements has gone down, because violence has been recognised as a fact and is not played down any longer. However, a pronounced urban/rural divide shows. In the country there is still much reluctance regarding interventions to stop domestic violence. Around 4,100 out of a total of approximately 7,200 barring orders issued in Austria in 2006 were registered in urban areas. Urban police authorities, with jurisdiction over one third of inhabitants of Austria, issued two thirds of measures under the Protection Against Violence Act. In the case of dispute settlements, the situation is reversed. While the share of dispute settlements in the total of police interventions was 39% in urban areas in 2006, it was 55% in the country. As there is no reason to assume that the forms of domestic violence are different in urban and rural areas, these figures show that the Protection Against Violence Act is applied in different ways. The causes Haller gave for this fact include patriarchal structures that still are more firmly consolidated in rural areas, as well as a stronger tendency not to interfere in family matters, paralleled by a lack of understanding of the nature of violent relationships.

Problems in the application of the Act

Although all experts were unanimous in their praise of the Act, they nevertheless also identified several weak points, for instance the aforementioned regional discrepancies regarding its implementation.

Sylvia Löw reported that while interim injunctions are issued very quickly after eviction orders by the police have taken place, this does not apply to cases when a woman experiencing violence applies for interim injunctions to be issued by the court, without prior police interventions. This is a disadvantage for women who do not, or cannot, call the police, but still need protection. She described a case in which the district court even refused the application for an interim injunction because the woman had not been to the police before. Löw also expressed great concern regarding tendencies in a number of family courts to aim at out-of-court settlements between the victim and the perpetrator instead of issuing interim injunctions to achieve protection from violence. Such settlements are solely based on the promise of the perpetrator to leave the flat and not to enter it in future. In the case of a violation of these terms, the police cannot intervene – obviously, this is by no means a protection measure for the victim.

Anna Sporrer, President of the Association for Women's Access to Justice, mentioned cases in which eviction orders were issued against women who had defended themselves against the violence and as a consequence slightly injured the offender. Such developments in the wrong direction have to be corrected.

According to Sporrer, in the field of civil law great deficits show with regard to recognising psychological violence as a basis for issuing interim injunctions. While the family courts have meanwhile regarded physical violence as intolerable in most cases, there is still a lack of awareness of the harmful

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4 According to the Security Police Act, dispute settlements are measures that may be applied if there is no danger to life, health or freedom and if no punishable acts have yet been committed.

5 Interim injunctions according to Section 362b of the Act on Enforcement Procedures
effects that psychological violence has on the physical and mental health of the victims. In addition, it is much more difficult for those affected to prove psychological violence.

Loew added that Austria's Protection Against Violence Act does not permit effective measures in cases of financial violence by the perpetrator and coercion via the children, and she pointed to the positive international example of West Virginia (USA), where family protection orders may be issued under which the perpetrator has to leave the family home temporarily, the victim has exclusive child custody for the time being, and also maintenance regulations are decided immediately. If Austria's Act were amended in a similar way, this would enhance the comprehensive protection of women suffering violence and their children.

Loew expressed regret at the fact that violations of interim injunctions do not have any, or only little, consequences. Different to American or also German regulations, in Austria no consequences under criminal law can be taken.

Further professionalisation and specialisation within the police

Looking back on many years of police work, Karl Mahrer is aware of the fact that eviction and barring orders are no cure-alls and even if these statutory measures are taken, victims cannot always be adequately protected. In spite of barring orders, serious physical injuries and also homicides have repeatedly been committed. According to Mahrer, it would be necessary to institutionalise the communication between the actors involved, in the form of case conferences for victims in high-risk situations. Another way to increase the protection for victims would be to make their flats more secure. Weak doors and old-fashioned locks are great dangers for people who are directly affected by violence. Exchanging locks or securing doors may be live-saving measures in some cases. In Mahrer's opinion, a cooperation between the intervention centres, the Weisser Ring6 victim support organisation, the City of Vienna and other building contractors, under the slogan of 'living in safety', would be desirable and is of urgent necessity.

Mahrer voiced the view that a professionalisation of risk assessment, based on Britain's model of Multi Agency Risk Assessment Conferences (MARACs)7, is of key importance in order to be able to arrive at correct prognoses of the danger for victims in high-risk situations. As he put it, in Austria 'we still rely too much on gut feelings' when assessing risk situations, instead of basing decisions on defined, objective parameters. Sylvia Löw, agreeing to his position, demanded that special laws and action plans be drawn up to protect women and children in high-risk situations.

Mahrer also argued in favour of a further specialisation within the police regarding the field of domestic violence. In his opinion, the best case would be that, similar to the traffic accident unit, a mobile police intervention team should be established, consisting of a woman and a man plus a lap top computer, who go to the victim and interview her in a protected area, and who handle interventions in a highly professional way. At present, this goal is hard to meet, not least because currently the share of women in the police force is still only 14%.

However, according to Mahrer the Provincial Police of Vienna has started a specialisation initiative in the context of a model project. In two districts of Vienna, victim protection groups were established, with officers specialising in this field and trained for this purpose. This model will be expanded so that in future the entire area of Vienna will be covered.8

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6 An association providing quick, non-bureaucratic help for victims of crimes in need of assistance: www.weisser-ring.at.
7 Contribution by Amanda Robinson and www.caada.org.uk.
8 Postscript: as of 1 December 2008 victim protection groups have been established in all police offices of Vienna.
Criminal justice: The missing link

Rosa Logar, Executive Director of the Domestic Abuse Intervention Centre Vienna, also underlined the urgent need to prevent serious acts of violence such as murder and severe physical injury. She pointed to the fact that merely obligating a dangerous offender to stay away from the place where the survivor lives was not enough to protect the victim but that in such cases, it was necessary to arrest the perpetrator in order to prevent further violence. She criticised that criminal justice did not always adequately react to such cases and resorted to eviction orders as the ‘more lenient measure’ even when there were reasons for arrest, and added that such forms of response had not been the intention of the Protection Against Violence Act and were dangerous for the victims.

Logar described the cases of two women who had been killed by their husbands after repeated abuse and threats, which had been known to the authorities. In both cases the perpetrators had not been arrested, and unfortunately this is no rare occurrence. Anna Sporrer informed the audience that in these two cases the Domestic Abuse Intervention Centre Vienna and the Association for Women’s Access to Justice, on behalf of the surviving children, submitted a complaint to the UN Committee on the Elimination of Discrimination against Women (CEDAW). In 2007 the Committee decided that Austria had violated the right to effective protection from violence of these two women. In its Communication the CEDAW Committee definitely stated that the right to protection of the women superseded the rights of the perpetrators.9 The victims’ rights to life, physical and mental integrity have to take priority over the right to freedom of the perpetrators, and the dangerous tendency not to take threats seriously has to be counteracted. The CEDAW Communications clearly express the obligation of all state actors to exercise due diligence in each case and to take effective steps to prevent violence against women.

Petra Smutny regretted that the good cooperation in order to implement the Protection Against Violence Act, i.e., the collaboration of the individual institutions (police, intervention centres, youth welfare departments, courts, etc.) had not been continued in other fields. In her opinion, the courts should see it as an inherent element of their professional orientation to ensure the protection and safety of victims. However, such approaches still tend to be regarded as bias in favour of the victim. Even if the victim says that she wants to separate from the offender, if there allegedly, or actually, is reason for jealousy or if the personal or family honour has been violated, this can never be a reason to disregard the victim’s right to protection. Still, this is no matter of course because often both criminal and family court authorities consider threats of violence to be ‘expressions of irritation typical of certain social environments’ or reactions to ‘provocations’.

Birgitt Haller expressed the view that the greatest shortcomings with regard to protection against violence were found in criminal justice and that the corresponding authorities have not yet made the step that the police authorities, on principle, have already taken: understanding violence, also if committed in the private sphere, as a definite criminal act and prosecuting it as such. She added that numerous reports relating to domestic violence were waived, which was a great problem, solutions for which were urgently needed because those courses of action obviously contradicted the message that violence was an intolerable and punishable offence.

Sylvia Löw pointed out that in the DAIP programme of Duluth, Minnesota (USA), which served as a model for Austria, close links between criminal justice and protection structures exist. For instance, the public prosecutors cannot waive reports relating to domestic violence; anti-violence training is obligatory when the criminal prosecution of first offenders is suspended, and is also imposed as an additional condition after convictions.

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9 CEDAW Communications 5/2005 and 6/2005; www.un.org/womenwatch/daw/cedaw/protocol/dec-views.htm (in English) and www.frauen.bka.gv.at/site/5548/default.aspx (English link) and www.frauenrechtsschutz.at (in German)
Rosa Logar stated that criminal justice was the missing link in the chain of interventions. In her opinion it would be important to use to a greater extent the potential of criminal law for the protection of victims and the prevention of violence. At the individual stages of criminal proceedings, from pre-trial detention to conviction on probation or discharge on probation, the criminal justice authorities (public prosecutors and courts) have many opportunities to give directions, e.g., by instructing the perpetrator not to contact the victim or to take part in an anti-violence programme. However, such directions are not given as often as necessary.

**Overcoming deficits**

Need for improvement was also identified in other fields. Rosa Logar indicated that the evaluation of the Protection Against Violence Act had shown that intensive, comprehensive assistance for victims was of key importance. Women who continued to live with offenders after eviction orders had been issued reported that they had not had the power any more to seek help. Therefore it was essential that victims were proactively offered assistance over a longer time, which was impossible at present because of insufficient resources. Logar also said that the situation of children was a great concern to her: although meanwhile the majority of experts have learned that domestic violence always affects the children, either directly or indirectly, by witnessing violence committed against their mothers or by seeing the consequences of the violence, in spite of this knowledge, children still do not get adequate support. The Vienna Intervention Centre, for lack of staff, had to terminate its project to nominate a person providing support in each case where a child had witnessed or suffered domestic violence. It should become an established standard that each child that experiences domestic violence gets adequate assistance. Birgitt Haller added that children and immigrants are disadvantaged with regard to protection against violence. In order to ensure comprehensive protection also for immigrants it would be a basic necessity to grant them a residence status independent of the perpetrator and also access to the labour market.

Rosa Logar stressed that the support and protection of victims had to be given absolute priority but that interventions targeting perpetrators and work with perpetrators must not be neglected either. Activities in this field still are at their initial stage in Austria and should be further advanced. With regard to perpetrator programmes, international standards should be observed so that the protection and safety of the individual victims will always come first, and support programmes for survivors have to be an integral part of perpetrator programmes. The anti-violence training programme that the Men's Counselling Service and the Intervention Centre have organised in Vienna since 1999 is a model project run according to international standards. It should be expanded to all provinces of Austria.

Petra Smutny indicated another important aspect that also touches the court system: additional victimisation of survivors because of stereotype role models. If victims are represented as helpless, beaten women, those concerned are forced into a role that often does not correspond to the facts: also strong, self-confident women may become victims of men's violence. However, it has repeatedly shown that the chances of effectively asserting a woman’s rights are drastically reduced when she is a victim but does not fit into the expected role of a weak, helpless victim full of despair. Smutny also explained that she was very sceptical of Austrian awareness-raising campaigns that primarily depicted women as helpless victims, and pointed to campaigns such as Scotland's Zero Tolerance campaign that show self-confident women or use symbols that communicate initiative and strength.

**Victims’ protection supersedes data protection**

Shortly before the conference, a department of Austria's Ministry of the Interior unexpectedly presented a decree that, for reasons of data protection, massively restricted the communication of data by
the police to the intervention centres, which had been practiced for ten years. The statements by the experts on this development were unanimous: Anna Sporrer maintained that the right to protection against violence superseded data protection. Karl Mahrer added that the police knew that the intervention centres, in order to be able to give a risk assessment in contacts with the victim, needed all relevant information that the police officers had, and he endorsed the principle that the protection of victims has to take priority over data protection. Meanwhile the situation has changed again thanks to the activities of many committed actors. The decree no longer is in force in the original wording and the communication of information by the police to the intervention centres and violence prevention centres has again been ensured.

A plan of action to combat violence

Anna Sporrer pointed out that it was definitely an obligation of the State to prevent all forms of violence against women and that core articles of CEDAW, the United Nations Convention on the Elimination of all Forms of Discrimination against Women were constitutional laws in Austria. She expressed regret that this had not yet been acknowledged by all courts but underlined that the Association for Women’s Access to Justice would continue its activities to reach the goal that national courts interpret according to constitutional law and international law the corresponding agreements concluded under international law as well as decisions such as the one taken by CEDAW. Sporrer appreciated the fact that the Austrian Government made available public funds to the Association for Women’s Access to Justice so that women will be able to take legal action at all stages of appeal including international courts.

According to Petra Smutny, the following measures are necessary:
- The competent politicians should endorse the issue of protection against violence.
- Sufficient statutory provisions should be adopted.
- People who have contact to victims of violence in their work should receive comprehensive training in this field.
- Assistance should be provided in the implementation of the Protection Against Violence Act including the necessary funds as well as personnel resources within the justice system.

Several experts underlined the need for a comprehensive, coordinated Government strategy, in the form of a plan of action, to combat violence against women and their children and mentioned that this also included improvements in statistics (for instance in the fields of courts and youth welfare offices, on applications for interim injunctions) and more feedback regarding the implementation of evaluation results. Eventually, it was also pointed out that sufficient funds had to be invested in the prevention of violence against women and children in the long run as this constituted a violation of human rights and the survivors of violence had a right to protection and support. In addition, violence that has not been prevented is many times more expensive than prevention, for those affected and for society.
Victims of domestic violence who live in the country face structural disadvantages at several levels, which make it more difficult for them compared to women in cities to get access to support measures under the Protection Against Violence Act.

Differences in police interventions

There is an obvious urban/rural divide with regard to police interventions in cases of domestic violence. Since the Protection Against Violence Act entered into force, police officers in the country have generally issued a significantly smaller numbers of eviction and barring orders than the urban police, although in recent year the number of measures under the Protection Against Violence Act taken by provincial police authorities has tended to rise. Still, I would like to emphasise that, in spite of these pronounced differences between urban and rural areas, there are highly committed police officers also in the country, with a high degree of awareness of the issue of domestic violence, while on the other hand there are urban districts where the Protection Against Violence Act is not implemented very competently.

In 2006, around 4 100 out of a total of approximately 7 200 eviction or barring orders were issued in cities, and 3 100 in rural areas. About two out of three inhabitants of Austria live in the country, however, which means that interventions under the Protection Against Violence Act are disproportionately few in the country, although there is no reason to assume that there are differences between cities and rural areas regarding frequency or intensity of domestic violence.

While police officers often do not respond to domestic violence by issuing eviction or barring orders, dispute settlement is a typical intervention. In 2006, the urban police headquarters registered three barring orders for every two dispute settlements at nationwide level, while in rural areas more than half of police interventions because of domestic violence in rural areas led to dispute settlement measures. It is in fact quite possible that fewer victims of violence in the country turn to the police than in cities (for instance, because domestic violence is a stronger taboo in the respective social culture), so that rural police authorities may not be confronted with domestic violence as often as in cities – but still, the share of barring orders compared to dispute settlements underlines that there are differences between urban and rural areas with regard to police responses to domestic violence.

The 2006 statistics of Lower Austria illustrate this situation: a total of 639 eviction/barring orders were issued and 852 dispute settlements took place. However, the three urban police headquarters of St. Pölten, Wiener Neustadt and Schwechat, with jurisdiction over less than seven percent of the population, accounted for 12% of measures under the Protection Against Violence Act (76) and only seven percent of dispute settlements (61).
Apart from differences in the application of the Protection Against Violence Act, there are also differences in the way in which police officers respond to victims of violence. In the context of our evaluation of the Protection Against Violence Act, it was almost exclusively victims of violence living in the country who complained about police officers. Their criticism concerned the fact that a number of intervening officers (and almost all intervening officers were men) obviously sided with the perpetrator: they hinted that the women who were seeking help could be lying or, at least, exaggerate what had happened, and consequently refused to issue eviction orders.

Reasons for differences in police responses

One reason why eviction or barring orders are issued rarely or hesitantly is that police officers do not want to interfere in family matters because they regard families as private relationships from which the state should keep away. This attitude is based on a patriarchal approach to the concept of family, which is eroding more quickly in cities than in the country.

For a number of police officers families are still ‘sacred’ and therefore they do not want to acknowledge what is actually happening. They do not know enough about the nature of violent relationships or do not want to deal with this matter.1 This is reflected in statements such as, ‘it takes two to tango’. Women are regarded as accomplices, and consequently, eviction and barring orders are considered to be inadequate. There are officers who feel frustrated if victims of violence do not apply for interim injunctions after prohibition to return orders have been issued, and maybe even continue to live with the perpetrator. When called for a second time they think that it is justified to act in a less committed way because ‘an avic-tion order is useless anyway’. If a woman suffering violence does not call the police immediately, during an acute situation of violence, but only turns to a police station the following day, it is assumed that she gives an exaggerated account of what happened and how great her fear is, and she is not regarded as reliable. Many police officers do not know that it is difficult to get out of a violent relationship and that women often tend to play down for a long time the violence by their partners that they are suffering. For this reason, empowerment by intervention centres of women suffering violence is so important.

The attitudes described above are found among police officers in both rural and urban areas, but as patriarchal structures are more deeply rooted in the country, they play a more decisive role there. But, again: these differences in law enforcement are not found along a strict separating line between cities and rural areas (i.e., along the former distinction between urban and rural police structures). It is direct superiors in rank, at a middle level of hierarchy, who have a strong influence on attitudes to the Protection Against Violence Act of officers in a police station and thus the responses to domestic violence: superiors are able to communicate to their staff how to deal with domestic violence, and they may raise awareness among officers by directing their attention to such incidents.

In addition, routine is an important factor with regard to eviction and barring orders. An intervention in a case of domestic violence is a delicate matter, and the experience of the officers involved is important for assessing the risk situation. If they are not used to enforcing the Protection Against Violence Act, there will be some hesitation and insecurity. Only if such measures are part of the everyday routine of police officers will they adequately be applied in situations that require them.

In the interviews with police officers conducted in the context of our evaluation, officers in rural areas repeatedly pointed out that, different to their colleagues in the cities, they knew their ‘customers’ and therefore did not have to impose massive sanctions under the Protection Against Violence Act but could talk with the two ‘parties to the dispute’ and thus help them solve their conflict by means of

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1 Haller
This argument is not convincing, however: on the one hand, it is striking that the officers generally assume that there is a conflict, as if the case required mediating in a dispute between two parties who have the same resources, thus ignoring who is more powerful in these relationships. On the other hand, many years have passed since the times of the local police officer who was responsible for ‘his’ town: as a consequence of economising measures, police patrols have to cover larger areas in particular in the evenings and during the nights, so that an officer will not personally know everybody to whom they are called while on duty. And finally, urban police officers also work in specific regional areas and thus know part of their clients.

The argument of knowing one’s ‘customers’ is spurious. In individual talks, a number of officers revealed much more plausible explanations: as they lived in the same town they did not want to become unpopular outsiders in the community because of an intervention. This again points to the patriarchal structures mentioned above, which are still firmly consolidated in the country: social pressure is not directed against the abusing husband, nobody wants to interfere, and the victim is left without support.

Further discrimination in rural areas

Apart from inadequate responses by the police to domestic violence, women in rural areas are affected by other forms of structural discrimination as well: for instance, in an evaluation of rural branch offices of the intervention centres in Upper Austria and Lower Austria it showed that people in rural areas often did not know that intervention centres existed or what their actual function was – and that women affected by violence had little information about available forms of support.

Our survey was based on the assumption that the branch offices were focal points for women who would not travel to the central office and would not get any support if the rural offices did not exist. This assumption was confirmed in the interviews, and applies not only to older women or women whose mobility is restricted, for instance, because of an illness: there is a group of women, and obviously much larger in number than the aforementioned groups, who are not used to moving about in urban areas. They feel uneasy, and some of them even are afraid, therefore they shun trips to the city. In addition, many clients of intervention centres are inexperienced with regard to official channels and authorities, they feel overwhelmed and avoid such situations – this perhaps applies more strongly to women who live in the country than women in cities.

The situation of victims of domestic violence in rural areas can be summarised as follows: women in the country often live in a patriarchal environment in which private violence is played down and nobody wants to interfere. They do not know much about support options, they are ashamed and therefore reluctant to seek help. Police officers, as well as the social environment of those concerned, often regard violent relationships as a ‘private problem’ and victims are thus left to fend for themselves.

References


Haller/ Bischof
INTERNATIONAL MEASURES TO COUNTER VIOLENCE AGAINST WOMEN
It is my pleasure to address you in my capacity as Chair of the Sub-committee on Violence against Women of the Parliamentary Assembly of the Council of Europe, which is responsible for running the parliamentary dimension of the Council of Europe Campaign. I am also the Swedish contact parliamentarian. I am fully involved in the campaign in my home country and I am enthusiastic about any opportunity to support this Campaign abroad, especially to celebrate the 10th anniversary of a pioneering law in the world.

The Parliaments United in Combating Domestic Violence against Women campaign was launched in Madrid on 27 November 2006 and will last until June 2008. The closing conference of the PACE campaign will take place here in Vienna in April, at the kind invitation of the Austrian Parliament.

At present, 46 contact MPs have been appointed. We have undertaken many initiatives to raise awareness among members of parliaments of the issue of domestic violence. These activities include:
- the adoption of declarations
- the organisation of parliamentary hearings
- the translation and dissemination of the Campaign material to members of parliament, in particular the handbook for parliamentarians as a practical tool.

The network of contact parliamentarians helps us identify good practices developed by national parliaments, compare our national experiences and learn from each other.

As parliamentarians of the Council of Europe Member States, we are deeply concerned because of the extent of domestic violence against women in Europe and feel that we must take action to promote women’s fundamental human rights. We feel responsible for safeguarding women’s rights and protecting the victims of domestic violence. Domestic violence is a crime. As legislators, we must provide the necessary answers, and punish this serious and unacceptable assault on human dignity. Domestic violence is very worrying. It is growing in Europe and concerns every social class. For this reason, victims need our protection. Parliamentarians are expected to provide the necessary laws and ensure appropriate funding to combat this crime efficiently.

Let me highlight first how parliamentarians can help professionals providing services to victims; then I will look at how MPs can check in which way, and if at all, professionals are able to implement policies adopted by parliaments.
How can parliamentarians provide legal instruments to professionals who assist victims?

Domestic violence is a criminal offence. It involves not only physical but also psychological violence. Our reaction must be political and must encompass all dimensions of this crime, including stalking. The adoption of legislation by parliaments is necessary to set up a legal framework and to secure individual rights. It is the role of parliaments to:

- outlaw violence against women, including domestic violence;
- establish by law that marital rape is a criminal offence;
- make provisions to bar violent spouses or partners from the marital home and issue protection orders that are effective not only at home but also at work and for the children, etc.

As MPs, we should make sure that professional agencies and authorities have the means to break the cycle of violence at once. In other words, parliaments must ensure that the police, health care services and social workers will have funds to provide adequate support services to victims of domestic violence. This means, for example, that the legislature must guarantee that a sufficient number of safe emergency shelters are set up and that adequate long-term budgetary resources to fund measures are made available.

But adopting laws is not enough - it is certainly not the end of the story.

How can MPs check in which way, and if at all, professionals can implement policies adopted by parliaments?

Laws must be good in practice, not just on paper. Parliamentarians must therefore supervise and monitor the implementation of laws and ensure that the statutes they adopt meet practical needs.

It is clear that, even in the most advanced countries where model laws have been adopted, the legislature has to define monitoring mechanisms. In this context:

- decision makers at all levels, i.e., towns, provinces, and in some cases, autonomous regions, must be involved;
- we have to monitor if judges apply the law in the intended way so that more perpetrators are convicted;
- we must check if all target groups, e.g., women living in cities and rural areas, younger and older women, receive the necessary protection;
- we must list the administrative measures taken to apply the law;
- we must check if the instruments to be used are funded sufficiently;
- we must assess the communication to the citizens about the fight against domestic violence;
- we should finally define monitoring mechanisms to be created at parliamentary level.

How can parliaments contribute to monitoring the situation in Council of Europe Member States? In the framework of the Campaign, the Parliamentary Assembly launched a pan-European initiative on 8 March 2007 (International Women’s day) to encourage MPs throughout Europe to organise parliamentary hearings. Public authorities, professionals and women’s organisations were among the stakeholders invited to exchange views and discuss how assistance to and protection of victims of domestic violence could be improved. This initiative was joined by 11 MPs. It was important to have public debates on this issue to raise awareness in every segment of society and bring the intentions of the parliamentarians face to face with the reality which professionals have to work with on a daily basis.
In the long run, the dialogue between public authorities, professional agencies, NGO representatives and parliamentarians is essential for monitoring the adequate implementation and funding of measures to help victims of domestic violence.

How can the Parliamentary Assembly action contribute to answers to practitioners?

On 5 October 2007, the Parliamentary Assembly of the Council of Europe unanimously adopted a Resolution on the mid-term assessment of the parliamentary dimension of the Campaign. Based on suggestions by Rapporteur Mr Mendes Bota from Portugal, the Assembly adopted seven key measures that should be considered as minimum goals to be achieved by next June. These minimum standards should notably encourage national parliaments:

- to set up sufficient numbers of safe emergency shelters;
- to adopt provisions with regard to restraining orders against violent spouses or partners and issuing of protection orders against perpetrators;
- to guarantee effective access to the courts and to protection measures for victims;
- to allocate sufficient budgetary resources for implementing the law;
- to monitor the application of laws on violence against women adopted by parliament.

Those parliaments who have already adopted these measures are invited to go further and to find more, and more specific, answers to this crime, e.g., to evaluate its cost for society and to make sure that on average, a minimum target of 1 euro per inhabitant in all Member States is earmarked for combating domestic violence.

As parliamentarians, we have the power to turn this campaign into a success before its end, in June 2008. During the next seven months, we have the capacity to create laws, to ask for the necessary budgets and to monitor the actions of our respective governments.

I hope that the Council of Europe Campaign will encourage more parliamentarians to foster dialogue with professionals and debate, at national level, the implementation of the laws adopted in order to increase the protection of victims and the prevention of violence against women. As parliamentarians, we need the support of NGOs and professionals to assess the implementation of the laws and propose new reforms.

To celebrate the International Day for the Elimination of Violence against Women on 25 November 2007, the Parliamentary Assembly is launching a pan-European initiative called Men Get Involved to Combat Domestic Violence, because men throughout all spheres of society need to become more involved in combating violence against women. We are encouraging our male colleagues to support this initiative by activities such as the following:

- setting up a network of male parliamentarians committed to this issue and ready to press for intensified legal and judiciary measures, police training and service provision for victims;
- organising media-oriented public actions in which politicians wear white ribbons and pledge personal and political commitment to the campaign.

Men get involved!

Let me congratulate the organisers of this promising conference. We, the parliamentarians involved in the Campaign, have often emphasised that adopting laws is not enough. Parliamentarians must also ensure an adequate implementation of laws. Our conference today will therefore be very informative and I am looking forward to seeing how the Austrian anti-violence legislation works in practice, ten years after its adoption.
It is my honour and privilege to participate in this International Conference on 10 Years of Austrian Anti-violence Legislation and to deliver a statement on international measures to counter violence against women, using my experience as the Chairperson of the United Nations Committee on the Elimination of Discrimination against Women (CEDAW) and Vice Chair of the Council of Europe Task Force to Combat Violence against Women, including Domestic Violence.

I will start with the international measures provided by key international instruments for the protection of women’s human rights, namely the United Nations Convention on the Elimination of All Forms of Discrimination against Women (the Convention), its Optional Protocol and the work of the CEDAW Committee, and finish with regional measures provided by European legal instruments in this field.

At the global level the CEDAW Convention, adopted 28 years ago, has provided an international legal framework that defines legal and other measures for the elimination of discrimination against women, including violence against women.

The Convention has been ratified or acceded to by 185 states. We still miss ratification by seven states in order to achieve the goal of universal ratification.

The Optional Protocol to the Convention, adopted in 1999 and in force since 22 December 2000, has been ratified or acceded to by 88 States. Under the Protocol, the Committee on the Elimination of Discrimination against Women (CEDAW) is provided with a mandate to consider communications (complaints) submitted by or on behalf of individuals or groups of individuals who claim to have been victims of a violation of any of the Convention’s rights, as well as to conduct inquiries into grave or systematic violations of the Convention’s provisions by a State party to the Convention and the Optional Protocol.

Through the work of the CEDAW Committee, the Convention becomes a dynamic, living human rights instrument. The CEDAW Committee is composed of 23 experts elected by secret ballot by the States parties to the Convention for four-year terms. The Committee provides further interpretation of the Convention’s provisions and rights through:

- General Recommendations
- concluding Comments addressed to the individual States parties
- cases under the Optional Protocol.
The CEDAW Committee, through its General Recommendations, provides guidance on the content and purpose of the substantive articles or themes of the Convention. Let me mention General Recommendation No. 19 on violence against women. As we all know, the Convention does not explicitly refer to violence against women. Through its interpretive work reflected in General Recommendation No. 19, the Committee made it clear that violence against women falls squarely within the scope of the definition of discrimination and thus, is covered by the Convention.

General Recommendation No. 19 on violence against women states that gender-based violence is a form of discrimination that seriously inhibits women’s ability to enjoy rights and freedoms on the basis of equality with men. Its Paragraph 6 also explicitly states that ‘the definition of discrimination [in article 1 of the Convention] includes gender-based violence, that is, violence that is directed against a woman because she is a woman or that affects women disproportionately. It includes acts that inflict physical, mental or sexual harm or suffering, threats of such acts, coercion and other deprivation of liberty.’

Furthermore, General Recommendation No. 19 enumerates several human rights and fundamental freedoms that may be impaired or nullified because of this type of violence:
- the right to life;
- the right not to be subjected to torture, cruel, inhuman or degrading treatment;
- the right to liberty and security of the person and to equal protection under law;
- the right to equality in the family;
- the right to the highest attainable standard of mental and physical health.

This rights-based approach is very important for the recognition of violence against women as a human rights violation.

It is important to recognise that the Convention guarantees women’s equal enjoyment not only of the rights explicitly dealt with in the fields covered by the Convention, but also extends to the equal enjoyment of all internationally recognised human rights and fundamental freedoms.

The CEDAW Committee, in General Recommendation No. 19, emphasises that discrimination under the Convention is not restricted to action by or on behalf of governments, and points out that States parties have an obligation in accordance with article 2(e) of the Convention to take all appropriate measures to eliminate discrimination against women by any person.

The Committee also clarifies that ‘under general international law and specific human rights covenants, States may also be responsible for private acts if they fail to act with due diligence to prevent violations of rights or to investigate and punish acts of violence, and for providing compensation.’

According to this approach, a state meets its human rights obligations only if it also protects women’s human rights in accordance with the Recommendation, i.e., in public as well as in the private sphere.

CEDAW Concluding Comments
I will now move to the second tool of CEDAW for the interpretation of the provisions of the Convention and obligations of the States parties to eliminate such violence: the Concluding comments of the CEDAW Committee.

All States parties to the Convention have an obligation under Article 18 of the Convention to report on its implementation to the CEDAW Committee. Based on its consideration of reports submitted and the constructive dialogue that it holds with the state concerned, CEDAW adopts tailor-made conclud-
ing comments, which include recommendations to enhance the implementation of the Convention, and also directed at the obligation of States parties to combat violence against women, including domestic violence.

The Committee identifies country-specific concerns that require increased attention and makes concrete recommendations for action by the State party. I will illustrate how the CEDAW Committee has monitored how states have complied with the Convention with regard to violence against women, including domestic violence.

**Comprehensive measures to address all forms of violence against women and girls**
The Committee places high priority on the need for comprehensive measures to address all forms of violence against women and girls. Such a comprehensive approach should include specific legislation on violence against women, and its effective implementation. Other elements of a comprehensive approach include policies and action plans, awareness-raising and capacity-building efforts for different groups of public officials and the general public, as well as services for victims of violence.

The Committee also places high priority on the need for coordinated, multi-sector and multi-stakeholder strategies to prevent and address violence against women in a comprehensive manner.

**Attitudes and stereotypes**
The Committee has called attention to the lack of social awareness and the persistence of patriarchal attitudes, which consider violence against women, particularly domestic violence, private matters that are acceptable or normal.

**Data and research**
The Committee has also repeatedly called attention to the limited data available on various forms of violence against women, recognising that data and research are necessary to highlight the prevalence of particular types of violence, to create social awareness and to establish and properly implement policies and programmes.

For example, after examination of the sixth periodic report by Austria in 2007 the CEDAW Committee, in its Concluding Comments, noted with concern ‘… the insufficient statistical data on violence against women.’

‘The Committee requests the State party to ensure that the systematic collection of data, disaggregated by type of violence and by the relationship of the perpetrator to the victim, is undertaken and made publicly available and that such data form the basis for monitoring the implementation of current and future policy and support measures.’

**Legislation and its implementation**
With respect to legislation on violence against women and its implementation the Committee has been concerned about:
- lack of specific legislation to deal with all forms of violence against women, including lack of specific laws on domestic violence, sexual harassment, marital rape, incest and trafficking;
- problems with the scope and coverage of existing legislation – some examples are: definitions of rape that require the use of force rather than a lack of consent; definitions of domestic violence that are limited to physical violence; failure to criminalise domestic violence and sexual harassment; and inadequate penalties for acts of violence against women;
- lack of effective implementation of existing legislation – some examples are: the absence of regulations and procedures for the implementation of legislation; high dismissal and withdrawal rates of cases; low prosecution and low conviction rates; lack of free legal aid for victims; and failure to apply measures to protect victims.
Provision of services
The Committee has expressed concern about insufficient support measures for victims of domestic violence, such as shelters and legal, medical and psychological support. It has been concerned about the inadequacy of financing and monitoring of programmes providing services to women victims of violence.

Cases under the Optional Protocol
The Committee, in its views adopted with respect to some cases examined under the Optional Protocol, has provided further guidance regarding obligations of the States parties concerned to prevent domestic violence against women.

This guidance should be seen as an incentive for all other States parties to review their legislation, plans and policies, and evaluate and monitor how the relevant laws, plans and policies are implemented. This may also encourage many more women to submit complaints to the Committee to seek redress at the international level and to enhance accountability of states at the national level to provide effective remedies for violations of women’s rights.

Case No. 2/2003; Ms. A.T. v. Hungary
For example, in 2005 the Committee presented its views in respect of Communication No. 2/2003 of Ms. A.T. v. Hungary. In this case, a Hungarian woman stated that Hungary violated the Convention due to its failure to provide effective protection against violence from her former husband. For four years Ms A.T. had been battered by her former common-law husband. She could not ask for a restraining or protection order since neither option existed in the State party. She had been unable to flee to a shelter because there was no shelter equipped in a way so as to be able to accept her together with her children, one of whom was fully disabled.

The Committee concluded that the obligations of the State party set out in Article 2 (a), (b) and (e) of the Convention extended to the prevention of and protection from violence against women, and had remained unfulfilled, which constitutes a violation of the author’s human rights and fundamental freedoms, particularly her right to security of person.

With respect to this case the Committee recommended to the State party to:
(a) Take immediate and effective measures to guarantee the physical and mental integrity of A.T. and her family;
(b) Ensure that A.T. is given a safe home in which to live with her children.

The Committee also adopted a general recommendation to the State party:
(a) Respect, protect, promote and fulfil women’s human rights, including their right to be free from all forms of domestic violence.

(e) … the Committee’s recommendation that a specific law be introduced prohibiting domestic violence against women, which would provide for protection and exclusion orders as well as support services, including shelters.
In 2007, the Committee on the Elimination of Discrimination against Women presented its views in respect of Communication No. 5/2005; the heirs of Ms. Şahide Gökçe v. Austria and of Communication No. 6/2005; the heirs of Ms. Fatma Yıldırım v. Austria.

In both cases the Committee noted that the State party had established a comprehensive model to address domestic violence, which includes legislation, criminal-law and civil-law remedies, awareness raising, education and training, shelters, counselling for victims of violence and work with perpetrators. But it also concluded that in order for the individual woman victim of domestic violence to enjoy the practical realisation of the principle of equality of men and women and of her human rights and fundamental freedoms, the political will that is expressed in the aforementioned comprehensive system of Austria must be supported by State actors that adhere to the State party's due diligence obligations.

The Committee concluded that the State party had violated its obligations under Convention Article 2 (a) and (c) through (f), as well as Article 3 of the Convention, read in conjunction with Article 1 of the Convention and General Recommendation No. 19 of the Committee, and the corresponding rights to life and physical and mental integrity of the deceased victims.

In conclusion of this part, we can see that the Convention on the Elimination of All Forms of Discrimination against Women provides an important international legal framework that establishes an obligation of States parties to combat violence against women. Now we need to connect it to the regional European level.

**European instruments**

The European Convention for the Protection of Human Rights and Fundamental Freedoms (ECHR) ratified by all Member States of the Council of Europe provides for the protection of a significant range of fundamental rights and freedoms.

More rights are granted by additional protocols to the Convention, three of which are worth highlighting in the context of domestic violence, as they grant the right to the protection of property (Art. 1, Protocol 1), the right to equality between spouses (Art. 5, Protocol 7) and a general non-discrimination clause on protection beyond the enjoyment of the Convention rights (Art. 1, Protocol 12).

Although violence against women is not specifically mentioned in the ECHR its set of rights and freedoms provides the general framework of obligations for most European states to combat violence against women.

Recognising a need for a more specific instrument on violence against women, the Council of Europe in 2002 adopted Recommendation (2002)5 on the protection of women against violence. This legal instrument, although not legally binding like the CEDAW Convention or the ECHR, was the first European instrument to propose a comprehensive and coordinated strategy to prevent violence and to protect victims, covering all forms of gender-based violence.

At its last Summit in 2005, the Council of Europe Member States decided to place even greater emphasis on the eradication of violence against women. They decided to set up a Task Force and entrust it with the development of the Blueprint for the Campaign to Combat Violence against Women,
including Domestic Violence, which was launched in November 2006 and will come to an end in March 2008. Eight international experts in the field of preventing and combating violence against women were appointed to this Task Force by the Secretary General of the Council of Europe.

The Task Force is mandated to evaluate the effective functioning of the measures for preventing and combating violence against women adopted at the national and international levels.

It is also entrusted with making proposals for revising these measures or adopting new measures including those to assist Member States to monitor progress achieved.

This has been a brief overview of international measures and I hope this conference will shed more light on both international and national measures available as well as on those still needed for an effective eradication of violence against women.
COMPREHENSIVE STRATEGIES FOR TACKLING VIOLENCE AGAINST WOMEN
Across Europe, there have been three stages of addressing violence against women.

- First of all, it must be brought into the open and named as violence, breaking the silence and countering the notion that these matters are private affairs. To overcome the considerable resistance to recognising a serious problem in society, it has been essential to provide woman’s advocacy and woman-to-woman services.

- When these are established and awareness has been raised, the second challenge is to make the society and the state responsible for preventing harm and ensuring that services are secured. Alongside women’s services, other professions and agencies must learn to recognise the evidence of violence against women in order to do their jobs properly. Better responses are called for from police and the justice system, from family courts, from the health professions and social work, and many other institutions.

- Over time, it is recognised that single measures can be ineffective if other agencies work against them or fail to respond in time; we may end up only ‘managing’ the victims and accepting the violence as normal. There must be a coherent overall policy in which statutory agencies and the voluntary sector (NGOs) work together to end the violence.

Although these stages can be seen internationally (e.g. in the UN) as well as in countries with a history of work on violence against women, our transnational comparative studies have found that within each country, these three stages are necessary and cannot be bypassed. But the later arrivals in the European community do have the advantage of being able to envision from the first steps forward where this process will lead.

The 1997 Austrian law stands at the transition point between stage two and stage three. On the one hand, it focuses entirely on improving the interventions of two central agencies, the police and the advocacy services for women, giving each of them new tools (eviction of the perpetrator, proactive intervention) to act more effectively. On the other hand, it creates and secures the interagency cooperation that is needed for coordinated intervention, and it also has defined a new principle of public policy, what we call a ‘perpetrator-oriented intervention’. Where traditional approaches centred on the woman as victim and on offering her a safe place of refuge as well as advice and counselling as needed, the new model emphasises that acts of violence are criminal offences and socially harmful behaviour, and that statutory agencies have an obligation to frame their intervention on that principle. In particular, the police must understand that they are neither psychologists nor social workers: each agency or profession has its own role and responsibilities. In this new paradigm, women suffering domestic abuse are seen as citizens who should be enlightened, informed and empowered to claim fundamental rights; children are defined as ‘witnesses’ to criminal abuse of the mother. This reframing is only
possible, however, when the needs of both women and children for safety, as well as practical and emotional support are met simultaneously with the intervention, and in the further process support in overcoming the effects of violence, and where relevant, therapy, must be available.

By the time the Austrian law had been passed, all of the German-speaking countries had country-wide networks of shelters, hotlines and counselling centres offering short-term protection and woman-to-woman advice and support – by no means fully adequate to the needs, but firmly established. In all of them, measures to educate the police towards a more active role had already been taken, but with relatively little success, since the women usually did not ask for criminal proceedings or refused to testify when these were initiated. Thus, the new paradigm was well received, especially after evaluation had shown that it ‘worked’, and one by one, Germany, Liechtenstein, Luxembourg and Switzerland adapted the model to their legal and police systems.

At the same time, the Austrian model played a unique historical role in the European struggle to overcome violence against women. In the older democracies where services were established, activists generally did not see much potential in law reforms, except as symbolic acts. After all, most of the violence was already a criminal offence: the problem was that the law was not being applied. Strategies for change often began with training in the relevant agencies and professions (as indeed in Austria) and proceeded towards multi-agency work to improve practice. But over time, as the success of the Austrian law became more widely known, policy-makers understood the simple justice of the idea that the perpetrator should have to leave, not the victim. And activists have become increasingly convinced that it is worthwhile to engage with the justice system, and to consider the law as a potentially valuable framework for feminist intervention as well as a tool to bring about change. Thus, in stage three, where coordinated intervention was initially addressed via multi-agency cooperation on the ground level, there is a growing interest in linking this to a coherent overall policy with a foundation in clear legal frameworks. There are, however, numerous difficulties to be addressed in this process.

Sanctions and empowerment

The Council of Europe Recommendation Rec(2002)5 on the protection of women against violence has been influential in the process of developing legal measures. Member states are urged to ensure that every act of violence against women is punishable, to take swift and effective action against perpetrators, to investigate and prosecute acts of violence, initiating prosecution by the public prosecutor. At the same time, the Recommendation articulates as its fundamental principle that all measures should be based on empowerment of victimised women and their free exercise of basic rights, ensuring all necessary measures of protection, support, and services. Such measures also imply legal frameworks, ranging from civil law redress to the regulation of access to benefits, but they also require services. The challenge of legal intervention lies in the need for all areas of the law to act in concert.

There are two sides to legal strategy: deterrence and punishment of acts that cannot be tolerated, and protection from harm, including support of recovery and of self-determination for victims. These two interact in a number of ways. Most obviously, sanctions against interpersonal violence are rarely effective unless witnesses are able and willing to cooperate; the victim is not the only, but a prime witness. Precisely because violence against women is a structural problem in society, victims often find it extremely difficult to participate actively in pursuing sanctions. Furthermore, sanctions against the perpetrator can rebound and increase the harm to the victim, for example, when he is made to pay a fine and she is financially dependent on him, or when it is easy for him to intimidate her or take revenge. On the other hand, sanctions serve justice and underscore for the victimised woman that she has rights. To achieve this, however, legal measures must be carefully set up and actively monitored, so that they ensure her safety and well-being throughout.
There is a tension between sanctions and empowerment that cannot be easily resolved. As a growing number of national prevalence surveys show, most of the violence experienced by women is exercised by men within their circle of personal relationships. But people generally hesitate to take a family member to court. Overwhelmingly, what women want is to feel safe from further threat of violence – not incidentally, the Swedish comprehensive Act in 1998 was called ‘Women’s peace’. Strikingly, assessment of the Domestic Violence Act in Luxembourg found that, while the vast majority of the women saw both the police intervention (including eviction of the perpetrator) and proactive advisory services as beneficial, and most of them then took civil and criminal measures against the perpetrator, only half (52%) felt they would be safe in his presence. If this is the case even where women have been supported in a well-coordinated network of interventions, how much less safe must women feel before they enter a ‘chain of intervention’ or where this chain is not sufficiently secured.

**When are legal measures effective in practice?**

As the complexity of state intervention in personal life emerged, some governments and agencies have developed procedures for monitoring and evaluation of the impact of legal measures. The research network Co-ordination Action on Human Rights Violations carried out multi-country reviews of evaluation results, summarised in two reports, one on the justice system as an arena for the protection of human rights for women and children,\(^1\) and a second report on agencies and services in the area of domestic violence, rape and sexual assault.\(^2\)

Together, these two reports underline that attention to the interactions among measures is absolutely vital to progress in this area. Providing good practice requires both legislation and services for victims and perpetrators. Legislation determines the means that may be adopted in responding to domestic violence, rape and sexual assault, while services are required to implement legislation. As well as evaluating legislation and services separately, assessing the interaction between the two is essential to the evaluation of good practice.

The actual effects of legal measures depend on the differing ways in which the institutions of policing and justice are organised and on the institutional cultures in which they are embedded. This appears in the choice of legislative strategies.

In the countries where public awareness was raised by women’s voluntary organisations in the 1970s, specialised services for victimised women, and later for girls, were established to address the problem. Legal reforms were developed only later, and have been incremental in nature, responding to the inadequacy of routine statutory agency responses and procedures as they came into view. This incremental approach, to be found in the UK, Germany, or the Nordic countries takes up the multiple aspects implicated in violence against women sequentially, sometimes assigning different task forces or ministries to work together on revising the legal frameworks and social responses. Ideally, the experience and extensive knowledge of women-centred NGOs enters this process with specific focus. Measures such as ex-officio prosecution of assault, protecting the victim who testifies against an aggressor, or special protection of children are worked out piece by piece and fitted into existing legal frameworks.

In the past 15 years, in countries with no long history of woman’s activism and advocacy services legislation is being taken up as a lever to begin the needed process of social and institutional change. During this period, with the year 1993 as a watershed, the obligation of states to stop violence

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1 Humphreys/ Carter  
2 Hanmer/ Gloor/ Meier
against women became internationally recognised. In that year, both the UN and the Council of Europe declared that violence against women is a human rights violation in and of itself.

Based on UN recommendations, there has been a call for specific laws on domestic violence. These are typically laws that define the offences covered, the relationships to be considered ‘family’, ‘household’ or ‘domestic’, the penalties and the procedures; and they typically regulate some family-related or social welfare matters not usually comprehended in criminal law. A number of them have been passed, are being prepared or under consideration in countries that recently joined the EU, such as Cyprus and Bulgaria, as well as in Bosnia, Croatia, Montenegro and Serbia. There is a tendency to focus these laws on punishment; social measures are centred on the effort to prosecute perpetrators, based on the interest of the State in eliminating violence from the family sphere. Indeed, the emphasis may be on protecting the family, rather than protecting women. Within these new laws, it is not clear how broad definitions of what constitutes ‘violence’, including inflicting emotional pain, will be implemented in legal practice, and how the existence of a separate offence of domestic violence will intersect with the general penal code. Overall, it can be said that a specific law addressing domestic or gender-based violence needs to be carefully designed to ensure that the interaction with existing legal frameworks has the desired effect.

The Spanish Organic Act Ley Orgánica 1/2004 represents such an integrative framework. It is specific, in being directed at adult relationships and gender inequality, and is also innovative in taking a comprehensive, multi-pronged approach, addressing gender violence in context including educational and prevention measures, procedural as well as criminal and civil law provisions, social and economic rights, setting up fast-track specialised courts, and more. Perpetrators can only be sentenced to prison or to community service accompanied by re-education; fines, which often burden the wife, are not possible. Any conviction for gender violence suspends the right to own a weapon, and may exclude the perpetrator from exercising any parental authority for up to five years. There are provisions for central data collection and monitoring of implementation.

Two points seem particularly worth mentioning. First, the integrated set of rights are guaranteed to all women who are victims of gender violence, regardless of their origin, religion or any other personal or social condition or circumstance. This is a radical human rights perspective. Specific instructions have been issued to the police concerning foreign women who may be in an ‘irregular’ situation, in all cases giving priority to the protection these women require.

Second, the Spanish law boldly steps far ahead of the existing infrastructure in a number of areas at once, so that the State put itself under an obligation to create and finance many services and measures that did not exist, or were not widely available. The special courts and prosecutors had to be organised and trained; women who have suffered gender violence have a specific right to economic assistance, housing and free legal aid; perpetrator programmes had to be set up for all men who were not actually given a prison sentence. This is quite extraordinary, and shows how seriously the matter is being taken up.

In all cases, whether a specific law is passed or existing law applied and refined, or a combination of both, research findings show that actual practice often falls short of fulfilling expectations from the legal reforms. Monitoring is needed to assess, for example, whether the police are investigating all cases that come to their attention, what proportion of cases are actually prosecuted and for what offences, and how courts dispose of the cases. Monitoring is needed in the family court system, to ensure that custody and child contact rulings do not enable violent men to threaten or harm the mother, or the children. Protection orders must be monitored and serious consequences imposed when they are violated. Based on the information given by member states of the Council of Europe on legislation
and its implementation, it seems that very few countries have a monitoring system that would enable them to know where the new legal activities are actually leading in practice.

**Evicting perpetrators**

A growing number of Council of Europe states are introducing measures to evict the perpetrator from the home; indeed, it is rapidly becoming a common element of strategy. However, a number of states apparently think it inappropriate to give this power to the police. There is a tendency to define barring orders, like other safety orders, as a judicial measure. Such court decisions are unlikely to take effect quickly. Many of them are dependent on criminal proceedings already having begun, usually presupposing that the victim will have made a statement and is prepared to testify before any protective measures are taken. This is paradoxical and unrealistic: when a crime victim is threatened, protection from further violence is the precondition to giving evidence. Recognising this at least in part, a few laws, and some legal systems, explicitly foresee rapid court decisions in certain cases as an emergency measure with an ex parte decision. Most laws do not mention this possibility at all.

While in neighbouring countries, the Austria model has been well understood as an interlocking intervention of police and advisory services, addressing the perpetrator and the victim both – Slovenia and the Czech Republic have also passed similar laws –, most states do not make this link. In my studies of the implementation of the Council of Europe Recommendation across more than 40 countries – a stocktaking study completed in early 2006 and an implementation study available on the Internet\(^3\) – I found more and more countries inserting this measure into legal frameworks, but without connecting it systematically to support or safety for the victimised woman. This may in part be a consequence of the fact that in these countries there is no solid foundation of services for support: It is easier and cheaper to pass a law than to institute good services. There is also often too little understanding of how dangerous abusive men can be, leading to the notion that, once domestic violence has been made a crime, women will be safe.

Beyond this, however, there is a misapprehension that eviction of the perpetrator can substitute for women’s services or refuges. Indeed, this seems to be a great temptation for financial administrators. Even in Germany, when the city of Hamburg instituted a proactive intervention and advice centre to work with the police eviction orders, they closed one of the refuges for women, arguing that the need for space in shelters must now decrease. The Hamburg intervention centre understood its purpose as encouraging women to request court protection orders and separation proceedings, and its task was completed when the women had such an order. Fortunately, Hamburg still has other shelters to which women can turn when the court orders prove inadequate, or these measures do not prove appropriate or helpful to their needs.

**Institutional cultures as context of the law**

Whether or not a court-issued barring or restraining order can be effective will depend very much on the way the institutions of policing and justice are understood and how and when they interact. In Austria and Germany, eviction by the police was introduced because the police frequently have no power to arrest in a domestic situation; at best they could take a man into custody for eight hours if drunk or out of control. The only way to protect a woman was to bring her to a refuge, which the police often did. In the UK, by contrast, awareness that domestic violence is serious has been met by an

\(^3\) Hagemann-White 2006; Hagemann-White/ Bohne; Hagemann-White 2008.
increase in police arrest. Common assault has been added to the list of offences for which a police officer can make an arrest without a warrant, that is, without a court decision.

The UK has also set up specialised courts to fast-track domestic violence cases. A man may be brought before the magistrate within 24 hours; when the risk for the woman seems high, he can be kept in detention by setting bail. When this system works, it makes the Austrian barring order look weak. Why leave the man out there where the woman can never know when he might come back, when you could put him safely in jail? On closer examination, however, it becomes clear that safety is not the primary purpose of arrest policies, but rather branding wrongdoing, with a potentially deterrent effect. In actual fact, arrest does not ensure a woman's safety for very long, since in many cases, the perpetrator will not be put directly to prison (if at all).

In Germany or Austria, there is a very strong aversion to increasing the police power to arrest, or to fast-track convictions. This is founded in historical experience of how police powers or special, rapid-conviction courts can be abused. The police ban is founded on the mandate to protect the life and safety of citizens; it is a preventive measure when there are reasonable grounds to suppose a threat of violence in the home. Here, there is a risk that the issue of justice may get lost. With an immediate means of relief in hand, the police may be disinclined to report crimes and to collect evidence that will stand up in court independent of the victims' readiness to testify. German evaluation found that the police, even if specifically trained in respectful interviewing and using the eviction option, rarely collected such objective evidence.

In emphasising arrest, British policy sees the police as enforcing the law. There may be a difference in the cultural perception of the role of policing, and how far it is associated with prevention and protection. The arrest response assumes that domestic violence situations include identifiable criminal acts and provide enough evidence for a conviction. Quite a few men will be let off without a penalty, although the conviction rate is rising. For their own safety, women must actively seek protection orders. This disadvantages some vulnerable women additionally; to avoid this, significant resources must be invested in supporting women. Thus, the British special courts appoint a specialised domestic violence advisor and a sexual violence advisor, whose task is to give advice and support to the victim, both encouraging her to testify and helping her to take measures and receive resources for her safety.

A preference for rapid punitive measures or for a priority of protection and victim support is not only a matter of institutional cultures: the results differ as well. Protective measures mean that a woman can call the police before she is actually injured, when she recognises from past experience that violence is brewing. A policy of arrest and punishment is hard to apply until some violence has occurred or been directly threatened. Arrest policies will be more effective in protecting women from highly violent men; risk assessment is vital to this goal. Police barring orders will offer protection that is more uncertain, but meets a wider range of circumstances, and may prevent violence. Where the risk seems high, police in Austria or Germany thus may still bring a woman to a shelter after barring the man from the home, and the advocacy services then plan for safety with her.

**Higher penalties for aggravated assault or abuse**

Whether states aim for new laws, or for more effective use of existing laws, the concept of aggravating circumstances is gaining importance. It is a way of dealing with the dilemma of defining legally the particularly damaging nature of gender-based violence. As we know from many years of practice and research, much violence against women is not adequately captured by the definitions of seriousness of assault in the tradition of criminal law. Even where there is a legal category – in German law, for example, violence causing permanent damage to the health of a victim has a special legal status – it
must be demonstrated that the damage was caused by a specific act or incident; loss of a kidney after years of repeated blows to the body cannot be prosecuted in this legal category. The Swedish law defining gross violation of a woman’s integrity as an offence was intended to solve this problem, but immediately encountered a higher court objection requiring that each act or incident must be legally punishable in itself; this limited the range of situations to which it could be applied.

There are several attempts now to address domestic abuse and/or violence against women by defining the context of the acts as an aggravating circumstance. This is difficult to do without narrowing the focus of its application. Some new laws on domestic violence state that acts of violence within the family or the household are to be seen as aggravated, that is, more serious than the same act would be outside this context. Some, such as the Violence in the Family Act in Cyprus (2000), specify the offences and the higher penalties. These laws do not reference gender. Iceland introduced such a provision into its Criminal Code in 2006 for any violence directed against a close relative, as had Luxembourg in 2003; the Netherlands permits a higher sentence for violence within marriage. France has had such a legal provision for spouses and cohabitants for many years, and extended it in 2006 to cover a wider range of offences and to include former partners as well as same-sex civil partnerships. In other countries, specific offences are introduced to penalise violence against a spouse or cohabitant, as in Portugal (2000), or violence in the family as introduced into the Penal Code of Slovenia in 1999; and in Norway in 2006 (spouses, household members, children or relatives in the direct line of ascent or descent). Slovakia has recently defined an offence of maltreating a close person or a person in their care or custody.

This trend towards gender-neutral penalisation of violence in the family seems unfortunate, since women are much more likely to need physical measures of self-defence within the home than outside it, and the new legal definitions are largely unable to address issues of self-defence. The provisions also leave many women unprotected, including all women who do not live with a man in a relationship similar to marriage; for example, in Ireland, a woman can apply for a protection order only if she has lived with the man for at least six months within the past calendar year.

An interesting alternative is offered by the Spanish Organic Act mentioned above, which generally sets for higher penalties when an act is committed as gender violence – defined as violence of a man against a woman with whom he is or has been married or linked in an analogous sentimental relationship, even without cohabitation. This is almost the only specific legal provision that clearly protects women who have not lived with the perpetrator (girlfriends, as well as those women who decide not to continue intimacy when a man shows tendencies towards domination or violence). The law exhibits a clear gendered understanding of the problem. But there can be concerns about defining women legally as weak or vulnerable, as in all protective legislation directed specifically at women.

The most promising strategy in my view has been taken in the UK. British law has a long tradition of considering aggravating circumstances in punishing acts such as assault. To some extent, all legal systems include such possibilities, but some give the judiciary more leeway to decide on appropriate penalties than others. In the UK, the Sentencing Guidelines Council has issued a definitive guideline for the penalisation of domestic violence, to which every court should refer. It defines domestic violence as ‘any incident of threatening behaviour, violence or abuse between adults who are or have been intimate partners or family members, regardless of gender or sexuality.’ As a general principle it states that offences committed in a domestic context should be regarded as being no less serious than the same offences outside the home. The guideline proceeds to define aggravating factors that should lead to a higher penalty. Thus, it is not marriage, the family, or gender that makes the act legally special, but a more complex measure of seriousness that can take account of gender-specific vulnerability.
Aggravating factors in this guideline are:
- abuse of trust and abuse of power
- victim is particularly vulnerable
- impact on children (exposure of children to the offence)
- using contact arrangements with a child to instigate an offence
- a proven history of violence or threats by the offender in a domestic setting
- a history of disobedience to court orders
- victim forced to leave home.

These factors capture the typical characteristics of relationships in which women are abused by male partners, without legally defining such abuse by sex. In particular, they include: power and control, isolation of the victim and exploiting her vulnerability (such as pregnancy, lack of independent income, language barriers), and repeated use of violence, as well as the fact that the victim goes to a shelter. These are all far more likely to apply to men’s violence against women than in reverse.

Further helpful provisions of the guidelines include a discussion of possible mitigating factors: in particular, ‘provocation’ should only be considered if it involved actual violence, including psychological bullying, and more so if it occurs over a significant period of time; this provision seems likely to serve women well when the man makes counter-charges. The guidelines also state clearly that sentencing should be determined by the seriousness of the offence and not by the wishes of the victim, because referring to her wishes both makes her feel responsible for the sentence imposed, and increases the risk that threats by the abuser will put her under pressure. This point is very poorly understood in many other countries when applying the legal frameworks; for example, in Germany our research found a deep-seated belief in the police and the prosecution system (most cases never even get to court) that they ought to accept what appear to them as the wishes of the victim.

The concept of aggravating circumstances has considerable potential as a means of effective and well-directed punishment as a deterrent to gender-based violence, if it is not linked to the notion of protecting the family. However, much work will be needed to communicate this understanding to policy-makers and to the institutions of the justice system.

**Implementing sanctions**

One of the most striking aspects in the evolution of measures on violence against women across Europe is the tendency to define sanctions without a great deal of discussion on how they may be applied. Strong laws are worse than useless if they are not applied. Many countries have reformed their rape laws, yet attrition rates for rape complaints – the proportion of cases that get “filtered out” of the criminal justice system – have also been rising. No systematic data are available from any country on the proportion of domestic violence offences that reach the courts at all, or that end in conviction. Research on files from the State Prosecutor’s Offices in Vienna and Salzburg during 2001 revealed that about half of the legal proceedings following bodily injuries were abated. A German study of preliminary proceedings in two different prosecution services (2004) also found that the majority of domestic violence cases were dismissed. In 95% and 81% of cases no court action was brought.

Put very simply, sanctions deter crime generally by conveying the notion that acts are wrong and socially not tolerated, and specifically by creating a reasonable expectation of punishment. Thus, most people do not rob a bank even if tempted, because (a) they think it is wrong, and (b) they expect they would probably be caught and the consequences be very unpleasant.
Violence against women is not like robbing a bank. It rests on a foundation of centuries in which men exercised violence towards women – towards ‘their’ women, towards ‘loose’ or ‘available’ women – with impunity. Men who batter or rape do not go to any great effort to conceal what they do, nor do they expect, if apprehended, that anything very unpleasant will follow. As long as they do not actually draw blood, they tend not to consider what they have done as being ‘violence’ 4, and are thus unlikely to assume that a law against domestic violence even applies to them. Women, on the other hand, mostly recognise acts that hurt and intimidate as being violence.

Legal sanctions for domestic or for sexual violence raise expectations among women, while having (at first) no significant deterrent effect on men, as long as they believe that their actions are not punishable. Raising the penalty level is, in itself, not very useful, since it does not increase, and may even decrease the probability that the penalty will actually be applied in any given case. The focus must be on ensuring (a) that sanctions will be applied, and (b) that men understand that their behaviour will give rise to such sanctions.

Here, the West Yorkshire model of police response to repeat victimisation is very promising, and has been assessed as effective. 5 In essence, it consists in identifying repeat offenders – i.e., men whose use of violence has led to police attendance previously – and establishing an automatic increase in the level of intervention with each repeat attendance. Each level of intervention – beginning with an official warning to the perpetrator and rising to court actions – is accompanied by a (standardised) letter explaining the policy and stating what actions could or would be taken. The model is based on early intervention, and provides an alternative to prosecution when the level of demonstrable harm is still low, yet communicates very clearly to the abusive man that his behaviour is unacceptable and both can and will result in sanctions if continued. As a result, the small proportion of chronic offenders, who are the most dangerous, can be filtered out of the numerous calls and be targeted for high attention and special protective measures.

Moving forward

There is a pressing need for all European countries to empower women, assist them to escape from violence within the family, and provide resources for advice and practical help. This requires establishing and maintaining woman-centred NGOs to provide assistance and services to victims. Without these, legal action against perpetrators is likely to fail, since women who are intimidated and humiliated will not be able to act as witnesses or to pursue a complaint. Training the police and enforcing high standards of intervention with respect to violence against women also need to be an integral part of the effort. These measures profit from the engagement of actors on site and ‘close to the ground’, bringing all stakeholders to the table to identify the most pressing needs for action, as well as developing potential for cooperation and designing programmes to fit the local circumstances.

In the longer view, the experience in many countries has been that no single measure is, by itself, effective. In recent years, the network approach has moved to the foreground, as can be seen not only in the UK and Germany, where there has also been significant evaluation research, but also, for example, in France, the Netherlands and Slovakia. There is a shift in focus from measures and programmes to developing community intervention strategies through interagency cooperation, beginning on a local level. They build on existing services, and on a growing awareness in statutory agencies of the crosscutting nature of the problem. Building cooperative programmes is a process that grows from strong roots in local conditions and human resources.

4 Hearn
5 Hanmer/ Griffiths

Comprehensive Strategies for Tackling Violence Against Women
We can today speak with assurance of standards for good practice. These are developments that have been put to the test in practice and that have proved their practical value across different countries and over time. To attain sustainable change, there must be possibilities for securing protection and imposing sanctions in all areas of the law and with respect to all forms of gender-based violence. A clear legal foundation and the political will to overcome, not to disregard gendered interpersonal violence is essential. Especially for domestic violence, each measure must be examined in the light of whether it increases the safety of victims and their children.

References


LIZ KELLY¹
WHAT A WASTE: THE CASE FOR AN INTEGRATED VIOLENCE AGAINST WOMEN STRATEGY

Introduction

‘How integrated can services and responses be ... can they be provided on the basis of need?’ (Bar- oness Scotland, address to Big Conversation on Sexual and Domestic Violence, Middlesbrough, March 2004)

This paper proposes that there are substantial benefits for government, for victims/survivors and for the entire community of an integrated strategy/approach to violence against women (VAW). The argument is based on five fundamental premises.

- There are connections across all forms of VAW, which are currently being ignored or missed.
- The costs – to women and girls and the public purse – of ineffective responses represent a waste of potential in both individual lives and for the community as a whole.
- Not only is the prevalence of violence and abuse serious – affecting at least half of all women over their lifetime – but it shows no sign of decreasing.
- The demand for support and services will remain at the current level or increase over the next five to ten years.
- Simply extending current forms of provision will have little, if any, impact on prevalence: preventing violence and abuse requires a more strategic approach.

The UK arguably has greater recognition of the range of forms of VAW at policy and practice levels and a more vibrant research culture than many other European countries. Unlike many of our neighbours, however, we do not have a Plan of Action or strategy against which to measure progress and achievements. A more strategic response would maximise benefits and enable the integration of a longer-term preventative approach. Moving on from the silo thinking that currently separates domestic violence, rape, female genital mutilation (FGM), trafficking and other forms of VAW would present opportunities to address seriously the question Baroness Scotland poses and offer considerable potentials for knowledge transfer. Whilst not underestimating the serious challenges developing such an approach represents, success would deliver a raft of gains for government, for agencies and service providers and for women themselves.

The most recent British Crime Survey (BCS) findings reveal that almost one in two (45%) women has experienced some form of domestic violence, sexual assault or stalking.² If we include sexual harassment and all the other forms of violence, this issue directly touches more than half of the female popu- lation.

¹ In cooperation with Jo Lovett
² Walby/ Allen
Mapping the connections

There are many connections that cut across all forms of VAW; some serve to sustain it, others indicate common impacts and consequences.

Three research studies with children and young people\(^3\) reveal that at the most basic level the majority of children and young people do not accept VAW, but when asked more contextual questions uncertainty and justification emerge, particularly among young men. An Irish study\(^4\) also found that young people had high levels of contact with harassment, abuse and violence in their own lives, including in the relationships with each other.

These data also highlight a further connection – who is first told or knows about VAW: this is not agencies, but friends, family and even neighbours and work colleagues. How informal networks respond can be critical in empowering victims to access support or may further entrap them in shame and self-blame. Equally, network members may communicate intolerance of actions to perpetrators or act in ways that further normalise their behaviour.

Other very important connections across forms of VAW include:
- long-standing myths and stereotypes that serve to justify or excuse abuse and/or to blame victims;
- the dynamics of power and control underlying violence;
- the social organisation of gender, which produces the distribution of victimisation and perpetration;
- high levels of under-reporting across all forms of VAW;
- the justice gap in relation to prosecutions and convictions;
- the long-term psychological, social and economic impacts and consequences;
- the extent of repeat victimisation in women and girls’ lives by both the same and different perpetrators;
- a historic failure of state agencies to respond appropriately, promptly or pre-emptively.

Paying the price

It is not just individuals who pay the price for ineffective responses, but all of us, not least in the sense that VAW costs substantial amounts to the public purse. A recent study in the UK only addresses domestic violence and estimates a yearly cost of almost 6 billion pounds.

Governments have minimal choice about incurring these costs to the public purse and the economy more broadly. However, where they can exercise control is over whether expenditure takes place within a policy framework directed towards more effective, integrated and preventative responses. There are short- and long-term savings to be made if interventions protect from subsequent abuse and/or the impacts of victimisation.

We pay an additional and unnecessary cost when service provision duplicates and/or fails to promote multi-agency links and coordination.

There are some costs and consequences that are incalculable. Here we refer especially to the trafficked women who are unable to access support in the UK, and to women asylum seekers whose claims on the grounds of having already been abused, or facing gender violence if returned, are re-

\(^{3}\) Burton/ Kitinger; Mullender et al.; Regan/ Kelly
\(^{4}\) Regan/ Kelly
fused. If they are returned to their countries of origin with little if any resources to resettle, develop a sustainable livelihood and create personal safety, their futures are anything but assured.

**Impacts of violence against women and children**

**Impacts on women**
The World Health Organization and the Surgeon General of the USA have identified VAW as one of the most significant factors in women’s ill health, and these impacts are compounded for those who suffer serial victimisations. UK policy, practice and training still tend to focus on domestic violence OR rape and sexual assault OR sexual exploitation, meaning few workers or projects are confident working across these boundaries. For many of their service users, however, this may be their most critical need.

The ways gender violence is understood, coupled with the humiliation of the experience itself, often mean that women internalise a sense of shame and self-blame. This is accentuated where the cultural context of a woman’s life includes beliefs about honour/purity/control of sexuality. It was partly to avoid the stigma which attaches to being a ‘victim’ of gender violence that led women’s organisations to use the term ‘survivor’ to highlight the strength, courage and creativity women display in adversity.

Even in the most extreme contexts it is a mistake to view women and girls as passive victims – they develop and use an extraordinary array of resistance and survival strategies. Nonetheless, victimisation has effects, many of which are long lasting. Research on the consequences of a range of forms of VAW reveals substantial commonalities, perhaps most eloquently explored by Judith Herman.5

There is no simple ‘recovery’ here; violence changes one’s sense of self and relationship to others. It is also a reinforcement of the gender order: an explicit message about the relative worth and status of women and men. But enhancing social support and the capacity of formal and informal responses to react appropriately could make a difference to a huge number of women, enabling them to ‘live’ rather than just survive.

**Impacts on children**
A key factor undermining implementation and delivery, here and elsewhere, has been the failure to make connections between VAW and child abuse/children. A few examples will illustrate this.

- All forms of VAW and child sexual abuse are under-reported, and where reports are made cases have extremely high attrition rates. Despite these connections, knowledge transfers across the sectors have been minimal.
- The connections between domestic violence and child abuse have been highlighted for more than a decade, including in virtually every child death enquiry. However, because the areas are not connected in law, policy and most service provision, the changes these insights should have prompted have not been easy to achieve.
- The underlying causes of, and social supports for, violence against women and children are common, and addressing them through awareness and prevention programmes has the potential both to be cost effective and to deepen understanding.6

Another connection, with many complex implications, is that most VAW and child abuse is committed by known perpetrators. In both cases, however, public policy tends to ricochet between an empha-

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5 Herman 1992
6 The Zero Tolerance Campaign did this throughout much of the 1990s, and much of its impact was thought to stem from the connections and cumulative messages.
sis on the family or strangers (the archetypal ‘rapist’ or ‘paedophile’). The majority of sexual offenders against women and girls are neither – they are neighbours, friends, work colleagues, recent acquaintances and a range of professionals (teachers, doctors, therapists, sports coaches).

Too many policy initiatives are built around the high profile minority. An example would be how a community safety order on a sex offender, which requires no contact with any children, could be enforced when an abusive father has been awarded contact in family court proceedings.

The failure to integrate what we already know – and we do know a lot about connections – in the formulation and implementation of policy is a significant impediment to change.

**VAW, human rights, discrimination and equality**

Violence has been a feature of women’s and girls’ lives throughout recorded history – it ranges from the cold, calculating entrapment in trafficking, to brutal rape by a recent acquaintance, through to the excruciating intimate violation by a family member. Over the last three decades VAW has been increasingly recognised not only as a public issue, but also a matter of justice and human rights. Former UN Secretary General Kofi Annan stated that VAW is ‘... perhaps the most shameful human rights violation, and it is perhaps the most pervasive. It knows no boundaries of geography, culture or wealth. As long as it continues, we cannot claim to be making real progress towards equality, development and peace.’

Looking at VAW from a human rights perspective alerts us to the ways in which gender violence denies women and girls the most fundamental of human rights: life, liberty, bodily integrity, freedom of movement and dignity of the person. It constrains women’s choices, options and behaviour since personal safety features so strongly in routine decision-making: is it safe to travel alone?, to walk alone?, to attend a meeting at night?, to challenge a statement or decision? Women and girls are not able to occupy and use public space with the same freedom and ease as men and boys and interpersonal relationships are frequently marred by the threat and reality of abuse. Access to resources, especially economic, can mitigate some of these restrictions, but no woman is entirely safe from violence. As a consequence women monitor their own behaviour and/or are often placed under surveillance by others. This has extensive consequences, limiting women’s participation and involvement in community and public life, their productivity and achievements in education and employment and, when they are victimised, etching their family and personal lives with pain and betrayal.

The human rights perspective also serves to make clear that VAW is not a private matter but one of public concern, meaning governments can be held accountable if they are seen to carry out or condone acts of VAW, or if they fail to take adequate steps to fulfil their human rights obligations to address the issue effectively, including prevention.

The 1995 Beijing Platform for Action (BPFA), which was drafted and signed by governments including the UK and most European countries, states that VAW is one of the major barriers for achieving gender equality; it addresses VAW as one of its 12 areas for concern, calling upon governments to ‘take integrated measures to prevent and eliminate violence against women’.

The BPFA set out specific steps that state signatories should take with respect to VAW, including the fundamental aim to ‘eliminate’ it, with express steps to be taken in the spheres of legislation, education, health, judiciary, social services and NGOs. Within this framework governments are expected to develop national action plans that take a holistic and multi-disciplinary approach.

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7 http://www.womankind.org.uk/violence-against-women.html
Current approaches in the UK

Government approach
Whilst Scotland, Northern Ireland and Wales do have policies and strategies, the focus has overwhelmingly been on domestic violence/abuse. That said, Glasgow City Council has built a VAW approach within wider gender equality frameworks, and the Scottish government is due to publish a VAW strategy imminently. The focus on domestic violence has grown over the last couple of years, with a number of women MPs becoming more powerful champions in parliament and Ministers for Women repeatedly citing it as a priority. On a smaller scale a noticeable shift has taken place in relation to rape and sexual assault and trafficking, especially in terms of legal reform, and some support for service provision. As a consequence three interministerial groups operated in parallel – on domestic violence, sexual offending and trafficking – alongside entirely disconnected developments with respect to forced marriage and FGM.

Whilst the increased attention and, in the case of sexual crime, far-reaching legal reform is welcome, developments have been piecemeal and lack coordination. Despite an apparent commitment to mainstreaming, specific references to gender equality, let alone VAW, barely feature in ministerial policy priorities or Public Service Agreements (PSAs) across government. The End Violence Against Women campaign has audited government responses across ministries for three years (2006, 2007, 2008). Whilst there are a myriad of ways in which VAW connects to current policy priorities, there are virtually no explicit recognitions of this in either high-level policy documents, or in the performance management framework the Westminster government develops for ministries and local government. Moreover, there are minimal references to gender equality across all government policy. One is courtesy of the UN Millennium Development Goals, which appear as aims for the Department for International Development. Most government departments do not see VAW as their concern, referring to the responsibilities of the Home Office – thus locating the issue firmly within a crime framing.

Some examples of the missed opportunities in recent policy developments include the following:
- The Drugs and Alcohol Harm Reduction Strategies does not fully recognise the extent to which alcohol is a factor in sexual offences, and the fact that drugs and alcohol are used as coping strategies in the aftermath of victimisation.
- The Department for Education and Skills has failed entirely to address the connections of VAW to children’s underachievement, the necessity of developing curricula for professional training, and the potentials for prevention through school and further education.
- The Ministry of Defence failed to link concerns about the behaviours of troops in other countries with data that suggest domestic violence and child abuse are more common within military families, and to develop a prevention curriculum within basic training.
- The Department for Communities and Local Government has developed a policy on community cohesion which neglects the ways in which VAW breaks connections with others, resulting in marginalisation of many women. Critically this policy has also neglected the ways in which gender divisions exist within communities; and an emphasis on ‘good relations’ between faith communities runs the danger of ignoring how religions can be implicated in resisting gender equality.

Within government few policy advisors appear to have sufficient understanding of the extensive ramifications of violence to make connections with wider policy issues, such as asylum, productivity, social inclusion and programmes designed to enable single parents to find sustainable employment. The impacts of interventions, therefore, are not as deep and long lasting as they could be.

8 www.endviolenceagainstwomen.org.uk
The voluntary sector

The UK VAW sector – refuges, rape crisis, helplines and advocacy projects, survivors’ groups – has a strong reputation internationally and has been the foundation of the moves to take VAW seriously. Whilst some groups have a strong campaigning focus, most have, at least in recent years, concentrated on developing and maintaining innovative service provision, in an arena where women continue to be poorly served. The absence of any policy regarding provision means services continue to remain deeply uneven – not just geographically, but in terms of covering all forms of violence – with the number of rape crisis groups in particular falling, rather than growing, in recent years.\(^9\) International human rights standards, including the BPFA, place a responsibility on governments to ensure that adequate support and protective services are available for all who need them. Whilst funding has improved with respect to domestic violence services (although there is still much unmet need), provision addressing rape and sexual violence, trafficking, FGM and other forms of VAW, particularly for vulnerable groups and Black and minority ethnic women, remains chronically under-funded.

Beacons lighting the way

There are a number of examples from current practice in the statutory and voluntary sectors that can act as signposts, or beacons, illustrating the benefits of making connections. Indeed, the Women’s National Commission (WNC) VAW Working Group is a case in point. It is now a strong advocate for a more integrated approach and its participative membership – across the nations and regions of the UK and forms of VAW – demonstrates that it is possible to work with a wider agenda in ways that everyone benefits. Similarly, the European Women’s Lobby has had a VAW project in Brussels for six years. It, too, began with a focus on domestic violence services but has since deepened its understanding and perspective and is now a powerful voice in EU debates about trafficking and the sex industry.

The boxes below contain examples from the national statutory, local authority and service provision sectors, each of which demonstrates the benefits of a more integrated approach.

**National policy and practice development**

The prosecution agency in England and Wales, the Crown Prosecution Service, published its VAW strategy in 2008. The policy was developed with a group of stakeholders, including women’s NGOs, and extensive consultation. The document draws on UN definitions and frameworks for basic principles, and the policy is located within the equality and diversity directorate.

Part of the policy development included looking in far more depth at the agencies’ own data – and finding areas that needed improvement. A number of goals for improvement are set, including enhancing effective prosecution of cases. Implementation of the policy includes ongoing engagement with stakeholders.

Thurrock Violence Against Women Alliance demonstrated an innovative combination at a local level, and the commitment of South Essex Rape and Incest Crisis Centre in the voluntary sector produced a local commitment not only to address VAW, but also to using gender mainstreaming methodology. However, since national government policy at the time (2004) did not support this move the alliance was short-lived. Nonetheless, it illustrates yet to realise possibilities in multi-agency partnerships.

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\(^9\) The exception here is Scotland, where a ring fenced funding stream has increased the number of rape crisis centres by four since 2003.
Local and interagency work: Thurrock Violence Against Women Alliance, Essex

Originally a domestic violence forum, this multi-agency group widened its vision and brief primarily due to the tireless engagement of South Essex Rape and Incest Crisis Centre (SERICC).

The Violence Against Women Alliance (VAWA) was established in 2001 to replace the Thurrock Domestic Violence Panel, informed by a government recommendation that ‘domestic violence forums should be replaced by violence against women forums by 2002’. For the first time sexual violence was not an ‘add on’ and VAW was progressively mainstreamed into core council and institutional programming.

For example, the Joint Investment Plan on VAWA set out the following objectives:
- to protect women who are experiencing, or who are under the threat of, violence by changing their circumstances so that the violence or threat is removed;
- to prevent VAW by challenging and changing attitudes towards women experiencing violence;
- to prevent VAW by targeting groups and individuals most at risk of violence;
- to enable women to rebuild their lives and those of their dependents following crisis resolution;
- to develop systems and attitudes that enable women and children who are in violent situations to survive emotionally and physically;
- to prevent VAW by targeting groups and individuals most at risk of perpetrating VAW.

Glasgow City Council, through its gender equality work, has always taken a VAW approach, including being one of the earliest and most sustained supporters of the Zero Tolerance awareness raising strategies. What we highlight here is their innovative work around prostitution and the sex industry, which prefigured the recent government review on prostitution policy.

Glasgow City Council: Including prostitution and sexual exploitation

Prostitution is a significant social problem in Glasgow, affecting women, families and communities. The strategy developed in Glasgow to tackle prostitution and other forms of commercial sexual exploitation began in May 1998 with the recognition that the issue must be addressed within the context of gender equality. The Council rejected the view of prostitution as choice or work since prior experiences of abuse, violence and coercion whilst involved, poverty and drugs were seen as the roots of prostitution in Glasgow.

The Routes Out of Prostitution Partnership, established in July 1999, comprises three core elements:
- a citywide partnership with a remit to develop a strategic approach to the issues of street prostitution;
- a small, specialist intervention team to assist women wishing to exit prostitution;
- a commitment from all partners to reviewing their services in the light of the citywide strategy, and to adjusting services to be more accessible and more responsive.

Interagency work addressing indoor prostitution, the proliferation of lap dancing establishments and trafficking has also taken place, again within the context of gender equality and addressing VAW more broadly.

Southall Black Sisters have played an inspirational role in the UK voluntary sector for two decades, demonstrating that it is possible to combine local service provision and acting strategically at regional and national levels.

Southall Black Sisters

Southall Black Sisters (SBS), founded in 1979, combines service provision for Black (Asian, African and Caribbean) women and campaign work. It provides integrated services, including information, advice, advocacy, counselling and support. SBS is so widely known because of its campaigning...
and policy work on violence against Black women. Although the majority of service users are South Asian women experiencing domestic violence, SBS assists women suffering all forms of VAW, in both the private and public spheres, including sexual assault, harassment, forced marriage, dowry-related abuse and honour crimes.

SBS has been at the forefront of developing policy on forced marriage and honour-based violence, and has run a number of campaigns to change government policy, which under the ‘no recourse’ rule denies recent immigrants access to financial and welfare support. This discriminates against a group of vulnerable women experiencing violence, in denying them the same rights to support and protection as the majority community.

**Women’s Resource Centre, Middlesbrough**

Originally a domestic violence outreach service, the Centre expanded by involving a number of rape crisis workers to ensure that sexual violence issues were integrated into the service provision. They also support adult survivors of child sexual abuse. The Centre now functions as a ‘one-stop shop’ for women who have experienced sexual or physical violence across a range of contexts.

**Creating an integrated approach**

The basic contours of an integrated approach must, in the short term, support and empower women and girls and ensure sanctions for abusive men, whilst over the longer term seeking to reduce and ultimately end violence. All of these tasks require countering the legacies of permission, justification and victim blame. Achieving this, and widening the focus beyond domestic violence, will require a strong steer from the centre. The UK, through its support for the Beijing Platform of Action, has committed itself to creating a Plan of Action, which would be the clearest and simplest way to move forward. There are various examples from other countries, from which elements and lessons could be learnt.

- Australia, Austria and Germany have aspirational documents which, whilst short on specific steps, make clear philosophical statements linking VAW to wider gender equality policies.
- Norway and Finland have had strategic plans: the former is a renewable three-year plan focused on domestic violence; the latter a broader five-year action plan with a linked research and documentation centre.
- The USA has used its renewable Violence Against Women Act for ten years to develop and steer public policy through setting new targets for national roll-out and providing matched funding for local areas or agencies that pick up the challenges.

Whatever approach is taken in the UK, the basic aims could be:

- to improve responses in the short term within a framework that seeks transformations which will decrease and ultimately end VAW;
- to provide stepping stones and create templates for implementation at local and regional levels within the duty to promote gender equality.

The kind of integrated strategy envisaged here would enable:

- more coordinated and consistent government policy;
- better knowledge transfer across the sectors;
- more effective use of limited financial resources;
- the possibility of linked training, including a core curriculum for all professionals;
- a coherent, integrated long-term approach to prevention;
the possibility of mainstreaming neglected and under-resourced issues, such as trafficking, exploitation in the sex industry and FGM.

In terms of national government it would provide a series of benefits and opportunities:
- to give a strong policy steer across the range of forms of violence faced by women in the UK;
- to redress the current/historical focus on domestic violence;
- to provide a clear philosophical framework and a vision of a future in which gender violence no longer exists;
- to be in full, rather than technical, compliance with UN and EU commitments/policy;
- to set markers/standards for provision and responses, including the possibility of services on the basis of need;

Towards an integrated approach

An integrated approach to VAW in all its forms should begin from a clear vision/overall statement: Ending Violence Against Women – Creating Equality and Social Justice; Delivering Human Rights.

This sets the long-term ambition in line with UN and EU policies, makes explicit that prevention is a key element in the approach and underlines that delivering it requires gender equity. A series of critical shifts in perspective and response need to be highlighted:
- from domestic violence to VAW;
- from reactive to proactive responses;
- from making do to providing quality services;
- from margin to mainstream;
- from responding to preventing.

The term 'integrated' is central to the strategy and as a minimum refers to the following:
- addressing all forms of VAW simultaneously, thus combining the currently disparate interministeri-
al initiatives;
- highlighting connections between forms of violence and abuse, not least in terms of their underly-
ing causes, short- and long-term impacts;
- mainstreaming VAW into all relevant areas of government policy;
- encouraging and enabling integration in specific policy areas like prevention and public awareness and in activities such as interagency forums.

The VAW sector has provided a response to and critique of the then government initiatives on VAW in the CEDAW Thematic Shadow Report on Violence Against Women. Many of the respective headline areas have already been addressed in this paper, but some offer additional elements from which to build an integrated approach:
- locating VAW centrally within efforts to create gender equality (as is the case in many other Euro-
 pean countries);
- developing a stronger link to human rights principles, as they apply to victims, in the private as well as the public sphere;
- addressing attrition in the criminal justice system in a coherent and coordinated way;
- devising strategy, in partnership with other key actors, to secure and aid development in the spe-
cialist NGO sector;

10 Sen and Kelly 2008
developing strategic interventions and priorities, mainstreaming what we already know to be good practice and ensuring that wherever women live, and whatever additional needs they may have, they have access to quality and effective services;

- enhancing knowledge through concerted efforts and dedication of resources to data collection. The current knowledge base is insufficient to enable assessment of the success or otherwise of government policies, not to mention that effective intervention requires more sophisticated analysis of the contexts in which VAW occurs, and the impact that it has on women, their families and communities. There is a critical need to understand better the needs of vulnerable groups of women, including disabled women, older women and women from diverse ethnic and cultural backgrounds. It is also necessary to look at patterns of offending, how violence is located in contemporary gender relations and the links between perpetration of different forms of abuse;

- placing VAW within foreign and development as well as domestic policies.

This proposal is a significant departure from previous approaches. In particular, it recognises that:

- achieving women’s equality requires addressing violence;
- all forms of VAW are connected, and have the same underlying causes;
- these are not only individual experiences of victimisation, they also have a gendered pattern;
- victims need support, advocacy and redress; perpetrators must be held to account;
- national and local governments can and should take a leading role in seeking to prevent (in the word of the UN ‘eliminate’) violence against women and children.

VAW is currently everywhere and nowhere in terms of public policy. An additional gain from an explicit national strategy would be a connected sector across voluntary and statutory service providers, which could be recognised through a National Service Agreement. Whether in this format, or another, the strategy should also include:

- an implementation plan with timescales, roles and allocated resources;
- mechanisms for ensuring trickle-down of proven good practice into local service provision;
- a framework for monitoring change;
- an oversight body, which is not part of government, which would review progress, learn from international examples, conduct the regular reviews of the legislative framework required by the BPFA and make recommendations.

References


Violence against women: From feminist issue to state concern

Violence against women is a subject of history in the making. It was only in the early 1970s, during the second wave of the women’s movement, that a feminist analysis of violence against women was developed. Violence against women was no longer considered simply as an individual deviancy but as a widely prevalent social problem, influenced by a complex of social, cultural and personal variables. It was recognised as intrinsically related to gender inequality and abuse of power, manifesting itself through violent abuse. Violence against women was put on the political agenda as an issue that deserved public concern. Needless to say that initially this perspective was not uncontested. But in the past thirty years a historic paradigm shift has taken place. It is now accepted as common knowledge that violence against women is a huge social problem that calls for a collective response, not only of civil society but also of the State. Domestic violence affects a central public value in society that is of concern: safety and security in the community at large. Therefore violence against women has become a government issue. If the well-being and physical integrity of a large number of fellow citizens is chronically and structurally endangered in their home and family, the very place where most people expect safety and security, then society has a serious problem and governments have the moral, political, and social responsibility to address it effectively.

In accordance with the initial politicisation, nowadays domestic violence is generally considered as a gendered phenomenon. Most measures primarily focus on the protection of women and children and the treatment of male perpetrators.¹ It is the gendered nature of partner-related violence that distinguishes domestic violence from violent crime in general. The defining relational characteristic of domestic violence lies in the intimacy and/or dependency between the victim and the perpetrator in the private domain. The gendered power differentials that are inherent to heterosexual intimate relationships have far-reaching implications for the kinds of interventions, both penal and non-penal, that are needed to effectively protect victims, punish perpetrators, carry out preventative measures and develop supportive and empowering interventions to help victims overcome the abuse.

Politics, policy and the need for data

This introduction did not contain any news for the experts in this field. The question then is: why mention it when making a case for the need for research? After all, in discussions among and between

¹ Although the reliability of prevalence data on physical abuse of male partners or ex-partners committed by women is a recurring theme, leading researchers and policy makers agree that such violence, to the extent that it occurs, is far less serious on average than partner violence against women.
policy makers and practitioners, the focus is usually placed on the question of what to do. The search for effective interventions is high on the agenda. So how does the need for data fit into this picture? Why spend money on research, which often takes a long time (at least: too long from the perspective of a practitioner who wants and needs answers sooner rather than later), and which provides answers that some of the practitioners assume (sometimes rightly so) that they knew all along? What is the added value of research for practitioners?

It can be argued that the historical introduction I started out with is already testimony to the importance of research. That introduction could not have been presented as a virtually uncontested account without research data to base it on. It is thanks to research that a politically inspired claim became an empirically founded and theoretically underpinned analysis as presented above. That has been crucial for the successful transitioning of violence against women from a political fringe subject into an issue of state concern. Domestic violence has entered mainstream politics and policy development.

In that domain, scientific knowledge has become indispensable in order to argue convincingly why violence against women is indeed a matter of public concern, where the government should take responsibility. In the 21st century, society in all its domains has become more information-based than ever. The growing importance of monitoring and evaluating the performance of organisations, as a feedback tool for both internal management and external policy development, testifies to this development. We all want to know what we are doing and what it leads to, we want to develop evidence-based interventions and policies. The standard for what counts as evidence, what counts as reliable information as a basis for policy that can guide us towards the future, is high indeed. Scientific research fulfills a crucial role in this respect, since it aims to systematise information and produce knowledge that is reliable, neutral and analytical. Scientific research can produce information that also serves a public interest: to support a claim for public funding. It was research, both national and international, that convincingly demonstrated the widespread prevalence of domestic violence and its social and health impact for battered women and children, and this, without doubt, supported the development towards recognising the need to invest public money in shelters and in interventions to combat violence against women.

It is obvious that solid research data serve the needs of both policy developers and practitioners. Policy makers need to be properly informed to be able to develop evidence-based policies. This in itself is in the interest of practitioners in the field as, after all, they are at the receiving end of the policy makers’ decisions on whether or not to fund the institutions’ work. Having access to reliable performance data is crucial for any institution in order to strengthen its case in times of increasing competition for public money. Furthermore, scientific research is in the interest of improving the quality of the services delivered and the level of professionalisation. The latter has rapidly developed over the past thirty years. If we compare the autonomous women’s shelters run by volunteers, to the professionally run shelters nowadays, with a variety of interventions available to women, children and the violent perpetrator, we have come a long way. This would not have been possible without research, which provided the systematic feedback and permitted the development of evidence-based interventions.

What kind of data do we have and what do we need?

In general two basic kinds of data can be distinguished: population-based data and data from selective samples of respondents. The first usually refer to population surveys, conducted to obtain core statistics regarding violence in the home, or domestic violence. These data are important because they provide reliable data that can be generalised and that are valid for the wider general population, and therefore they are indispensable for policy development. Research that is based on a sample that
is representative of the population, without making a selection in advance of who is victimised, can provide a wider sociological picture about prevalence, nature, determinants and consequences of violence in private relationships. In many West European countries, Australia, Canada and the United States, such data are available. Austria so far has not conducted any population-based survey in this field.

In the second category – based on selective samples – a distinction is made between clinical studies (conducted among respondents who turned for help to mental health care, educational, social work, or medical health care institutions), criminal justice studies (among respondents who were in touch with the criminal justice system: police, prosecutors, courts) and multi-disciplinary intervention studies. All of these studies are based on selective samples of respondents who sought help from one of the institutions, and sometimes compared to data from a control group of respondents who have not required any intervention. The research questions usually concern the dynamics of violent relationships and the nature and dynamics of the professional interventions and/or their effectiveness (what works, why and how?).

In both respects, i.e., population-based surveys and intervention-based studies, more research is needed indeed. Too many questions remain unanswered regarding both prevalence (certainly in Austria) and effectiveness of interventions. Population surveys will be needed if reliable prevalence data are to be obtained whose results can be extrapolated to the population. Reliable population-based prevalence data are very important for the professional field since they offer the hard facts that many policy makers as well as politicians rely on when setting budgetary priorities. Without these data, the field is vulnerable when it has to compete with other social problems that are in need of governmental funding.

Regarding the effectiveness of interventions, these kinds of data are crucial for deepening the understanding of the complex dynamics and consequences of chronic violent victimisation and for developing effective interventions that can fully address these complexities. Only with the feedback from research data is it possible to continue to improve the level of professionalism.

Scientific research is usually based upon data collected by external researchers (universities, research institutes) and rarely by agencies themselves, since their focus obviously is on delivering the intervention services. In the context of today’s conference I will focus on the importance of agency-based data systems and the role and responsibility of agencies in collecting information that is also relevant for research.

The importance of agency-based client data systems

Agency-based data systems refer to the data that agencies and institutions themselves collect for their client record systems. In most cases these data are used for internal monitoring and evaluation purposes, but they have a much wider relevance. Data on efficiency and effectiveness go beyond internal monitoring and evaluation, and clearly have an external relevance at local or even national level. In this respect, reliable data on the Austrian interventions under anti-violence laws are very important and can serve as exemplary information for other countries. On a descriptive-evaluative level, agency-based client records can be used to answer several kinds of questions regarding the capacity of the institution in relation to demand, adequacy of service provision and quality of services, all of which are of high relevance for policy development and for the development of the professional field.

Capacity issues: how many women turn to agencies? What size of workload does domestic violence entail for these institutions? From an organisational perspective, these data provide information on the extent and the relative proportion of the workload that domestic violence actually generates for institutions. It highlights capacity issues, which is necessary to substantiate the need for funding. Note that capacity data are often confused (also by policy makers) with prevalence
data. The number of clients in a shelter, or number of victims who turn to the police, are no more than a limited indication of the extent of the problem in the population. After all, these figures only reflect who asks for help. They represent the proverbial tip of the iceberg. Agency records, strictly speaking, provide internal prevalence information on the extent that the agency in question has come across the effects of violence. Although the reliability of registration systems, notably those of the police, is expected to improve over the coming years, attempts to extrapolate data from agency-based registration systems to the general population (via statistical techniques like capture-recapture analysis) can only provide useful results when the underlying registration systems produce more reliable data.

- Adequacy of existing provision: this directly relates to several core issues regarding both internal efficiency of organisations and client-oriented external adequacy of services offered. What kind of help do the victims need and what kind of help can the agencies offer? What are the discrepancies? Where are the gaps?
- Quality of services: this requires a more sophisticated and self-critical mode of data collection. It depends on an operationalisation that should ideally be based upon a mix of objective and subjective indicators of quality or success (for example, time spent, result of interventions, client satisfaction, reduction of symptoms, reduction of recidivism, et cetera).

I would like to end with an appeal to the agencies to help actively to reach the goal of doing better research by investing time and effort in developing and maintaining reliable agency-based registration systems. Much remains to be done and it is in the agencies’ own interest to gather information systematically in such a way that it can indeed serve both professional and academic purposes. Researchers and practitioners certainly share not only interests but also responsibilities.

**Politics of research and responsibility**

I certainly do not just want to present a rosy picture, as if research were the panacea to hesitant policy makers or reluctant politicians. As much as recent history underlines the political importance of research in the field of violence against women, it has also shown that the call for research can be used to postpone active policy making (‘first we need data’, often meaning: we need statistics, the ‘hard facts’). Even worse: we all know the infamous examples of research reports that eventually end in a drawer or are put aside because of a change of government and/or change of political minds. However, acknowledging the politics of research does not diminish the value of research. The consequence of entering the arena of mainstream politics is that the area of violence against women will be part and parcel of complex political dynamics and political whims. This is a social and political reality which requires that those involved remain alert. In the end, research-based knowledge is an important source of power, including political power. Even though it is never a guarantee for success, without scientific research it will be even harder to convince reluctant policy makers or politicians.
Violence against women is a topic that is covered by the media almost every day. The corresponding news and reports very often deal with domestic violence against a partner, forced marriage, acts of violence committed ‘in the name of honour’, persistent stalking and similar cases.

Committing violence always is a demonstration of power in order to disguise weakness. In the domestic sphere, its victims are women and children, who suffer from threats and injuries resulting from violence. This damage is unacceptable for any society.

In order to maintain social cohesion, we need strong individuals in good social structures. Social cohesion, i.e., both societal and family structures, can only be enhanced sustainably if the individuals involved are strong. It is people who are exposed to special risks, discrimination or violence who need particular protection. We have to stop the cycle of discrimination and violence.

Protection against violence as a part of equality policy

A central prerequisite for equality is to ensure that everybody may live without fear of threats and violence. Therefore, protection against violence continues to be a central aspect of Germany’s equality policy also in the 21st century.

We would like to see strong women, and also strong men, who want to live in relationships with women on a basis of equality. In the environment of such partnerships, eventually confident children may grow up, who will not run the risk of becoming victims – or perpetrators.

Combating violence against women is an aspect of gender equality policy – and of family, child and youth policies that permit the safe growing up of children in an atmosphere of well-being.

What steps has the German Federal Government taken so far?

The first Plan of Action

On 1 December 1999, the (then) Federal Government adopted the first Plan of Action to combat violence against women. By September 2004 all Federal measures that had been planned were completely implemented. This includes

- the Protection Against Violence Act, modelled after the corresponding Austrian act;
- networks and intervention projects against domestic violence;
- practical guidelines for medical staff in hospital who have contacts to victims of domestic violence;
- the Act on Non-violent Upbringing.
The two Federal-and-State Government Working Groups on Domestic Violence and on Trafficking in Women, headed by the Federal Ministry of Women, are examples of good cooperation between state governments and non-governmental organisations.

All States, upon recommendation of the Federal Government, have adopted their own Plans of Action or programmes for measures in this field. However, this is not enough, and further steps are required. Rejection of violence is one of the central values of human coexistence. Acts of violence restrict human beings in their development and in their way of life, and represent a massive burden for future generations as they increase the probability of becoming a victim.

A high percentage of women, of all age groups, classes and of different ethnic origins, are affected by violence in the course of their lives. This has become apparent in the representative survey on the situation in life, safety and health of women in Germany¹, drawn up on behalf of the Federal Ministry of Women, and for which more than 10 000 women between 16 and 85 years were interviewed. This means that violence against women is not a side issue but is committed in our midst, and to a high extent. For this reason, violence must be prevented and averted also in the centre of society, on a basis of cooperation among all stakeholders. Here all levels of government – federal, state and local – have to take action.

The second Plan of Action

The continuation of the Plan of Action was announced in the Coalition Agreement of the two Government parties, and the Federal Ministry of Women again took over a coordinative function. The second Plan of Action² focuses on fields where specific need for action was identified after the first Plan of Action, for instance, measures targeting women of immigrant families, women with disabilities, and as clients of the health care sector. Other themes of relevance include prevention at the earliest possible stage and an effective connection of protection measures for children, young people and women.

Plan of Action II addresses all forms of violence against women and includes more than 130 measures which Germany’s Federal Government is obliged to implement. These measures comprise 10 fields:

- prevention
- adoption of federal statutes
- support systems for the assistance and counselling services for women experiencing violence
- federal network of support systems
- cooperation between government institutions and non-governmental support services
- measures targeting perpetrators
- qualification and awareness raising
- research
- European and other international cooperation
- support services for women abroad.

Because of the federal structure of Germany’s administration, the competence of the Federal Government is restricted to measures within its remit. Therefore any measures within the jurisdiction of the federal states (e.g., with regard to the police force, schools or support services) have not been listed here: they can only be initiated by the state governments.

¹ IFF/ infas
² Aktion plan II
Current challenges

I will describe a number of challenges that have to be met at present and give one or two examples in each case of measures planned by the Federal Government.

Better protection of immigrants affected by violence

Women and girls of immigrant families, to a large extent, are affected by specific forms of violence. According to a representative study drawn up on behalf of the Federal Ministry of Women, women of Turkish or East European origin experience physical and sexual violence significantly more often than Germany's average female population. In addition, they are more often affected by severe forms of physical and sexual violence.

Forced marriage, a serious violation of human rights, is a specific form of violence against women and girls of immigrant families. Primarily, girls aged between 16 and 21 are the victims of this type of violence, which is not restricted to Muslim environments, however. Also non-Muslim young women of families with social problems are often affected.

Therefore, the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth, among other measures, will support a model project to extend the online counselling services for young immigrants who are in danger of, or affected by, forced marriage and other forms of domestic violence. This project will also include counselling services for the friends of these girls and women as well as professional providers of support and multipliers. In addition, better links to other support services will be built (Chapter 1, on prevention, and Chapter 3, on support systems, of Plan of Action II).

A stronger focus on women with special needs

In the first Plan of Action, women with disabilities were taken into account only selectively. However, as a result of a general paradigm shift in policies, towards independent ways of life for women and men with special needs, the issue of violence against women with disabilities has become increasingly important – also thanks to the activities of political associations who represent the interests of women with special needs and receive funding by the Federal Ministry of Women.

In most cases the offenders are found in the immediate social environment of the women concerned. Abuse and sexual violence are frequently committed by givers of intimate personal care, who often make use of the situation of dependence of people with special needs. Violence in this context is also facilitated by the fact that many women with disabilities lack self-confidence, and because often they have never learned to set boundaries.

So far, no data are available on the actual extent of violence against women with disabilities committed in the context of close social relationships. Women with special needs who live in institutions also need contacts to people who may help them and back their concerns.

In order to obtain reliable representative data in this field for Germany, the Federal Ministry of Women plans to award a contract for a scientific study on violence against women with special needs (Chapter 8 on research).

In addition, the support services for people suffering violence will further be improved by employing women's agents in vocational rehabilitation centres. According to a feasibility study by the Federal Ministry of Women, the establishment of women's agents has considerably contributed to the prevention of violence. The next step will be to test the performance of certain tasks, in particular also in the field of prevention of violence, in the context of a model project (Chapter 1 on prevention).
**Start with the children: Prevention as early as possible**

The representative study on violence against women in Germany has shown that physical and sexual violence experienced during childhood and adolescence and violence in the family of origin is a central risk factor for victimisation as adults.

For instance, women who during childhood and adolescence witnessed physical fights between their parents tend to become victims of violence by (ex-)partners twice as often as women who have never seen violence between their parents. For women who, during childhood and adolescence, became victims of frequent or intermittent physical violence by parents or people taking over the roles of parents, the risk of becoming a victim of violence by their partners later in life is three times as high as for other women. Women who were sexually abused before their 16th birthday become victims of domestic violence by a partner in adult life twice as often, and they become victims of sexual violence four times as often. This shows what massive long-term effects on adult life violence experienced during childhood and in the family of origin actually has.

It is essential to take effective protection measures starting at an early stage for boys and girls, and specific efforts are needed in this field.

- The Federal Ministry of Women prepared a programme on early support for parents and children and social early warning systems in order to be able to identify at an early stage any risk for children, in particular regarding domestic violence, and thus to prevent detrimental effects on their welfare. The goal of the programme is to improve the protection of children from neglect and abuse, in particular by enhancing the parenting skills of mothers and fathers. A specific focus will be placed on the target groups of infants approximately up to the age of three, on pregnant women as well as young parents in difficult situations. In view of the rapid development steps that babies and infants make and their great vulnerability, it is essential to identify risks in the domestic sphere as early as possible and to provide adequate assistance immediately.

- Pregnancy and the perinatal period are stages in life where young parents usually receive medical care and treatment and tend to be especially open to counselling services that are offered. However, in a few cases it is especially during this time that the first acts of violence, or an increase of violence by the partner, occur. In order to establish contacts to families at this stage and to be able to rely on interdisciplinary knowhow, it is necessary to have good links between the health care system, child and youth welfare services, child and youth health care services, pregnancy counselling centres and women's support organisations. For this purpose, a joint project of the Departments of Youth and of Equality will be started (2008/9) (Chapter 1 on prevention).

Children and parents may easily be addressed also in school settings. The following measures regarding prevention of domestic violence have been planned for school contexts:

- The Federal Ministry of Women will promote the scientific monitoring of Berlin's BIG model project on cooperation between schools and youth welfare services in cases of domestic violence. This project is the first of its kind in Germany that tests procedures at the interface between schools and youth welfare departments aimed to prevent domestic violence and to support the children concerned as well as their parents. This also includes the corresponding qualification schemes for experts in schools, welfare departments and youth social work (until March 2008).

- The next step will be to present during a large expert event the results of the project as well as other proven prevention measures in school settings, so that they may be included in prevention activities of schools throughout the country (scheduled for summer 2008). Then, in cooperation with the target groups, we will examine what forms of concrete support the Federal Government may provide within its remit (Chapter 1 on prevention).
**Activating the health care sector to protect the women concerned**

Violence is one of the central risk factors for women’s health. This has been established at international level in the respective report of the World Health Organization (WHO) of 2002. The representative study of Germany also shows that most women have suffered physical or psychological trauma at least once in life; and all forms of violence have health-related, psychological or psychosocial effects, which may be massive in a number of cases. Therefore the Federal Government regards it as an essential point to provide the best possible medical treatment and care for the women concerned, by facilitating access to health care services. The health care sector, and in particular the professional group of physicians, also play a key role with regard to the provision of institutional support in and after situations of violence.

As a consequence the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth, in the context of Plan of Action I, supported the scientific evaluation of a health intervention programme in hospital settings.

- In order to take into adequate account the complex role that physicians play for improving the situation of women experiencing violence, a new project will be started with the focus on General Practitioners. In recent years, several states and public corporations (e.g., state medical associations) have developed various programmes aimed at awareness raising and qualification of physicians and skilled health care staff so that they will be in a better position to identify violence as the cause of health problems of patients and to be able to treat women affected by violence accordingly. However, these comprehensive programmes have not yet been fully implemented in practice. In this situation, the model project assisting established doctors in the identification and documentation of as well as adequate responses to patients suffering violence will help to combine at federal level effective approaches and good practices and to find good locations that are to serve as models for tests in the context of the project (Chapter 3 on support systems and Chapter 7 on qualification and awareness raising).

**Providing low-threshold and easy access to support systems**

The representative survey on the situation, safety and health of women in Germany has shown that women are affected by various forms of violence; they do not fit a single victim’s profile, they come from different social environments and different situations in life. Therefore, also their need for support, assistance and protection is heterogeneous. What is needed is a diversified support system that includes women's shelters, safe apartments, phone helplines, women's counselling centres and intervention centres. Also providers of general counselling such as marriage and family counselling services are contacted by women who have experienced violence.

However, surveys in this field have also shown that an overly large number of women affected by violence are not addressed by the existing support system, or not early enough. Thus, there is a need for low-threshold anonymous counselling services that are easily accessible. This is especially important for women who, for various reasons, face particular difficulties turning to the existing support centres: for instance, immigrants, women with special needs, victims of trafficking in women, girls threatened by forced marriage or FGM (Female Genital Mutilation).

- For this reason, the Federal Ministry of Women considers to establish a nationwide emergency phone helpline where initial counselling is provided to women affected by any form of violence. If further help is required, the women may be referred to local organisations and focal points. Such a phone helpline should be a complementary service that has to be adequately integrated in a network of effective support services. Now, at the preparatory stage, expert opinions are drawn up to investigate questions relating to organisation, funding and tasks to be performed (Chapter 3 on support systems).
The projects mentioned are but a few examples of the Federal Government’s policy programme on combating violence against women.

The Federal Government expects that the adoption of the new Plan of Action will also encourage state and local governments to continue and intensify activities within their areas of competence to combat violence against women, and that the cooperation between public agencies and non-governmental organisations as well as associations will effectively back the objectives of Plan of Action II.

The Plan of Action also is a social signal. In addition to improving the system of protection from violence, a central point is to empower women and children so that they may lead lives free of violence and fear, and assert their rights. And it is a sign that encourages people not to put up with violence but to take active steps in order to prevent and combat it. Because – as Greek philosopher Sophocles put it, ‘Heaven never helps those who will not act’.

References


In the UK we have a Cross Government Action Plan on Sexual Violence and Abuse, an Action Plan on Tackling Human Trafficking and a Prostitution Strategy. Next year all of these pieces of work are going to come together underneath an action plan on tackling violence.

**Key statistics**

With one in four women being a victim of domestic violence at some point in their lives, one incident of domestic violence is reported to the police every minute. Shockingly two women a week are killed by a partner or a former partner. Domestic violence is categorised in the UK as a volume violent crime, comprising 15 to 25% of all violent incidents. 30% of domestic violence start to escalate during pregnancy.

**Action since 1997**

Domestic violence has been moved up the political agenda. Since the government change in 1997 it has become an increasing priority at ministerial level. A ministerial group on domestic violence was formed which up until recently was chaired by Baroness Scotland and is now chaired by Home Office Minister Vernon Coaker. This group, which meets quarterly to progress the National Delivery Plan, will in the future also address the issues of sexual violence and prostitution to become a group on interpersonal violence in order to give more of a holistic guidance to our work. We have also had important changes in legislation: the Female Genital Mutilation Act (2003), the Domestic Violence, Crime and Victims Act (2004), the Forced Marriage (Civil Protection) Act (2007), and the National Domestic Violence Delivery Plan which started in 2005 and has been guiding our work up until now.

Under the Domestic Violence, Crime and Victims Act, England and Wales made it a criminal offence to breach a non-molestation order. Same sex couples, cohabiting couples and couples who have never cohabited are now eligible for non-molestation orders. This has taken account of diversity in the recognition that domestic violence may occur in all relationships. When fully implemented, the Act will also enable courts to impose restraining orders for any offence (or even on acquittal) and will place the conducting of homicide reviews on a statutory basis.
Key outcomes of the National Delivery Plan for Domestic Violence

The aims of the National Delivery Plan have been to:
- reduce homicides related to domestic violence;
- reduce the prevalence of domestic violence;
- increase reports of domestic violence;
- increase domestic violence offences brought to justice;
- ensure that the victims of domestic violence are adequately protected and supported.

Progress to date

- Going back to the 30 percent of domestic violence that start to escalate during pregnancy, we’ve now initiated routine enquiring on domestic violence in all maternity services.
- Domestic violence is considered in all children who are assessed by children social services under the Common Assessment Framework.
- All police and Crown Prosecutors are to be trained by 2008. All police forces now have high ranking DV champions to really push the domestic violence policies and agendas at a police force level.
- All police forces, crown prosecution service areas and probation areas now have a domestic violence coordinator to implement training, look at performance within their area and generally be a link person between the area and central government.
- We have 64 specialist domestic violence courts in England and Wales, that is at least one in every region, and they should be expanded to 100 by March 2008.
- We have a Forced Marriage Unit, which is jointly run by the Home Office and the Foreign and Commonwealth Office. It provides policy work around forced marriage, develops guidelines, raises awareness, but also manages approximately 250–300 cases of forced marriage or potential forced marriage every year.
- We are offering a wider set of housing options for victims of domestic violence, not only refuges, but we are looking at way of keeping victims within their own homes through a sanctuary scheme programme and provide a support package for victims to enable them to stay. We see this not as a replacement of refuges, but as a way of providing other options to victims, recognising the disruption that is faced by them and their children when they are forced to flee domestic violence.
- There is now complete coverage across the UK of accredited, mandatory perpetrator programmes for convicted domestic violence offenders. In addition to this we have supported the development of national principles and standards for voluntary perpetrator programmes as well. That is available to any local area who wishes to develop voluntary perpetrator programmes outside of the criminal justice system.

Key criminal justice work programmes

Specialist Domestic Violence Courts

Specialist Domestic Violence Courts operate in Magistrates’ Courts in England and Wales. They basically put a victim at the heart of the criminal justice system to ensure that they are given maximum protection and support and information as their case progresses through the courts. Evaluations have proved that this encourages victim engagement.

Here are some elements of Specialist Domestic Violence Courts as a model that we are promoting in the UK:
- clustering domestic violence cases all on a particular day, which enables dedicated police officers to attend the court to assist the cases and provide further information;
- the Independent Domestic Violence Advisor who supports and informs the victim during the court case.
- trained and dedicated criminal justice staff who can understand the unique dynamics of domestic violence and are able to make appropriate decisions based on this enhanced knowledge, dedicated prosecutors and, as mentioned before, dedicated police who are able to sit in the courts as well;
- separate entrances and exits and also separate waiting rooms, so victims don’t have to pass the alleged perpetrator on their way into court or while they are waiting outside court for their case to be heard.

We see all of this as good practice, and if areas cannot set up specialist courts we recommend that they at least adopt all of these elements when dealing with domestic violence victims.

**Independent Domestic Violence Advisors (IDVAs)**

The Independent Domestic Violence Advisors’ role has been emerging in recent years. They are accredited specialists whose goal is the safety of victims. We see that this is really crucial and best practice in support of victims of domestic violence. They are the victims’ point of contact, from the event of crisis until their risk decreases, or until it gets to a point where the victims could be moved on to other specialist support services. They focus on providing a service to victims at medium to high risk of harm, addressing safety needs and helping them to manage the risks they face. As evaluations of specialist courts have suggested, IDVAs were pivotal to decreasing the victimisation and reducing victim withdrawal from the criminal justice system. We are also looking to pilot Independent Sexual Violence Advisors in 38 areas. There is quite a lot of overlap between the two roles and a very high rate of attrition in sexual violence cases. We are looking at what aspects of the IDVA role can be successfully reproduced for victims of sexual violence. Definitely we will be continuing in some form with that kind of support.

**Multi-Agency Risk Assessment Conferences (MARACs)**

The MARACs focus on identified high risk victims of domestic violence. We see it as piecing together a puzzle; different agencies that have specific pieces of information about victims of domestic violence are coming together in a structured way, either meeting fortnightly or monthly in a multi-agency setting where they can share information about the victim, build up a picture of the particular circumstances of that particular victim, devise a risk management plan for the management of the perpetrator and reduce the risk that the victim faces. The MARACs work in tandem with the Independent Domestic Violence Advisors, the IDVA usually takes about 80% of the actions from the MARACs and specialist courts. We are rolling out MARACs increasingly across England and Wales. We are hoping to get complete coverage in the next few years. They have really been shown to reduce repeat victimisation where they have been piloted.

**Improving policing response**

We have issued guidance on domestic violence and the associated risk indicators, and further work is being undertaken to formulate a common risk assessment tool that all police forces as well public and voluntary services who deal with domestic violence can use. A domestic violence training package is being rolled out both to the Crown Prosecution Service and to all police officers by 2008.

**Domestic Violence Enforcement Campaign: FIFA World Cup 2006**

We have run two domestic violence enforcement campaigns, the second of these was during the FIFA World Cup last summer. In selected police force areas an increase in domestic violence incidents was registered on match days compared to normal days, further contributing to the evidence that there is a link between domestic violence and sports or similar events, often with the consumption of alcohol. Good practice has identified that
- call takers were trained to probe further and investigate when they received calls reporting domestic violence, and the subsequent 999 emergency call tapes provided additional evidence;
- dedicated police domestic violence cars providing response to domestic violence were shown in quite a few police force areas to increase victims’ satisfaction;
- standardised investigation packs enabled police officers to build up their evidence in a very systematic way;
- digital cameras were used to increase additional evidence;
- some forces used body-worn video cameras either on their helmet or on their body, so when they attended a domestic violence incident everything was captured, the chaos and the high emotion of the whole scene. This is very powerful in a court where these videos can be played back and you can really see what has taken place. The police standards units in the home office produce guidance in body-worn video devices.

The future: Development of a Coordinated Community Response to Domestic Violence

We are creating a model of services and approaches for local areas to use, mapping the links between services and various public protection arrangements and identifying the appropriate intervention according to levels of risk by means of a pyramid of risk. This means that we are looking at what interventions are needed as risk increases or is reduced, because risk is often dynamic, with the emphasis that risk assessment should be used and carried out with the victim at all points to identify where risk has changed.

The future: Central government work objectives

Our accredited perpetrator programmes often only apply to convicted perpetrators. Sometimes their criteria is quite narrow, so that perpetrators with substance misuse or maybe English as a second language may not fulfil the criteria for acceptance to the programme. Thus we are looking at a variety of ways to increase interventions across a range of perpetrators and responding to their specific needs. We have developed a Men’s Coalition of agencies and services who are working together to promote men as responsible and positive role models. We are enhancing victims who have no recourse to public funds while they are within the probation period while applying for indefinite leave to remain within the UK. Also, we are encouraging family and friends to recognise domestic violence and to be intolerant to any culture that colludes with domestic violence. We have run a few campaigns and are trying to increase the reporting of domestic violence by friends, family and neighbours. Finally, another aim is to identify whether domestic violence interventions such as the MARAC can be used for other vulnerable victims and offence types, e.g., sexual violence or hate crimes.
PREVENTION OF DOMESTIC VIOLENCE: THE TASKS OF THE POLICE
My name is Anette Öberg and I work as chief inspector in a domestic violence unit in the Swedish Police Force. I work in Stockholm where the police force is divided into eight police areas. I want to describe to you in short terms how my unit at Söderot works with domestic violence against women.

My unit is organised into four groups. In every group there are five to 10 detective inspectors. Some of the inspectors are specially trained to work with children. Together with the group we have a prosecutor who is leading the investigation in every case.

We have about 200 cases incoming every month. Every week one of the groups, together with the prosecutor, is on duty. They work close to the social service if necessary. We have on the unit two social workers that are specially focusing on the children in the families.

In every case we design a worst case scenario to make sure that the victims are protected while the investigation continues. In this we cooperate with a special unit in the police force that focus on the victims’ support and the social services together with non-governmental organisations (NGOs). It is especially important to involve these organisations because when our investigation is concluded the women still may be in need of protection for several years to follow.

My staff receive special education regarding both domestic violence against women and abuse against children. In addition to these two serious crimes we also investigate rape with assault.

For several years my government has been focusing on this problem in Swedish society. My unit was created as a project already in the year of 2000 as a result of a campaign concerning domestic violence against women. The government implemented a new law that made this a very serious matter and we have now existed for seven years. The project has become permanent. The other seven police areas in Stockholm are building up the same kind of organisation that we have. Some of the areas are in progress and some have already been working in this way for years.

When we look at the results achieved by our organisation we can proudly present the most prosecuted cases towards severe domestic violence against women and children in Sweden this year.

In the annual activity plan for the Swedish police force our Government this year has made the prosecution of both sexual violence and ordinary violence towards women and children the number one priority activity and as I speak I know that every police area in Stockholm have a competition going on between them to reach this goal first.
I have been told that also next year, the Government will set this goal as number one priority.

Now back to my unit. If I had to point out three important things that make our unit successful I would say:

- Number one: my staff are very interested in this important matter. I do not think you could work in this field if you did not have a genuine interest. You would think that this matter is only of concern to women but I have seven men among my staff and among the prosecutors there are three men who work with this just as successfully as any of the three women in my staff.

- Number two: it is very important to have the prosecutors close to the unit. Each day of the week there are two prosecutors in my corridors, one of them in the group that has weekly duty and the other working towards their group. In Sweden it is the prosecutor who takes the case to the court. It is valuable for them to follow the case from the beginning and have the opportunity to decide what kind of evidence is important. They are able to take quick decisions that will bring the case promptly before court. There is no unnecessary delay. For my staff this is valuable since they handle about 20 cases each at the same time.

- Number three: it is important that we have good relations with both social services and NGOs because even if we conclude our investigation the women and children will go on in their lives, and they have the right to feel secure and know that society are watching over them and their safety.

There is no organisation that doesn’t have problems. Within our organisation there are a few problems also, and I think is important to point out, and work with, these issues. The most common problem that we have is that still after seven years many men and women think that violence in the family is a family matter and that it is their decision whether the matter will be prosecuted.

In Sweden violence against anyone, man, woman or a child, in the family or among strangers, is illegal and a social matter. Even if the woman does not want to participate in the investigation our prosecutors try to take the investigation to trial. Sometimes it is difficult and unfortunately sometimes the prosecutors have to decide that we have to close the case without trial. I believe that with information and persistence in these cases we will eventually succeed in reaching our goals.

Lastly I will mention a little about progress within this area. We are today talking about domestic violence against women but to succeed we have to consider the whole family situation and the most important thing in the family that the Swedish Government now are focusing on are the children who have been witnesses to domestic violence. The Government has recently pointed out the children as victims when they witness their mother being abused.

Within my unit we now are looking for methods to deal with this and use it in our organisation or in cases where someone else, e.g. a social service unit, should be focusing on this and the police are only reporting. In any case my unit are about to start something that we call the children house. It is a house that will be situated on the police property in my police area and in the case of an investigation concerning crimes towards a child there will be opportunity to meet the child on one occasion and in an atmosphere that is suitable for the child. This will be the ultimate way to work together with other organisations, both government and NGOs, at the same time and in the same place. If we reach a good method in dealing with children who have been witnessing violence towards their mothers I believe that we can find an even better use for our children house in the future.
London has a population of 8 million people and is growing every year. There are 300 languages spoken in London. There are 33 distinct districts, so police work in London is incredibly difficult, as in any capital city in the world. The offices that I work with are very committed and dedicated, considering that ours is an area which is not seen as the sexy end of policing. It is not murder investigation, it is not antiterrorism, but to me it is the most important. If you have got the family right, everything else will follow.

There have been 10 years of change since the Austrian anti-violence legislation, and we have had 10 years of change in the UK as well. Our government is full of lawyers, so there has been lots and lots of legislation. We have the Domestic Violence, Crime and Victims Act, the Sexual Offences Act, the Forced Marriage Civil Bill and many others. Specialist Domestic Violence Courts were introduced, and Independent Domestic Violence Advisors as well as Independent Sexual Violence Advisors were appointed to look after the victim through the legal process. We have had a focus on domestic violence homicide and that comes directly from America. Domestic violence accounts for 40% of murders nationally and 25% of murders in London; that number is coming down in London, but not in the rest of the country.

The Association of Chief Police Officers, a national police body, has produced guidelines, policies and procedures. We have risk assessment tools, there are training courses, and now we also have another American-style intervention: the Family Justice Centre, which is a one-stop-shop element. So my question is: Why isn’t the situation getting any better? It is starting to get better, but there is still an awfully long way to go; we are still looking at isolated issues and we are not joining things together. There is the UK government and all of its legislation, there is the national policing plan. There is a policing plan for England and Wales, Scotland has its own, but how does that fit in with everything else? You have got the Greater London Authority, the Mayor of London who has for the past six years produced a Domestic Violence Strategy, the London police plan, any number of performance indicators, we have targets for everything. What I really want to stress is, if you want your police service to be better in terms of its response to domestic violence that police service has to work in partnership, but partners equally have to understand the difficulties that the police face every single day.

Domestic violence is a priority for every single police force in England and Wales. We have a vision statement about protecting the lives of children and adults at risk. We are committed to investigating domestic violence, but the reality is we are focusing on grievous bodily harm and serious violence, that is where all of our limited resources are going. We are also committed to holding abusers accountable, but how can the police do that without the support of the rest of the criminal justice system, the crime prosecution service, the lawyers? They have the responsibility for charging, and our job
as the police is to provide them with the evidence so they can then take forward the charges. Charging levels are dropping since that piece of guidance came into place.

Recently our newspapers carried stories of a woman whose husband burned her with an iron, and he was fined 200 pounds. What message does that give out to the victim? Will she come forward again, next time he assaults her? What does that say to my officers who are working so hard every single day, but when they get the evidence and take it to the court system, this is all that happens? Finally, working in a multi-agency environment, working with partners, is never easy, and there are great challenges involved, particularly for the police.

We have a shared definition of domestic violence which we managed to get the government and all of the agencies to sign, but this definition also has its difficulties, as it only applies to those aged 18 or over. Girls can get married at 16, but apparently they cannot be victims of domestic violence until they are 18. So we are looking back again at how can we work with the definition that also includes under eighteens. The definition is gender neutral, which I personally have a huge issue with, because it does not take into account the disproportional effects of violence on women. We have also included family members, in recognition of the different family structures in each of our diverse communities.

The structure of the London Metropolitan Police Service

The Violent Crime Directorate is based within the territorial police, which delivers the frontline police response on all 33 London boroughs. There is a unit for missing persons, a unit for sexual offences, for violent offenders, and the specialist units that respond to domestic violence, and then we have the intelligence assets which are constantly looking at the reporting of all crime, all of the incidents that are reported to the police. Special analysts are looking at the data all the time. Police love to work with numbers, government love to work with numbers, so we are supposed to be joining up. We are 50 000 people in the Metropolitan Police. The Community Safety Units respond to domestic violence, but that was not their primary function. They were established in 1998, following the racist murder of Stephen Lawrence. Although they deal with hate crime, 85% of their work load is domestic violence. So what do the data tell us? We finally got a police service through the work of the government who recognize domestic violence as a serious crime. As I have said, it accounts for one in four murders in London, one in 20 of every notifiable offence, one in eight cases of grievous bodily harm, one in four of all assaults of actual bodily harm, and one in three common assaults.

Our average for the past five years is 110 000 incidents reported each year. 75% of all children on the at-risk register come from domestic violence households, and when you add to that mix the fact that you are policing the world in one city, this is incredibly challenging.

Legal framework

When the Labour government came into power in 1997, one of the first pieces of legislation passed was the Crime and Disorder Act. Agencies no longer have a choice about working in partnership, it is a statutory duty. I consider that a really good piece of legislation because it makes the police and all the other agencies come to the table. It has been a difficult journey, where we all have had to learn; we are now moving into the next phase, which is 2008–2011. We are going to make more agencies accountable, because the difficult thing with partnership is when things go wrong. When we started reviewing domestic violence murders and domestic violence cases which resulted in very serious violence or the death of a child, all the agencies around the table pointed their fingers at the police: ‘You are the law enforcement agency, you should be accountable’. But we are all accountable, the police maybe more so than all the other agencies, but we have to look at our own responsibilities.
We produced the London Domestic Violence Strategy which is a single plan for London, it takes account of the differences in the 33 boroughs but there is an action plan to which the police, the health authority, probation, prisons, all of the statutory agencies and the NGOs are signed up to. In addition, the Metropolitan Police Service is monitored by a police authority, they scrutinise everything that we do, they have set up a domestic violence board, because the government deemed that the Metropolitan Police Service had lots of policies and strategies, but actually we were not doing a very good job. So the board is there as an authority to make sure that we can translate these policies and strategies into action on the ground. We are now looking at our performance framework to make sure that it actually relates to victims’ safety and is not just about making police figures look better.

We have developed a serious violence strategy, and domestic violence and rape are part of that, but as I have said we are only looking at grievous bodily harm. But what happens to all of those incidents that don’t constitute grievous bodily harm? To give you an example, we had a woman who repeatedly came reporting to the police: criminal damage, some violence but not serious enough for identifying it as high risk. Are we really going to say to women that they have to be suffering really serious harm before the police will take up the matter? I think the police forces in the UK have to go back and look at that particular violence strategy.

We also have a youth strategy now which says that violence in home results in young people on the streets, young people having guns and knives. In London we have had 25 young people killed, murdered by young people this year. If you look at the backgrounds of those young people, a lot of them, not all, have violence in their families.

One of the things I have tried really hard to do is to get the police service to adopt the violence against women strategy, but they refuse to, because they want to adopt a gender neutral approach. This year we have had 11 domestic violence victims murdered so far, six of those victims were men. Those men were not murdered by women but invariably by men. A gay man was murdered by a partner, fathers were murdered by their sons. So I think we need to look at that gender neutral approach again.

The project Umbra

The project Umbra, which I have led, is the delivery arm of the Mayor’s strategy. It is criminal-justice-wide, so it includes the police, prisons, probation and the magistrates. Its aim is to create parallel pathways, so that when the victim reports to the police, you have the NGOs and the Independent Domestic Violence Advisors who will take the victim through the civil process or criminal process or help them identify emergency accommodation. The parallel process for the perpetrator is where the police steps in. Our job is to investigate the crime, to get the best evidence we can and to hold that perpetrator to account, whereas supporting the victim is the expertise of the other agencies, not ours. We are also taking that approach for children, we are trying to get child advocates, so that the police can go on with the job that they are supposed to do.

We have looked at all the domestic violence data as an organisation, but we have not looked at the child protection data. I think we need to start monitoring all of the child protection incidents that get reported to the police. How many of these cases relate to domestic violence? How many children are primary victims, how many are secondary victims? We need to be looking at diversity within that, what is happening in all the communities, what is happening in the old established white community. We also need to be tracking cases, so from the point of somebody reporting here, what happens when they leave the system, why do women pull out? Why do women say, I don’t want to go ahead with the case. Why does the perpetrator think nothing is going to happen to him? What are the courts doing,
both the civil and the criminal courts? And what can we do about our processes to make them better? I think we need to continue to review domestic violence homicide. That is now statutory footing, that is placed in legislation and we have to do that.

What is really striking is suicide, I don’t think any of us have really looked at suicide in the whole domestic violence field in the UK. There are some interesting data about women from my community, from the South Asian community. The women from that group are six times more likely than in any other community group to kill themselves. What is going on? And there’s one particular area of West London, which has a high percentage of South Asians and if you look at the number of people who have killed themselves under trains, 80% of them are women from South Asian background. That really needs to be looked at.

30 000 frontline officers get mandatory domestic violence training. The next phase of that is to train the senior officers, so chief inspectors and above, right up to the Commissioner. I would like to see the Commissioners go through the domestic violence training programme, because they have to supervise those frontline officers. If the supervision is right the response will be right. We have introduced the risk assessment form and we have identified the high risk indicators, that is, separation, pregnancy, escalation of violence, culture and isolation, sexual offences and stalking. We are revising our standard operating procedures now to policies and the guidance from the national police body is also being revised.

We are also about to publish an employee policy. The data in the UK suggest that one in four women will suffer domestic violence in their lifetime. If that is the case, then how many of our serving police officers are victims? But more importantly, how many of our serving police officers are perpetrators? In London we have reduced domestic violence homicide from 43 in 2003–2004 to 19 in 2006–2007. What I would like to see alongside that is an increase in the conviction rate.

**Advertising campaign**

The police will focus on the offender. That is what they have to do. With this offender focus in mind, we launched an advertising campaign. For the first time ever the police service put their advertising budget towards a massive campaign in the tube stations, at football matches, in pubs und clubs. And this was telling guys quite clearly, and also I think warning some women, to be a little bit more careful that we were taking domestic violence seriously. So we showed the heartbreaker, the big hitter, and that was very deliberate, that was about saying this isn’t just about the lower social classes or the socially deprived; this is a city hot shot, who probably earns a lot of money. Often when officers would go to the scene, they would say ‘I don’t want to do anything, it’s just a domestic’ but this campaign was actually sending a message to our frontline officers, that the next time a domestic could be a murder. It costs a million pounds to investigate a murder, so it’s also about saving costs. One of the ads reads: ‘No one on this platform can tell you are a wife beater’. In other words, domestic violence is a crime committed by men from all walks of life. If you are beating your partner you should know that the police no longer need her statement to make an arrest. If we have reasonable grounds we will arrest you immediately. And if you have left the scene we will track you down.
For me, prevention is essential, especially in the field of domestic violence. In the course of my activities in the police force I have witnessed the making of the Protection Against Violence Act. I can vividly remember the time before it came into being, for example, the years 1991/1992 in the district of Ottakring in Vienna, where we frequently had to settle disputes. We were called to the same address four or five times, until finally there was a physical injury. And only then could we intervene. As a police officer, I often had a feeling of helplessness, because we were not allowed to act earlier. Many things have changed for the better in this field, I am glad to say.

Unfortunately, prevention work is still treated with some negligence. For the police, what matters is to solve crimes and arrest offenders. I do not consider myself an exception here. Members of the police receive recognition for catching a criminal. In comparison, the success of prevention is not measurable, it cannot be grasped and is hardly noticeable even for those concerned. The burglary that was prevented because of thorough information by the criminal investigators does not show anywhere on the records.

In the title of my paper I have the words Against Women and Children deliberately left out. I aim at a neutral approach to the theme of domestic violence, and I expect the same from my colleagues. It is my professional experience that women also – if to a lesser extent – contribute to domestic violence, verbally, by exerting psychological violence. It is important to stay objective when intervening in cases of violence. There may be a difference in the positions of the intervention centres and the police in this respect.

Let me give you some facts about police work. In the district of Tulln, Lower Austria, evictions and barring orders are increasing. In 2006 there were 21 evictions and barring orders until the month of October, and this year, in 2007, there have been 33 already. Understandably, we usually are not pleased about rising numbers in the field of criminal offences; but regarding domestic violence, personally I am quite happy about these increases, as they show that to report incidents of violence in the family to the police is becoming less of a taboo, and more and more women dare to call the police in such cases.

Compared to Vienna, the situation in the district of Tulln is more favourable for me as a District Police Commander, because I am familiar with all the 33 cases. Therefore I can analyse them as to whether we have achieved the best possible results for the victims.
Rising crime rates among young people

Why is prevention so important especially in the field of domestic violence? There can be no doubt that the protection of victims comes first. However, I want to discuss another aspect, which I have had to face again and again over recent months, and that is rising crime rates among young people. In Austria, currently we have registered a rise by 40% for the offences of theft and damage to property. In the district of Tulln, the rise in damage to property is even 46%. To me this is evidence that prevention in the field of domestic violence must be increased, because it is their own families where most children and young people have their first experiences of violence. Later they are often left to their own devices. They lack the awareness that to commit violent acts is wrong. Therefore, it is very important to take measures when domestic violence happens. Children and young people should know that the exertion of violence has negative consequences. They should experience that an end is put to domestic violence, if, for example, their mother obtains information, advice and assistance by the experts at an intervention centre.

What makes police intervention so difficult in many cases?

In my view, interventions in the field of domestic violence are among the most difficult police tasks. A few days ago, a police officer stated the following, and I quote almost verbatim: ‘Every police intervention has its difficulties, as the parties concerned are in a state of tension. Before the police came, there had been slander, libel, even physical violence in some cases. Police officers are under pressure to solve the problem and make a decision. As the woman is the victim in most cases, it happens that clever not-yet-ex-wives use the barring order as a device in their divorce proceedings. Therefore, the thorough questioning of both parties on location is so important, to prevent that the police intervention be used as a means to an end in the divorce proceedings.’ I would like to say right away that I do not share this opinion. It is just the view of one police officer, but for me it does reflect the fears of others, that their competence and power could be abused. I consider it highly important to address such fears in training sessions. Because in the context of danger assessment that the officers are obliged to make, it is necessary to realise clearly where there may be inhibitions to issue an eviction order and/or a barring order.

The difference between urban and rural regions

According to my experience, it is a great problem that people are less anonymous in rural areas. I remember an incident in a small town, where the police officers acted spontaneously, put away their uniforms and intervened in their plain clothes to issue the barring order. They did this to protect those concerned, so that the intervention would be made in a less spectacular way, without attracting the neighbours’ attention.

In the country, accommodation for evicted men is also an issue. Some believe that men should take care of themselves and find accommodation on their own. But the fact is that in winter, with temperatures below zero, police officers do give some thought to the question where the man concerned might find a place to stay.

Training – support – review

I often ask myself how I can use my leadership position to contribute to the implementation of the Protection Against Violence Act.
In the context of this Act, I consider ongoing training one of the most important aspects. When I started my work in Tulln, I was surprised to find that few people knew what the Stockholm Syndrome was about. Police officers have come to me with the question ‘We don’t get it, we want to help the woman and as soon as we have declared the barring order, all her rage is turned against us! How can we deal with something like that?’ If police are unfamiliar with the background of such ambivalent behaviour, it may easily happen that the officers unconsciously turn against the victim. It is essential for police to know about the relationship between offender and victim, to know about the existence of the phenomenon that a woman may side with an abusive man. If officers comprehend the background, they will have less difficulties in implementing the Act. However, this is possible only if they receive training regularly.

It is also important to communicate to officers that they can count on support in the case of difficult interventions. In Tulln, the district governor’s office, the on-call duty unit and myself are available 24 hours a day. In difficult situations, police officers can call us at any time for advice. It would be counterproductive to give them the feeling that they have to handle problem situations on weekends or during the night by themselves.

The procedure to review almost every case and discuss it with the competent officer has turned out to be very positive. It happens quite often that following an intervention officers ask themselves whether they did the right thing or whether there would have been an alternative. Therefore, reviewing the case and having a follow-up discussion is very important. However, in this context one should bear in mind that it is quite easy to discuss cases after the fact and criticise modes of action without having been under the pressure to act on the scene. Thus, especially when cooperating with other institutions, it is essential to hear all parties first and voice criticism only when you know what actually happened.

Public relations is another important part of our work. We collaborate closely with the regional media, the Lower Austrian weekly NÖN and a regional paper for the district of Tulln. In these media, the issue of domestic violence is regularly covered. And I have often found that after an interview with a woman affected by violence who explains how the police measures have helped her, the police is more frequently called to intervene. Therefore it is essential that domestic violence be covered in the media.

Cooperation with other institutions

Cooperation with the institutions for the protection of victims, the Youth Office and the men’s hostel are also of great significance. Mutual acceptance and trust are essential prerequisites.

I have read in a press release that domestic violence should be made visible. I want to expand on this and say that violence in the family must be seen, recognised and fought by all means necessary. Let me give you an example to illustrate what I mean: some months ago, we were faced with the situation that in a family, a one-year old girl died. The diagnosis was cot death. The case was closed, but I had some sleepless nights over it, because cot death is very rare in children this age. Some time later it turned out that my unease and suspicion was by no means unfounded. In the meantime, the stepfather of the girl has been arrested because of severe sexual abuse against the second child, a five year old boy. Now, the girl will be exhumed. It is important to stay sensitive and alert and not to let oneself be fooled, even if a whole family is ostensibly in mourning.

I think that the Protection Against Violence Act is a good basis for combating the common phenomenon of domestic violence. At the same time, my view is that we are still far from our aim. And we may have to accept that we will never reach that aim, to end domestic violence altogether.
I would like to end with a quote by the German author Erich Kästner, who said that for all the wrong that is committed in the world, not only does the person who commits it bear the guilt, but also the person who fails to prevent it.
The police is of central importance in the prevention of domestic violence.
- The police plays a key role with regard to stopping violence and preventing further violence: for instance, under Section 38a of the Security Police Act the police is granted the right to issue eviction and barring orders and thus at least to interrupt violence.
- The police symbolically communicates that domestic violence is denounced by the state.

According to Section 22(2) of the Security Police Act, it is the task of the police to ensure the preventive protection of legal interests. Now, 10 years after the Protection Against Violence Act entered into force, its has become part of police routine work to protect life, health and freedom also in the private sphere, and the prevailing attitude is that violence, even when committed in a domestic environment, is not a private matter but a public issue: to be precise, an issue that relates to the duty to maintain public security.¹

Interventions by the police underline the wrongful nature of violence. The goal of police action in this field is to stop violence. This goal is to be met in cooperation with other agencies such as family courts, youth welfare departments, criminal justice and non-governmental organisations (NGOs). According to the Protection Against Violence Act the police is obliged to cooperate with the intervention centres/violence prevention centres.

The Protection Against Violence Act defines a precise statutory duty that the police has to perform and the police has been granted the corresponding power. Police interventions in cases of domestic violence convey a clear message to perpetrators, victims of violence and society in general.

Eviction and barring orders make it clear that it is the perpetrator who is responsible for the violence. It is an implicit call upon the offender to reconsider his behaviour as it has immediate consequences (he at least has lost his flat and familiar environment, and possibly also his partner). In any case, eviction and barring orders issued by the police are evident signals to the perpetrator, pointing out that his violence constitutes a wrongful act.

The persons at risk, i.e., women and children in most cases, are recognised as victims of violence because their physical and psychological integrity has been violated.

The practice of the police to intervene in individual cases of domestic violence contributes to a reassessment of such violence by both the persons involved and their environment as well as society.

¹ Dearing/ Haller, p. 30
In order to be able to leave a violent relationship, the woman’s position has to be strengthened by taking deliberate measures:

- removing the perpetrator so that the woman will have the time and space to think about possible changes;
- providing counselling and support that focuses on the interests of the woman by intervention centres/violence prevention centres.

The state’s reaction to violence committed by men is the first and most essential signal: it makes a great difference whether a police officer suggests that the woman go to a safe place or whether the man is requested to leave the flat.

Even though eventually it is the person at risk who has to initiate steps that ensure her safety, one effect of interventions by the police is that, because of their cooperation with intervention centres/violence prevention centres as well as the court authorities, an entire package of potential measures are available that aim at protection and safety of victims of violence (eviction or barring orders, safety plan, interim injunction, arrest).

In about two out of three cases (i.e., approximately 7 200 out of a total of 11 000) in which Austria’s intervention centres/violence prevention centres were involved in 2006, eviction orders were issued by the police, and further intervention measures followed.

In the 10-year period since the adoption of the Prevention Against Violence Act, the police has communicated to the intervention centres or violence prevention centres the entire documentation on prohibition to return orders, with the data of persons committing violence and persons affected by violence, such as address, age, language, children and age of children, reason for intervention, injuries, psychological state, confiscation of keys, protection area, previous incidents as well as possession of weapons. These data are important for an assessment of the situation and as a basis for further action. In addition, observations by the police in the context of interventions provide relevant information regarding risk situation and safety.

However, recently this communication of data, which is a central part of the cooperation between the police and intervention centres/violence prevention centres, has been restricted according to a Decree by the Federal Ministry of the Interior, which was issued without need and for no apparent reason. This restriction applies to the address and phone number of persons committing violence and persons threatened by violence, time and place of the incident and inspection area. This has eroded the proactive approach of contacting persons suffering violence, to the disadvantage of the people concerned and their right to physical and psychological integrity. It is a step backwards in the cooperation between the police and intervention centres/violence prevention centres, and also is in flagrant contradiction to the recommendations that the UN Committee on the Elimination of Discrimination against Women\(^2\) made to Austria when examining a complaint concerning the action of the prosecuting authorities prior to two cases of homicide in the domestic sphere.\(^3\)

The recommendations by the CEDAW Committee include the following:

- ‘12.3 (a) Strengthen implementation and monitoring of the Federal Act for the Protection against Violence within the Family and related criminal law, by acting with due diligence to prevent and respond to such violence against women and adequately providing for sanctions for the failure to do so; (…)’

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\(^2\) CEDAW Committee; it monitors the implementation of the UN Convention on the Elimination of All Forms of Discrimination Against Women.

\(^3\) The opinion on Decree BMI-KP1000/1032-II/BK/1.6/2007 by Ms Renate Hojas, of 2 November 2007, is available at the Salzburg Intervention Centre.
(c) Ensure enhanced coordination among law enforcement and judicial officers and also ensure that all levels of the criminal justice system (police, public prosecutors, judges) routinely cooperate with non-governmental organizations that work to protect and support women victims of gender-based violence;4

These recommendations by the CEDAW Committee obviously contradict the restricting Decree by the Ministry of the Interior, because cooperation requires information and exchange.

This Decree, without doubt, will make the work of the interventions centres/violence prevention centres much more difficult, to the disadvantage of those who should be granted the best possible degree of safety and support under the Protection Against Violence Act. Who will benefit from this?

Postscript: After intensive efforts by experts and politicians it could eventually be achieved that the police has again communicated to the intervention centres/violence prevention centres the relevant data to the same extent as before. The corresponding statutory provision was adopted in December 2007 (Section 56 Para. 1 No. 3 of the Security Police Act).

References


THE POTENTIAL OF THE HEALTH CARE SYSTEM IN THE PREVENTION OF DOMESTIC VIOLENCE
In the past 10 years, attitudes towards domestic violence have changed also in Switzerland. In this field, the intensive exchange with Austria, and especially the innovative work of the intervention centres, has been very inspiring and productive. Austria’s Protection Against Violence Act and its proactive counselling services have had a model function, and the Austrian experience has been useful in many respects.

In a number of cantons, restraining orders and anti-violence laws were adopted that include provisions prohibiting perpetrators from returning to and contacting persons affected by their violence. At the level of criminal law, obligatory prosecution has been introduced, which means that now many offences in the field of domestic violence are prosecuted by the state and no application for criminal prosecution on the part of the victim is needed. Several cantons introduced intervention projects and round table talks in order to improve the cooperation between the individual authorities and institutions and to decide on joint strategies.

So far, the health care sector has only marginally been involved in the development of new intervention strategies, possibly because domestic violence is still regarded most of all as a social, or maybe legal, problem but not as a medical or health care issue. However, professionals in the field of health care play an essential role with regard to the early detection of domestic violence. In addition, the effects that domestic violence has on health should not be underrated. This still is not adequately taken into account in the context of health promotion and prevention of violence.

The health care sector as a focal point for victims of violence

A central advantage of the health care institutions is their low-threshold nature. For instance, almost every women visits a doctor at regular intervals, either for a check-up or because of a disease or injury. If physicians are aware of the problem of domestic violence, there is a chance that this issue is addressed and that help may be organised. As a rule, health care professionals such as physicians, nurses, midwives and therapists enjoy great confidence. They deal with disease and pain every day and they also know intimate details and vulnerable sides of people. They are all the more regarded as trustworthy because they are subject to professional confidentiality.

Many victims of violence, because of injuries or health problems, need medical treatment and care. A woman experiencing violence who has sustained injuries and/or suffers from psychological or psychosomatic symptoms, is much more likely to turn to an emergency room or her general practitioner than to a counselling centre, a women’s shelter or to the police. In other words: the staff of health care institutions have contacts to a very large number of victims of domestic violence.
Therefore, they are in an excellent position to address people suffering violence and to help them get support. This underlines that greater importance should be attached to the role of health care professionals with regard to the early detection of domestic violence.

**Difficulties addressing the theme of domestic violence**

However, for many of the relevant occupational groups in the health care sector it is difficult to address the issue of domestic violence. Many health care professionals are reluctant to probe into a possible background of domestic violence, for many reasons: they are afraid of invading another person’s privacy, they are not fully aware of the problem, they are pressed for time or have not enough knowhow regarding their own options and existing support services. They feel uncertain in particular if the violence is not obvious and they only suspect it. They feel helpless and fear that the consequences of asking patients about violence could be too much for them to handle. Eventually, one must not forget that health care professionals may also have suffered domestic violence. Having experienced violence themselves may make it more difficult for them to respond competently to patients affected by violence but it may also be a helpful resource.

Addressing this issue is difficult not only for health care professionals: it is not easy at all also for people suffering violence to talk about what they have experienced. Many feel ashamed and fear that they might not be taken seriously. It is engrafted also in them that relationships are private matters. In addition they fear that if they do talk this could have unwanted consequences (e.g., that the police is involved without their consent). Another concern is that their partners could be told that they have not kept silent. Therefore many women do not address the subject of violence themselves or do not give the true reason for their injuries. This means that it cannot solely be up to the women affected to address the issue of domestic violence.

If health care experts are to assume active functions in this regard they need the corresponding special knowhow and must be able to take competent action. The relevant professional associations and health care institutions have to draw up programmes and guidelines for addressing domestic violence, which not least will serve the purpose of defining their own tasks vis-à-vis those of other professions and institutions. This will enhance the confidence they have in their actions and will help deal with feelings of powerlessness and frustration that are bound to arise when responding to domestic violence.

**A pioneer project at the Zurich Maternité clinic**

I will now present a project that we initiated in 2002, in cooperation with the Maternité clinic of Zurich’s Triemli City Hospital. Maternité is a specialised gynaecology and obstetrics clinic located in Zurich. In addition to providing care in the context of pregnancy and childbirth, it also runs a gynaecological inpatient department and carries out outpatient treatment. Approximately 4 000 patients per year turn to the Maternité clinic for delivery or for undergoing gynaecological examinations.

The project Domestic Violence: Awareness and Intervention¹ was started in 2002 and completed in 2006, i.e., it was run for almost four years. The goal of the project was to gather data and provide a knowledge basis on domestic violence for the health care sector as well as to draw up and test intervention strategies. The project consisted of the following subprojects and steps:

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¹ The project Domestic Violence: Awareness and Intervention, as well as guidelines for addressing domestic violence are described in more detail in the manual on domestic violence and responses to domestic violence. See Fachstelle für Gleichstellung.
The two surveys were conducted by sociologists Daniela Gloor and Hanna Meier of Social Insight Zurich. I will only give a short summary of the results because I want to focus on the subject of measures taken.

Re: survey among staff

All employees of the clinic who directly worked with patients were asked to give written answers to questions concerning their experience and views of the theme of domestic violence. In addition, oral interviews with individual specialists (physicians, midwives, nurses and social workers) took place. The results show that the staff have been confronted with domestic violence quite often. Two out of three respondents confirmed that in the last three months before the survey they had had contacts to at least one person where they had either suspected or known for sure that she had suffered violence committed by a person close to her. Many respondents said that they did not feel certain enough when such a problem arose. Great interest in further training in this field showed across all occupational groups. The corresponding activities on the part of the clinic were welcomed although also fears were voiced, primarily worry that the workload might further be increased, even though time was a scarce resource also at present.

Re: survey among patients

The patient survey was conducted in writing by means of a questionnaire in four language that was sent to the patients. Around 3 800 patients were contacted in this way, and 1 886 women took part in the survey. After eliminating those questionnaires that could not be included in the analysis (114), a total of 1 772 remained. This corresponds to a return rate of more than 50%. I will now present a few results of the survey. For further details please consult the report on women, health and violence in close social relationships. ²

Domestic violence is frequent and it is a health problem

The survey among patients showed that 10% out of the total of 1 772 women interviewed had experienced domestic violence committed by a person close to her in the past year before the survey. The most frequent forms of violence mentioned were physical violence and threats by the current partner (7.9%). However, respondents also indicated violence committed by former partners (4.2%), and in some cases, by other relatives (1.9%)³. The results also did not differ significantly when broken down by factors such as level of education, nationality or income.

The results relating to the state of health of the women affected are very informative. One of the questions dealt with the physical state of health, consisting of 14 items, and included, for instance, the frequency of headaches, neck pain, (lower) abdominal pain, vertigo, nausea and eating disorders. The answers clearly showed that there is a connection between experience of violence and state of health. The greater the extent of violence suffered, the stronger the physical symptoms tend to be. While only five percent of women who had not suffered violence said they had pronounced or frequent physical complaints, 24.4% of women exposed to violence to a larger degree indicated pronounced or fre-

² Gloor/ Meier
³ A few patients indicated experience of violence committed by more than one person in a close social relationship in the past 12 months, therefore the sum of violence experienced by the individual actors is higher than the total of 10%.
quent physical complaints (one out of 20 compared to one out of four!). These findings have been confirmed by all results on the health situation of the women in question. The women suffering violence to larger extents considered suicide four times as often as women without experience of violence, and they actually attempted suicide six times as often. Moreover, all data on psychosomatic and psychological health as well as subjective assessment of the state of health also point in this direction.

Women suffering violence most often turn to experts in the fields of psychology/medicine
In the survey, those women who were experiencing domestic violence were asked to indicate to which institutions they had turned to get help. In the majority of cases, psychologists and psychiatrists were indicated, followed by physicians, and police authorities ranked third. However, almost two out of three victims did not seek professional help.

Addressing domestic violence meets with approval
The study also investigated the respondents’ attitudes to screening for experience of violence. The corresponding question was, ‘How do you react if asked by the doctor in hospital whether you had experienced physical or sexual abuse by your husband, partner or another person to whom you are close?’ The results showed that a large majority of patients had a positive view of such screening. Almost nine out of 10 women said that such questions were acceptable and they did not have a problem with them being asked (88.7%).

Re: preparing measures to be taken and staff training
The results of the two surveys encouraged the clinic managers to give more priority to the issue of domestic violence and to provide resources for this purpose: a central resource was that a number of staff could dedicate their entire work time to the preparation of guidelines and participation in training courses. In summer 2004 it was decided to introduce the following measures:
- capacity building for all staff who have direct contact to patients (reception and admission staff, nurses, midwives, physicians, physicians’ secretaries) in the context of a half-day basic training event;
- preparation of guidelines for responses to domestic violence including screening;
- training programme for staff who are to apply the guidelines (physicians, nurses and midwives) in the context of a half-day intervention course;
- information material in different languages for distribution among patients.

The training programme and the guidelines were prepared in cooperation with external experts from the field of therapy who had specific knowhow regarding counselling services for women suffering violence. In addition, it was regarded as essential also to involve in the preparation of guidelines the group of doctors and nurses who would subsequently have to apply them. The guidelines were to serve as an instrument for all staff that underlines the approach to domestic violence of the Maternité clinic and the functions that individual workers will take over in this respect.

Only few of Maternité’s patients are women who turn to the clinic because of direct consequences of injuries that were caused by domestic violence. However, the staff survey showed that often there is reason to assume or suspect that a patient might be a victim of violence. The survey among patients indeed revealed high rates of experience of violence. When screening standards are introduced, this is a good opportunity to address the theme of violence in all contacts with patients and thus to signal openness and readiness to talk about this issue. If a patient confirms that she is suffering violence she may be given further information, and help services may be pointed out. However, the patient is free to decide whether to admit that she has suffered violence and whether to talk about this.
The guidelines describe the following themes and instruments for practical use:

- definition
- indicators
- screening: objective and procedures
- communication and interviewing
- documentation files: objectives and themes
- medical reporting in cases of domestic violence
- internal assistance services of the clinic
- internal information channels and professional confidentiality
- setting boundaries and self-protection
- addressing relatives who commit violence or threaten to use violence.

The guidelines were approved by the clinic and after a training programme they were introduced in a test phase for six months at first. In the training, the theme of screening questions was of focal importance and was practiced by means of role play. After the start of the test phase all staff in charge were obliged to ask all patients who came to the clinic’s outpatient or inpatient departments the screening question about domestic violence if this was possible in the concrete situation. During this time, the staff received assistance in certain situations. The social worker and the gynaecologist working in the field of psychosomatic medicine contacted the teams at regular intervals and asked them how implementation was progressing and offered advice if problems arose.

After the test phase all staff involved were asked to complete a two-page questionnaire on their experience of the implementation of the guidelines. The questionnaires, which had been filled in by two thirds of the staff contacted, were then analysed, and the following results showed:

- 95% said that the guidelines were a good instrument in order to know how to react in cases of domestic violence.
- More than 50% indicated that it was not difficult for them to ask the screening question. 13% felt that this might be embarrassing for the patient. A few stated they did not feel competent enough. The greatest obstacle mentioned was lack of time.
- Over 50% reported positive responses to the screening on the part of patients, and only few said they had met with disapproval.

I will quote three statements from reports by staff whom we asked to give their personal opinion:

‘My first reaction was relief: at long last it was officially permitted to ask questions about violence when taking the case history. For me it was important to have guidelines for these talks. (...) Before, I found it hard to decide how far to go in such talks about violence and where I should better draw the line.’ (midwife)

‘Our screening does not mean that we spend much time and effort to find solutions to problems that arise because of domestic violence; it only helps identify the victims concerned in order to offer support. (...) As soon as you have more routine, you no longer hesitate to ask the screening question. Patients feel the confidence you have gained and the question about violence is no longer perceived as a sudden change of subject in the talk between the doctor and the patient but victims may even regard this as a relief.’ (senior physician)

‘What surprised me most was that it had become easier for me than in the past. Whatever reactions the women concerned were showing – nothing was as bad as the taboo surrounding this issue in the past, with unspoken suspicions, diffuse assumptions and speculations.’ (nurse)
These results were very encouraging. However, we also found out that the screening was neglected in quite a few cases. In particular in outpatient settings frequently the screening question was not asked. An important reason for this obviously is lack of time, but also other factors might be of relevance. For instance, a strong influencing factor is whether this theme is regarded as relevant by superiors and whether they motivate and encourage their staff to apply the guidelines.

When the guidelines were definitely adopted an essential aspect was to ensure that they will continue to be applied also after the project, that a regular exchange of experience will take place and that any modifications that are necessary will be taken into account. For this purpose responsibilities in this field were defined and assigned to different persons. In addition, a training scheme was introduced that is obligatory for all newly hired staff.

The information material that was prepared includes a leaflet in seven languages, with addresses of counselling centres, as well as a poster. There are posters in the entrance area and in the individual departments saying, ‘Domestic violence makes you ill. Here is the place to talk about it.’ This signals that the Maternité clinic is aware of the problem and will offer assistance.

After the conclusion of the project, its organisers decided to prepare a manual for the health care sector that includes essential background information and guidelines for action in order to respond to domestic violence. This manual on the identification of, and adequate responses to, domestic violence was published by the Hans Huber publishing house.

What may health care professionals contribute?

Below I will outline what functions health care professionals have with regard to domestic violence. The concrete tasks to be taken over differ according to field of activity. Depending on whether a person is a general practitioner, midwife, surgeon, emergency room staff or a nurse in the extramural sector, their functions regarding domestic violence interventions have to be defined in accordance with their specific duties and actual scope of action. Another important point is to be aware of what may realistically be achieved. Health care professionals will neither be in a position, nor is it their duty, to stop the violence and solve the problem on behalf of the person suffering violence. However, they may provide invaluable professional assistance in order to alleviate the effects of violence and to initiate further support.

Be aware of the signs indicating domestic violence
A first step is to think of the possibility that injuries and health problems might be caused by domestic violence. The corresponding symptoms range from visible injuries to diffuse physical complaints, which often have become chronic already. Thus, domestic violence is not only an issue in the context of emergency room interventions because chronic diseases may also be related to domestic violence.

Address the theme of domestic violence
If you suspect that domestic violence might be the reason for injuries and complaints, say so openly. This is a signal to the patient that it is alright to mention domestic violence and that you are ready to talk about it. It may also be advisable to tell her that you are bound by professional confidentiality and state expressly that nobody, not even her partner or other members of the family, will be told. This is important especially in contacts with immigrants as they might not know what confidentiality actually involves. If a patient refuses to talk about violence suffered do not forget to assure that she may take you up on your offer at any time.

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4 Fachstelle für Gleichstellung Stadt Zürich
There are a number of basic rules that should be considered when talking with patients. In short, they include the following:

- Do not voice suspicions of violence if the partner is in the room.
- Do not question what the patient tells you.
- Do not give judgements, not even on the perpetrator.
- In the case of language difficulties, involve an unbiased translator (preferably a woman)
- Pay attention to protection and safety.
- Respect decisions taken by the patient.
- Document the talk.

Asking routine questions about domestic violence (screening) is a good way to address the issue of domestic violence not only in a situation of concrete suspicion but in general. Domestic violence is thus defined as a health problem, it ceases to be a taboo, and consequently everybody has the opportunity to talk about possible experiences of violence.

**Examine the patient and document the case thoroughly**

It is a must to carry out a thorough examination in the case of any injuries and complaints and carefully document the case. In this context, both old and new injuries as well as chronic and diffuse symptoms have to be considered. Any findings have to be documented precisely so that they may also meet court requirements. Although women suffering violence often do not need such a documentation when they turn to a health care institution, this might be of great relevance later, in particular for criminal proceedings or separation procedures and also with regard to questions of residence or financial benefits. The majority of victims cannot ‘prove’ the violence suffered therefore evidence based on medical documentation is all the more important.

**Meet safety and protection needs**

The patient's safety comes first. It is important to discuss with the patient the potential danger of her situation and to find out whether she can, and wants to, return home or stay at her home. If she has children, their situation has to be considered as well. If there continues to be a risk situation it might be advisable to move into a women's shelter. In the case of a stay in hospital it has to be clear which course of action will be taken to respond to violent relatives, and which protection measures are needed.

If you, as a physician or nurse, are of the opinion that the danger for the patient is greater than she thinks it is, check thoroughly which protection measures are required and try to convince the patient of a solution in which her risk situation is taken into adequate account. There may even be situations where you have to take measures against the will of the patient, for instance, calling the police. Such situations are delicate, and it is advisable in any case not to act hastily, and not alone, but to discuss with an expert the steps to be taken.

**Provide information and establish contacts to assistance services**

Many women who experience violence are under massive control by the abuser, they are isolated and do not know where they may find help. Therefore it is important to inform them about existing support services. In hospitals and doctor's offices information materials by women's shelters and specialised counselling agencies should be available in different languages. Sometimes, and if you are able to, it may be helpful to tell the patient further details of the services provided by a centre or to offer assistance in establishing contacts. In cases of domestic violence, it is rather not advisable to recommend relationship counselling. The power imbalance in the relationship will prevent open talks and may result in additional pressure on the person experiencing violence. Better solutions may be achieved when the violent partner is able to accept assistance by a men's or violence counselling centre while the woman experiencing violence turns to a victims’ counselling centre to get support.
Requirements for the health care system

A number of structural requirements have to be met so that health care professionals will be able to perform their functions. The following demands are therefore addressed to politicians in the field of health care, specialised organisations and professional associations as well as training institutions and decision-makers in health care institutions.

Recognise domestic violence as a health problem
Domestic violence, with regard to both prevention of violence and treatment of victims of violence, has to be recognised and taken seriously as a medical and health-related problem. It should be part of diagnosing to take into account the possibility that health problems might have been caused by domestic violence.

Acquire and advance specialised knowhow on domestic violence
The existing knowhow regarding forms of domestic violence, injuries resulting from domestic violence as well as other relevant health care consequences should be integrated in and further developed by the health care sector.

Integrate in education and training the subject of domestic violence
The subject of domestic violence and professional responses should be an integral part of basic education as well as further training programmes of doctors, therapists and nurses.

Prepare the basis for practical work
Health care professionals need guidelines, checklists and instruments for practical work in order to be able to provide competent treatment and care services to victims of violence. Any existing results of research, practical experience and evaluations should be used for this purpose.

Build networks and promote cooperation
Responding to the issue of domestic violence forms part of the functions that various occupational groups and institutions are performing. Starting an interdisciplinary exchange, getting to know the corresponding remits and identifying links are important prerequisites in order to be able to provide competent support to victims of violence.

References


The year 1997 marked a cornerstone in the fight against domestic violence in Austria: the Austrian Federal Act on Protection Against Domestic Violence entered into force. The objectives of the Protection Against Violence Act include
- disrupting the spiral of violence by making the perpetrator leave the home, on the basis of eviction or barring orders by the police;
- support and assistance to people affected by violence, provided by intervention centres.

However, in my opinion the most essential point is what this signals:
- Domestic violence is not tolerated.
- Domestic violence is not a petty offence.
- Domestic violence is not a private matter.

This message underlines that domestic violence – apart from the suffering it causes – also involves high public costs. However, no hard figures exist as far as costs are concerned. For this reason, I refer to the study of 2006 on the cost of domestic violence in Austria, drawn up by Birgit Haller and Evelyn Dawid and published by the Institute of Conflict Research. The result of this study is a scientific estimate of the public cost of domestic violence. As Austria does not have prevalence data derived from empirical findings, estimates for Austria were made on the basis of the prevalence estimate conducted in Germany in 20041 in order to get an idea of the extent of this cost.

The aforementioned study takes into account the following types of cost:
- Police authorities
- Court authorities
- Labour cost (incapacity for work)
- Welfare assistance
- Health care
- Support centres for people affected by violence.

According to the study, the annual overall cost of domestic violence is more than 78 million euros in Austria. As 19% of women in Austria aged between 16 and 85 live in Lower Austria, this means that a share of 14.8 million euros is paid by the Province of Lower Austria.

This paper will focus on health care and the cost (of treatment) resulting from domestic violence. This cost is paid by the statutory social insurance funds and the public purse, i.e., all of us bear this cost, either through our social insurance contributions or our taxes.

1 IFF/ infas
This means that domestic violence affects all of us.

However, it is difficult to calculate the exact extent of the cost for the health care system that is caused by domestic violence. The data of social insurance funds usually do not link cause (act of violence) and effect (frequently diagnoses are not reported or do not provide relevant information in this regard). In addition, the share of unreported cases of violence is high, because many women, for understandable reasons, do not give the true cause of their injuries. Thus, only in few cases is it possible to identify the perpetrator as the person who has actually caused the cost incurred, which would be a prerequisite for social insurance funds to have recourse against the responsible party.

In which way can health insurance funds get the information that injuries have been caused by domestic violence? Indications may be derived from the diagnoses documented in the context of stays in hospital, use of ambulance services or unfit-for-work certifications by attending physicians. Still, further conclusions are only possible if the injured person truthfully states what has been the cause of her injury and does not claim to have ‘fallen down the stairs’ or ‘walked into an open cupboard door’. Only if a person can definitely be identified as the perpetrator in the course of accident investigations, subrogation according to Section 332 of Austria’s General Social Insurance Act may arise. This means that any claims for damages, to the extent to which the statutory health insurance fund is competent (e.g., medical treatment, medicines, stay in hospital), are taken over by the health insurance fund. This does not include damages for pain and suffering. Even if the offender is known and therefore recourse would be possible on principle (as this also applies to cases in which the offender is a relative living in the same household), as far as damages for pain and suffering are concerned no recourse on the part of the health insurance fund is admissible. Here the ‘family liability privilege’ prevails: this is a legal instrument developed by jurisprudence and adjudication and aims to prevent undesirable consequences due to the financial dependence on the offender of the injured party.

In this way, double damage is avoided: financial damage should not be added to physical injury because of domestic violence, but this could be the case if the person responsible were also held liable for social insurance benefits such as cost of medical treatment, medicines, hospital care, etc., which would eventually reduce the household income. This does not apply in the case of felonies when the offender and the injured party do not live in the same household.

The following example from the recourse department of the Health Insurance Fund of Lower Austria illustrates the level of costs that may accrue for the health care system:

A man commits five acts of violence against his wife within short time. As a result, his wife sustains a laceration to her head, abdominal bruising, a fracture of her right arm and cuts in her face. What costs will result? First, the woman consults a general practitioner, then it turns out that she will need hospital treatment, therefore ambulance services are needed. After leaving hospital, additional costs for visits to the doctor and for medicines follow. As a further consequence, the woman needs psychotherapy because she suffers from panic attacks and anxiety neurosis.

In order to show in more detail the costs that the health care system has to pay because of domestic violence, the estimates from the study on health care costs mentioned before were used to derive the proportionate costs accruing for Lower Austria (women aged between 16 and 85).

### Costs for the health care system caused by domestic violence (EUR)

<table>
<thead>
<tr>
<th>Health insurance benefits</th>
<th>Austria</th>
<th>Lower Austria</th>
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<tbody>
<tr>
<td>Medical treatment</td>
<td>1 112 800</td>
<td>211 432</td>
</tr>
<tr>
<td>Stay in hospital</td>
<td>9 671 000</td>
<td>1 837 490</td>
</tr>
<tr>
<td>Medicines</td>
<td>1 207 500</td>
<td>229 425</td>
</tr>
<tr>
<td>Psychotherapy</td>
<td>1 978 600</td>
<td>375 934</td>
</tr>
</tbody>
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Source: Haller/ Dawid 2006; calculations by Amler
This list does not include the costs of other health insurance benefits (clinical psychology services, ergotherapy, physiotherapy, logopaedia, etc.). The funds needed for psychotherapy are higher in fact because Lower Austria, in addition to a co-payment regulation, meanwhile has also established a network of psychotherapy services throughout the province, financed by the Health Insurance Fund.

The above figures primarily relate to physical injuries that are visible and where follow-up costs can be attributed to these injuries. However, in many cases the consequences – of both physical and psychological violence – are psychological in nature, and far more serious. For instance, people who have sustained a psychological trauma often suffer from physical symptoms as a consequence. However, these physical complaints cannot always be attributed to psychological violence because they do not directly coincide with the violence committed. The physical symptoms that are frequently found include chronic headache, back pain, cardiovascular disorders as well as panic attacks or lower abdominal pain.

Patients who suffer from such symptoms have often consulted doctors over many years but no somatic cause of their condition is found. Even when they are encouraged to start psychotherapy they often insist that their symptoms must have physical causes. They are convinced that they suffer from a somatic disease and are not ready to admit that there may also be a psychological component. In this context, one often hears statements such as, ‘But I’m not crazy! I don’t make up my symptoms!’

When attempts are made to identify organic causes of their symptoms, the patients cling to any physical diagnosis even if it is not the true reason for their complaints (e.g., silent gall stones). As a result, pharmaceuticals are prescribed, which may lead to a continuous use of pain killers and in some cases to dependence from medicines. However, also unnecessary surgery is no rare occurrence.

It is difficult to give an estimate of the costs of such attempts undertaken over many years to find the cause of complaints.

In many of these cases, psychotherapy could be a sensible form of treatment. Therefore, the Health Insurance Fund of Lower Austria has taken measures to this end, on the one hand by providing psychotherapy services all over the province, with cost coverage by the Health Insurance Fund, and on the other, by specific psychotherapy services for women that is provided in women’s counselling centres (on the basis of an agreement with the Women for Women Association).

Also children, in addition to women, are affected by domestic violence. They have either become victims of violence themselves, or they have been eye or ear witnesses of violence committed against their mothers. Children are often affected not only by physical violence but also sexual abuse.

In children, any form of violence will also have psychological effects, which often show as physical symptoms or developmental disorders. This may even take the course that former victims become offenders later in life. Therefore it is essential also in the case of children to treat not only physical injuries but also the resulting psychological trauma.

The Regional Health Insurance Fund of Lower Austria is offering assistance also in this respect so that children and young people affected by violence may be supported as efficiently as possible. In addition to the general provincial network of psychotherapy services, there are specific treatment options for children and young people who have become victims of physical or psychological abuse, sexual violence or gross neglect: for instance psychotherapy sessions in the children’s protection centres of associations like Möwe or Kidsnest.
This summarises the most relevant facts relating to the consequences of domestic violence and the resulting costs for the health care system. However, it is still more important in fact to prevent domestic violence to the greatest possible extent. Under the Protection Against Violence Act, good options exist in this field. Prevention measures such as information, education and further training are essential in this context.

In this way, not only could the costs of treatment of subsequent injuries be reduced, but also the people affected, i.e., women, children and young people, would be spared incredible suffering.

References


The S.I.G.N.A.L. association was founded in 1998 as an interdisciplinary cooperation project of professionals and agencies in the fields of health care, anti-violence work, health research and health policy. S.I.G.N.A.L. is a member of the Women’s Health Network in Berlin, with a seat in the Commission of Experts and the Round Table of the State of Berlin to combat domestic violence.

It was especially the connection of medical and nursing knowhow with experience made in the context of anti-violence work that has contributed to the advancement of intervention measures in the health care sector to respond to violence against women.

**Initial situation and goals**

The starting point was the knowledge that domestic and sexual violence has massive consequences for the health situation of women and their approaches to health. In many cases people in health care occupations are the first, and often the only ones, who actually see the injuries and complaints caused by violence. Abused women often turn to health care institutions, but there the violence they suffer is hardly addressed: this theme is a taboo to a large extent. As a consequence, these women typically receive inadequate treatment, over- or undertreatment again and again, and they have the feeling that they are ill but that nobody can help them.

Still, the health care sector is a key player in the support structure. Its services are used by all women throughout their lives; it therefore meets the requirements for targeted low-threshold intervention but does not use this potential.

The aim of S.I.G.N.A.L.’s activities is to introduce and apply the S.I.G.N.A.L. intervention programme in health care institutions in order to improve significantly the health situation of abused patients. Another goal is to establish in education and (further) training programmes for health care staff the theme of domestic violence and intervention.

Health care institutions should become links between patients on the one hand and support services beyond exclusively medical treatment and care on the other (counselling and protection centres). The intervention programme addresses physicians, nurses, midwives and paramedical workers in hospitals and offices of established doctors who have direct contacts to patients suffering violence. Specific training modules have been prepared to assist implementation and application.
The intervention programme lists six guidelines for people in health care occupations.

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<th>S</th>
<th>Speak: address your patient.</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>Interview: ask concrete, simple questions.</td>
</tr>
<tr>
<td>G</td>
<td>General examination that takes into account new and previous injuries.</td>
</tr>
<tr>
<td>N</td>
<td>Notes: write down and document all findings and information in such a way that they may be used before court.</td>
</tr>
<tr>
<td>A</td>
<td>Ascertain: does the patient require protection at present?</td>
</tr>
<tr>
<td>L</td>
<td>Leaflets: offer the patient leaflets or other information materials that list emergency phone numbers and support services.</td>
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</table>

Health care professionals should be aware of and play an active role in
- identifying experience of violence by asking the appropriate questions when taking the case history and treating the patient;
- documenting the effects of violence in a way that permits use as evidence in order to be able to assist the patient in the context of criminal or civil proceedings;
- informing patients about available assistance and protection services.

At the end of 1999 this programme was first introduced in the emergency room of the Benjamin Franklin University Hospital in Berlin (today's Charité Campus Benjamin Franklin). Thanks to funding by the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth, from 2000 to 2003 a scientific evaluation could be carried out, which provided important knowhow for future work.

**Practical results of the scientific monitoring process**

For implementation to be effective, the intervention programme must be backed by the hospital management and accepted by staff representatives. In addition, an internal project group must be established in the hospital, consisting of nurses and if possible, also physicians (preferably in senior positions), who may dedicate their work time exclusively to the promotion of intervention activities. The link between S.I.G.N.A.L. and the intramural sector permitted an important transfer of knowledge between anti-violence activities on the one hand and nursing and medical services on the other.

Specific attention was paid to the frequency of domestic violence as well as the role that physicians and nurses play for women suffering violence.

**Results of the patient survey**

The survey among patients revealed high lifetime rates of experience of domestic violence and confirmed international studies that indicate a wide range of effects that domestic violence has on the state of health of the women concerned.

A total of 806 women were asked about experience of physical, sexual and emotional violence. 52.2% indicated experience of at least one form of violence. 42.6% had experience of at least one form of violence after the age of 16. 36.6% of these women indicated experience of domestic violence after the age of 16, and 4.6% of them, during the past year. 1.5% of patients had come because of an acute situation of abuse. This result was surprising for many health care staff because so far they had been convinced that cases of domestic violence were hardly ever found among emergency room patients. As a rule, if at all, the staff had only been aware of acute cases of women who had suffered physical violence or victims of rape accompanied by police officers.
Routine questions about experience of violence

The requirement to conduct routine interviews with all patients in the context of taking the case history continues to be the most controversial of all intervention measures. Therefore the women concerned were asked what they personally thought of routine questions about experience of violence.

Subjective view of routine questions about experience of violence

67% of the women interviewed indicated that they would turn to physicians if they had suffered violence. They said it was important that a doctor showed understanding but that it was less relevant whether the physician was a man or a woman. Only 7.5% of all women had ever been asked by doctors about experience of violence.

A surprising aspect was that the women definitely were in favour of questions about experience of violence in the context of taking the case history. However, this intervention step continues to meet with great reluctance on the part of physicians and also nurses. Many regard this as embarrassing and feel awkward when asking such a question, and there is much uncertainty, in particular if a patient does indicate experience of violence. But as the majority of women who have suffered violence do not turn to an emergency room immediately after an acute situation of abuse, with distinct, visible injuries, it is important to ask patients about experience of violence, because otherwise this problem will remain unknown.

In order to reduce uncertainty regarding adequate responses to women with experience of violence, further training events on the subjects of domestic violence, its health consequences, intervention and documentation have shown to be essential elements of the implementation process that have proved their worth. It is a must to have further training modules for specific occupational groups, with a strong practical orientation, and which include training in interviewing skills.

In the context of this model project, documentation standards for subsequent use as evidence were established in an emergency room for the first time and further developed in cooperation with public prosecutors and forensic experts.

Central results of the model project

- In the context of domestic violence and its health consequences physicians and nurses play an important role for contacts with women.
- Nurses may more easily be motivated to engage in interventions than physicians.
- There are great uncertainties regarding interviews with patients.
- There are structural barriers (work conditions, resources) and personal barriers that affect interventions and prevent the full use of existing potentials in health care for the benefit of abused women.
- After the introductory phase the S.I.G.N.A.L. intervention programme will not keep running smoothly by itself but requires continual input, control and further advancement.
Further training programmes should be organised at regular intervals; they should be firmly established in the institutional structures and not only take place as a response to staff turnover.

For further information on the results please consult the S.I.G.N.A.L. manual.¹

Further development, dissemination and consolidation of intervention measures

Primarily the proven standards for the implementation process were communicated to a further number of hospitals and clinics interested in intervention programmes. At present, S.I.G.N.A.L. is cooperating with five Berlin hospitals or clinics, respectively; and in two other cities S.I.G.N.A.L. projects were started.

The different experiences of the implementation process that have been reported highlight the fact that quality assurance is needed so that the results achieved may sustainably be consolidated at structural level. While in the beginning of such a process it is of central relevance to be able to rely on a number of committed individuals, at the next stage the focus has to be placed on project structures that ensure its continuation independent of these individual actors.

The methods of quality assurance that have been developed so far include: establishing at institutional level a regular routine of further training; compulsory participation in at least one training course for nurses in hospitals; process documentation on the state of implementation as well as statistical documentation of case files that may be used in court (performance documentation); links between projects in hospitals or clinics and other actors such as police authorities and anti-violence organisations in order to strengthen the intervention chain and also make visible the intervention activities performed in the intramural sector.

S.I.G.N.A.L. has concluded agreements with a part of the training institutions for health care occupations in Berlin, so that each training scheme includes a two-day course in domestic violence matters. For the structural consolidation of this subject in all health care education and training institutions, our present aim is that knowledge in the field of domestic violence, health-related consequences and intervention should also be tested in the context of exams. This, in turn, would make it obligatory to teach this subject.

The funds provided by the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth made it possible to draw up and test a curriculum for train-the-trainer courses at federal level so that intervention themes are also communicated to the target group of multipliers.

At present, S.I.G.N.A.L. is planning the implementation of a federal model project funded by the Federal Ministry of Family Affairs, Senior Citizens, Women and Youth, which will focus on implementing intervention measures, in particular documentation for use as evidence, at various locations in Germany, and for the first time in offices of established physicians. In this way, additional actors in the health care system would be involved in the intervention chain responding to domestic violence.

Generally speaking, in recent years much has been achieved in the health care sector. Domestic violence, step by step, ceases to be a taboo in health care provision. Compared to the developments in the police authorities, the situation in the health care sector is more difficult because it consists of a great number of small and large individual providers, with hierarchical internal structures but without central control. Therefore, each individual health care provider has to be convinced of the idea of intervention.

¹ Hellbernd/ Brzank
The decisive point is whether in future, through public relations and networking activities, it will be possible to convince and involve a rising number of specialised associations, professional bodies, chambers and insurance funds and thus to implement a new general standard of intervention and consequently bring about a change in the profile of health care service providers. Initial approaches already exist, which gives rise to hope. The health care sector continues to be one of the central support systems in the chain of intervention; however, it is necessary to activate its full potential.

References

PRO TRAIN is a project of the Daphne II programme of the European Commission, with a project period of two years.

Background and goals of the Daphne II programme

The Daphne II programme runs from 2004 until 2008 with a budget of 50 million euros, as part of the Fundamental Rights and Justice General Programme of the European Commission, which provides specific funding in order to combat violence against children, young people and women. In the Daphne II programme, support is provided to organisations across sectors which develop measures and actions to prevent or combat all types of violence against children, young people and women and protect victims and at-risk groups.

This is based on a broad concept of violence, which includes sexual abuse and domestic violence, commercial exploitation and mobbing in schools, trafficking in human beings as well as violence against people with special needs, minority groups, immigrants or other groups that need protection. In June 2007, the European Parliament and the European Commission unanimously decided to continue the Daphne programme from 2007 to 2012 and to increase the corresponding budget. A call for proposals is to be expected soon.¹

The projects funded under the Daphne II programme aim to ensure the protection of physical and psychological health at a high level:
- protection of children, young people and women against all forms of violence;
- prevention measures;
- support services for victims of violence;
- protection of especially vulnerable groups (e.g., immigrants, women and girls with special needs);
- expanding the knowledge basis regarding the mechanisms of violence and work with perpetrators;
- collecting data on violence in Europe;
- support of non-governmental organisations and other organisations active in this field;
- promotion of transnational measures.

¹ For further information see http://ec.europa.eu/justice_home/funding/daphne3/funding_daphne3_en.htm
The specific objectives of the Daphne II programme include:
- identifying good practice models and exchange of experience;
- mapping surveys, studies and research;
- field work with the involvement of the target group of the programme;
- creation of sustainable multi-disciplinary networks;
- designing educational packages and training schemes;
- development and implementation of treatment programmes;
- awareness-raising activities targeted to specific audiences.

**PRO TRAIN**

Despite international normative guidance on the need for comprehensive, multisectoral strategies, most capacity building teaching measures in the field of domestic and sexual violence continue to train the relevant professions separately. PRO TRAIN aims to strengthen violence prevention by developing a multi-professional training programme based on proven practice. Its addresses professional groups involved in the prevention of and service provision for people affected by domestic and sexual violence. A special focus is placed on further training of health care professionals because specific demand has been registered in this field. The project is based on the training and train-the-trainer programmes developed in the context of Daphne but also integrates evaluated practice development such as the S.I.G.N.A.L. intervention programme\(^2\) in Germany or Finland's multi-professional training programme.

**The key role of the health care sector**

The results of various national and international studies have underlined the key role that the health care sector plays for identifying the effects of violence and for referring to specialised support organisations those persons who have suffered violence. The health care sector, due to its institutional framework and its interest in avoiding lengthy high-cost treatment, is a perfect actor for performing prevention tasks and competent intervention responding to effects of violence in the context of medical treatment. In many cases physicians, nurses and other health care professionals are the first to be confronted with effects of domestic violence as all women will turn to health care institutions repeatedly. Only a small percentage of acts of sexual abuse and domestic violence are reported to the police and are thus known officially. Chances are greater by far that the consequences of violence are noticed in the course of routine medical examinations because

- health care institutions are consulted by all population groups, independent of their social situation, gender and age;
- medical duties include the task to find the causes and influencing factors regarding injuries, complaints and diseases. This also includes taking into account social factors as causes of health problems;
- health care professionals are bound by confidentiality and enjoy a high level of trust among the general population.\(^3\)


\(^3\) Hagemann-White/ Bohne; Hellbernd/ Brzank; Hellbernd
The advantages of the multi-sectoral approach in training programmes

Multisectoral approaches in further training programmes may help professionals of different occupational groups develop a common basis of understanding of interpersonal and domestic violence. The specific tasks and contributions of the individual actors become evident, and activities may be combined for effective service provision in cases of domestic violence. This will support and advance a coordinated collaboration in theory and in practice.

A multi-professional training programme may serve as a trigger for cooperation alliances because on the one hand, it ensures that participants have the same knowledge basis regarding violence in gender relations and on the other, the tasks that the individual professional groups perform in the intervention chain become visible. In addition it will enhance the resources for the further communication of knowhow and also the cooperation skills of the individual actors because the professionals involved know each other and their specific roles.

If cooperation alliances already exist, multi-professional training programmes may serve the purpose of reviewing and modifying agreements and protocols, and subject matters may be treated in more detail.

Measures taken in the context of PRO TRAIN

In the course of the project experts, on the basis of a comprehensive questionnaire, will take stock of already existing capacity building programmes and training schemes in the health care sector, of interdisciplinary programmes and of train-the-trainer schemes in the partner countries involved. Proven models of good practice and existing materials will be used for drawing up an innovative, multi-professional training programme and specific packages for the health care sector. This training programme will be pilot tested and evaluated in Austria, the Czech Republic, Finland, France, Germany, Hungary and Italy. Then a final version of the programme will be drawn up on the basis of experience made in the context of implementing the corresponding measures on the one hand and the results of the evaluation on the other, and published in English both on the Internet and as a CD ROM. The framework and main components of the programme will be translated into the relevant languages of the participating countries. In addition, the experts will define criteria for good practice in multi-professional training programmes. The final programme and strategy outline will be disseminated through various networks in particular in those countries of the European Union where no, or insufficient, training programmes and materials are available as yet.

PRO TRAIN has also established an interdisciplinary advisory group that will provide input regarding the completion of the training programme and materials as well as good practice criteria for multi-professional capacity building programmes:

Freja Kerki, WHO-Euro Prevention of Violence, Denmark
Nancy Gage-Lindner, Hesse Department of Social Welfare, Germany
Marianne Hester, School for Policy Studies, University of Bristol, UK
Patrizia Romito, University of Trieste, Italy
Marianne Springer-Kremser, Medical University Vienna, Austria
Kirsi Sirola, Diaconia University of Applied Sciences Pori Unit, Finland
Marianne Kristiansson, Department of Forensic Psychiatry, Stockholm, Sweden.
So far, the following questions have shown to be of relevance:
- What actors in the health care sector should primarily be involved in multi-professional cooperation?
- In which way can it be ensured that good knowledge will be translated into good practice?
- How can the effectiveness of good practice be assessed?

**PRO TRAIN partner organisations**

University of Osnabrück, Germany: Coordinator
Sabine Bohne, Christine Freitag
http://www.uni-osnabrueck.de

University of Helsinki, Finland
Sirkka Perttu
http://www.helsinki.fi/palmenia/english/

S.I.G.N.A.L. Association, Germany
Hildegard Hellbernd
http://www.signal-intervention.de

NANE Women’s Right Association, Hungary
Judit Wirth
http://www.nane.hu/english/mission_goals.html

Institut de l’Humanitaire, France
Cécile Morvant
http://www.humanitary.org/index.html

Associazione G.O.A.P., Italy
Beatrice Biggio
http://www.goap.it/info/ricerca.htm

Emergency Medical Services of the Central Bohemian Region, Czech Republic
Jana Seblová
http://www.uszssk.cz

Austrian Women’s Shelters Network/WAVE, Austria
Rosa Logar
http://www.wave-network.org/start.asp

Gesine – Women Helping Women Association, Germany
Marion Steffens

**References**


The Vienna Women’s Health Programme and the 24-Hour Women’s Emergency Hotline of the City of Vienna have drawn up a further training model for hospital staff on responses to victims of violence.

Violent acts against women and children, apart from the visible physical and immediate psychological consequences, also lead to manifold medium- and long-term health problems such as sleeping disorders, trauma, depression or addiction. In addition to health conditions, domestic violence also involves high subsequent costs for the government, the business sector and for individuals. According to an assessment by the Institute of Conflict Research, the cost of violence against women and children amounts to an annual 78 million euros in Austria, with 14 million euros accounted for by health care providers and 12.3 million euros by loss of work hours.¹

Women who have experienced violence need hospital treatment up to 10 times as often as women not affected by violence, and because they are ashamed, they also tend to change doctors particularly often. Therefore, workers in the health care sector play a key role for identifying early signs of violence committed and for initiating support measures for the women and children concerned.

The fight against, and early detection of, violence against women is one of the focuses of the Vienna Women’s Health Programme. Upon the initiative of Beate Wimmer-Puchinger, Women’s Health Commissioner of Vienna, and Karin Spacek, the former head of the Women’s Emergency Hotline of the City of Vienna, the Violence Against Women and Children Curriculum was implemented between 2001 and 2006, as a model project aimed at awareness raising and further training of staff of hospitals run by the City of Vienna in order to improve responses to victims of domestic violence.

The project was organised as a multi-agency initiative: under the coordination of the three City Councillors of Health, Women, and Children/Youth, it was run by the Vienna Women’s Health Programme, the 24-Hour Women’s Emergency Hotline of the Vienna Municipal Department of Women’s Affairs, the Youth and Family Offices of Vienna and the Vienna Hospital Association, in cooperation with the Vienna Federal Police Headquarters and the Vienna Forensic Medicine Institute.

¹ Haller/ Dawid
From demand analysis to implementation

A survey conducted in 2000 among doctors and nurses of two hospitals showed that
- 56% of respondents had been confronted with patients who had become victims of physical violence;
- 86% of physicians and skilled nurses, during education and training, had not learned how to respond to victims of violence among patients. Only one out of four said they were well informed.

Eight out of ten respondents indicated need for more information on support services for victims of physical and sexual violence. In 2001, a further training pilot programme on responses to victims of violence was organised at Danube Hospital and Kaiser Franz Josef Hospital in Vienna. After its revision, it has systematically been made available to the staff of all hospitals run by the City of Vienna. The aim of the Curriculum is the communication of the following aspects:
- raising awareness among hospital staff of the problem of violence;
- improving early detection;
- establishing treatment standards;
- streamlining internal communication processes;
- preparing an emergency treatment plan;
- communicating knowhow on extramural assistance resources;
- establishing a victims’ protection group in hospital.

The Curriculum was implemented over a period of five years, and all training courses were held in the individual hospitals. The best setting turned out to be two-day events (of 6.5 hours a day). A specific feature of the courses was their interdisciplinary and interprofessional audience, which included physicians as well as nurses, midwives, psychologists, social workers and administrative staff. The persons who were invited to participate came from the departments of ophthalmology, otolaryngology, gynaecology, psychiatry, paediatrics, internal medicine, surgery, dermatology, urology as well as the accident and emergency outpatient clinics. The lectures were given by experts from the 24-Hour Women’s Emergency Hotline, the Youth Offices, the Police, the Institute of Forensic Medicine and, at a later stage, also the women’s shelters, so that links between hospital staff and extramural service providers were built. The teachers took into account the subjects of the five Curriculum modules:
- forms and consequences of sexual and physical violence against women;
- forms and consequences of sexual and physical violence against children;
- preservation of traces and DNA analysis – work performed by the police and forensic medicine;
- legal information on reports to the police; the Protection Against Violence Act; the rights of victims, possible scope for action by hospital staff according to the Physicians Act; and the Hospitals Act;
- presentation of good practice examples of victims’ rights groups at hospitals in Vienna.

In addition, special information leaflets with guidelines for action as well as pocket-size emergency check cards were distributed among hospital staff. Separate information cards were prepared for people turning to outpatient clinics.

Treatment standards and a new victims’ protection group

As a consequence of their good cooperation, 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. For this purpose, special instruction events were organised in the corresponding hospitals.
At 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 model of the already existing victims’ protection group at Vienna Wilhelminen Hospital, which had been presented as a good-practice example in the Curriculum. Workers of the two victims’ protection groups gave lectures in which they talked about their practical work and thus contributed to the transfer of knowhow to other hospitals.

**880 participants completing the further training programme**

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. A similar composition of audiences was also registered in the S.I.G.N.A.L. counterpart project at Berlin’s Charité hospital.

The Vienna Hospital Association conducted an anonymous feedback survey among the participants in the Curriculum at two hospitals. The respondents gave a very positive evaluation regarding the presentation of the subject matter as well as its practicability. Three months after the training, they said that the knowhow obtained in the Curriculum was very useful in practical daily work and that the information materials provided were a great help. Many of them indicated interest in more further training events on violence, better links among departments as well as other institutions and more active participation on the part of physicians.

After the pilot project had been completed in all hospitals of the City of Vienna, the hospitals of the Vienna Hospital Association agreed to offer internal training events in victims’ protection for their staff at regular intervals, modelled according to the Curriculum. This is an important step for a sustainable support of staff in their key role with regard to early detection of domestic violence. Another central step would be to integrate this subject in the general training curricula.

**A manual documenting the model project**

The experience made with the Vienna Curriculum have met with great interest in both Austria and at international level and have been documented in a manual: it describes the planning and implementing process of the Curriculum, presents the pioneer work by the victims’ protection groups at Wilhelminen Hospital and Danube Hospital and summarises major insights derived from the model project. The manual (Violence Against Women and Children Curriculum. Victim Protection at Hospitals in Vienna) is available in German and in English. It may be ordered at the Vienna Women’s Health Programme (phone +43 1 4000 66771) or the Women’s Emergency Hotline (phone +43 1 71 71 9) and downloaded from the website of the Vienna Women’s Health Programme: http://www.frauengesundheit-wien.at/export/sites/fsw/diesie/downloads/broschueren/Violence_Manual_2006.pdf

**References**

In order to be able to recognise the health consequences of violence, the health care professions active in this field should be familiar with the definition as well as the forms and patterns of violence against women.

Definition of violence against women: The Beijing Declaration of 1995

According to the Beijing Declaration of 1995, the term ‘violence against women’ denotes any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life.

In line with this definition, violence against women encompasses
- physical, sexual and psychological violence occurring in the family, including battering of women, sexual abuse of female children in the household, dowry-related violence, marital rape, female genital mutilation and other traditional practices harmful to women, non-spousal violence and violence related to exploitation;
- physical, sexual and psychological violence occurring within the general community, including rape, sexual abuse, sexual harassment and intimidation at work, in educational institutions and elsewhere, trafficking in women and forced prostitution;
- physical, sexual and psychological violence perpetrated or condoned by the State, wherever it occurs.

As used in our everyday work, the term gender-based violence comprises the following forms:
- physical violence: this includes battering, pushing, kicking, punching, choking, burning, using objects to inflict injuries, murder;
- psychological violence: verbal abuse, humiliation, ridiculing a woman in public, armed or unarmed threats, frightening a woman or reporting her to the police; allegations such as saying the woman is psychologically ill etc.;

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1 Beijing Declaration
2 Fröschl et al.; Hoffmann
- sexual violence: all actions directed against the sexual self-determination of women: rape, sexual assault, forcing a woman to look at porn material, etc.;
- social violence: control and isolation (e.g., prohibition to contact others, locking up a woman, cutting off or taking away the telephone);
- economic violence: abuse of financial power;
- stalking (persistently following or harassing a person). This often happens during or after a divorce/separation. Reports of women concerned have shown that in many cases, there is a previous record of violence in the relationship.

In most cases, the enumerated forms of violence do not occur separately, and over time they tend to become more frequent and more serious. For both women and children, the time of divorce or separation is the most dangerous phase. Therefore, during all interventions the situation of children, who are (also) concerned, should be taken into account.

**Women who are especially vulnerable**

Male violence may affect any woman, independent of age, nationality, education, income, etc. However, there are certain groups of women who are facing particular problems, which makes them especially vulnerable:
- women with physical or mental disabilities are especially dependent on the abuser and sometimes are not able to defend themselves or get help;
- women with psychological diseases may be fear not to be taken seriously due to a psychiatric record;
- women who nurse a male relative have especially strong inhibitions to separate, because they feel they abandon someone for whom they are responsible;
- older women find it next to impossible to start a new life; they are economically dependent, have no job opportunities, etc.;
- immigrant women often do not dare to get help, because their residence permit is linked to that of their husband, or because they fear additional discrimination.;
- girls/women in forced or arranged marriages (in this context, minors with Austrian citizenship – on account of naturalisation – deserve special notice);
- asylum seekers are often affected by several forms of violence (rape during wartime, exile, domestic violence);
- women who work in the field of prostitution are particularly stigmatised and exposed to various forms of violence.

Health care workers are increasingly faced with women affected by human trafficking and with girls and women who were exposed to genital mutilation. Therefore, they should have the knowhow to offer medical and psychotherapeutical treatment and support to such women or to refer them to specific organisations.

**Ground-breaking health policy framework established by the World Health Organization (WHO)³**

The WHO European Region has attributed top action priority to combating violence against women. An essential prerequisite for fighting violence against women is to acknowledge domestic violence and rape as issues of public health.

³ WHO
According to the WHO a gender-specific view is necessary also in the field of health policy. Only from such a perspective will it become apparent that certain forms of health damage concern primarily women rather than men (or the other way round) and that gender-based disadvantages will entail the corresponding health consequences. Better understanding of the causes of disease will make it possible to develop more effective measures for improving women’s health.

**Key position of the entire field of health care**

In Germany, a representative survey explored the extent of violence against women, the health consequences of violence and the role of the health care system in this context. According to this survey, one out of four women aged between 16 and 85 who had lived in a relationship was confronted, in several instances, with physical and/or sexual violence on the part of their male (ex-)partner. One third of the respondents were exposed to physical and/or sexual violence between 10 and 40 times. 55% of the women who experienced physical violence and 44% of the women who were affected by sexual violence suffered physical injuries. More than one third of the women who suffered physical injuries (37%) obtained medical help. The survey also shows that physical and sexual violence are closely linked to psychological violence and that in the course of the relationship violence becomes more frequent and more serious.

Depending on the type of violence (psychological, physical or sexual), between 56% and 83% of the women concerned reported various kinds of psychological consequences. According to the survey mentioned above, immigrant women were affected by violence more frequently and more severely. Another result was that violence experienced during childhood/youth increases the risk of victimisation in adulthood.

Women need medical help because they cannot handle the consequences of violence by themselves. Women who ask the police for help are hardly ever identical with those turning to the health care system for help. Physicians, health care workers, nurses and midwives are usually the first persons that women affected by violence are contacting. Therefore, those who work in the health care system have a key function in realising that violent acts have occurred, what type of help to offer, how support will be continued and further violence prevented.

**Understanding violence against women as a traumatic experience**

In our society violence against women is such a matter of course that the related health damages are often underestimated. In many cases, those concerned are expected to cope even with massive violent attacks within a short time. If neither injuries nor psychological, psychosomatic, or psychiatric symptoms that occur as a consequence of violence are recognised as such, this may lead to false diagnoses and treatment (e.g., mistaking these consequences for psychological diseases).

The acute and long-term effects of violence on the psychological, physical, sexual and reproductive health and on the social life style are many. Here is a list of the various possible consequences:

- post-traumatic stress syndrome
- prolonged anxiety and sleep disorders
- relational and sexual disorders
- depression, suicidal tendencies

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4 IFF/ infas
5 Fröschl/ et al.
6 Hagemann-White/ Bohne
- tendency towards addiction or addictive behaviour
- chronic pain.

In the case of sexual traumatisation during childhood, prolonged health problems become manifest. Examples are:
- complex post-traumatic stress disorders
- chronic abdominal pain
- eating disorders (bulimia) and respiratory disorders
- borderline syndrome.

**Frequent effects of rape**
- injuries in the genital area, other physical injuries
- traumatic and post-traumatic stress disorders
- long-term anxiety
- pregnancy-related inner conflicts.

**Frequent effects of violence committed by partners**
- (multiple) injuries
- risks during pregnancy, gynaecological disorders and diseases
- chronic gastro-intestinal disorders
- headaches, neck and back pain
- depression and use of psychotropic substances

**Aspects that influence health consequences of violence**

Whether, and to what extent, women can deal with psychosocial stress largely depends on the following aspects:
- duration, type and extent of experienced violence
- options and strategies to escape or prevent violence
- personal experience and individual capacity to cope with stressful events
- acute and chronic emotions: fear, disgust, rage, shame, grief, scorn, etc. stimulate the organism
- types of memory
- efficiency of help and social support
- social, political and economic situation.

**Consequences of gaps of knowledge in the health care sector**

Society pays a high price for lack of knowledge about the scope and the types of violence in gender relationships and about the role of violence for the development of health disorders:
- pharmaceutical treatment and surgery based on a faulty diagnosis of the cause of complaints
- complaints become chronic and secondary diseases occur as a consequence of undiscovered primary causes of the complaint.

Psychosocial consequences for women who receive no support are just as severe.

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7 Springer-Kremser
8 Explicit versus implicit memory. Implicit memory (hippocampus) stores early experiences that are not consciously remembered and cannot be recalled on purpose. This explains why traumatic childhood experiences may still cause suffering in adulthood. Contrary to implicit memory, explicit memory can be consciously reproduced.
9 Bundesministerium für Jugend, Familie, Senioren und Frauen
Violence against women: The role of the health care system. An educational project for the medical occupations in the Lower Austrian health care system

From 2000 until 2006, 66 two-day seminars, workshops and information events were organised for 1 289 participants working in the Lower Austrian health care sector. Approximately 1 250 interested representatives of the health care system, the police, Healthy Cities of Lower Austria, women’s organisations, health-policy and journalism participated in project presentations and expert meetings and conferences which mainly took place in Lower Austria, but also in Vienna, Styria and Carinthia.

Complementing the events, a guidebook on efficient interventions in the health care system was compiled, of which 15 000 copies were distributed. The further training programme for medical occupations11 was adapted to the respective occupational group and a website on violence against women as a public health issue was designed (www.gewaltgegenfrauen.at).

The budget available for this project was 108 000 euros; the share of internal financing of the Lower Austrian health care system is 22%. The major part of the training courses was covered by external financing (Women’s Office of the Province Government of Lower Austria: 26%, Academy of the Province of Lower Austria: 18%, Health Department of the Province Government of Lower Austria: 13%, etc.).

Aims of further training:
Action competence through creating awareness and increasing knowledge

Those who have participated in the training are able to
- recognise types and patterns of violence and their severe – acute or long-term – health consequences;
- influence the support procedure and the prevention of further violence in a positive way;
- take adequate intervention steps in everyday practice (e.g., handling crisis situations, communication skills, emergency planning, knowledge about the legal situation);
- prepare documentation and secure evidence for court procedures;
- make use of and improve cooperation with internal services (e.g., groups for the protection of children), external organisations (women’s shelters, police, intervention centres, counselling centres for women, etc.) and established physicians;
- reflect on their own positions regarding women who are affected by violence.

Target groups of further training

During the first years of the further training project, the focus was on hospital departments and outpatient departments of surgery and trauma surgery as well as gynaecology/obstetrics. In the meantime, interdisciplinary courses were expanded to include the following medical groups:
- (trauma) surgeons, gynaecologists and other medical specialists, socio-psychiatrists and established physicians or specialists
- nurses
- nurses in training
- midwives (working freelance or in clinics)
- psychologists and social workers of the Lower Austrian social psychiatry system and other hospitals
- persons working in the extramural area of the Lower Austrian social psychiatry system
- persons working in the Lower Austrian addiction counselling centres.

10 Erdemgil-Brandstätter 2006a
11 Fröschl / et al.
Practical relevance of further training
Feedback from the participants confirms the practical relevance of the training. Here are some quotes in translation:
- ‘I will look closely rather than turn away.’
- ‘I wasn’t aware of all the different aspects of violence.’
- ‘I have reduced my prejudices.’
- ‘The training provides support in how to offer more professional help.’
- ‘Now I can recognise the effects of violence more easily and I got advice for dealing with related situations.’
- ‘The event had high practical relevance owing to specific examples, the experience that was presented, role play ...’
- ‘I am glad to have learned about different coping strategies.’
- ‘I have gained knowledge on the legal situation as well as confidence to meet the women concerned.’
- ‘I got some insights and assurance in dealing with the issue.’
- ‘I can support the women who have experienced violence in a better way and I also got to know some external organisations.’
- ‘I became aware of the importance of my own position.’
- ‘I had not been aware that there are so many ways in which I can help.’

Also (non-)governmental organisations and individuals from other provinces and from Germany, Switzerland and South Tyrol have shown interest in this training. After eight years of experience it can be said that the aims of the project have been reached. The participants are sensitised to the complex health consequences of violence, they have become aware of their important role in this context and obtained the necessary knowhow regarding possible interventions. This is evidenced by the increasing referral of women to counselling organisation and organisations for the protection of victims, as well as improved documentation. The work that is being done meets national and international standards, such as those defined by the World Health Organization (WHO). In the interest of all women experiencing violence and come to the Lower Austrian health care system for support, and for ensuring the continuation of this successful project, this health policy issue should be made part of the education and further training of all occupational groups in the Lower Austrian health care system.

We know from experience that it takes a long time, several stages of development as well as patience and energy until the issue of violence becomes an integral part of health care.

The serious health consequences of violence make it necessary to establish intervention programmes against domestic violence as a fixed part of health care.12

Objectives 2007–2008

Short- to medium-term objectives at province level
- meetings with representatives of the Health Department of the Lower Austrian Province Government;
- establishing interdisciplinary working groups in Lower Austrian hospitals (at the level of quality management);
- contacting the working group of directors of the Austrian health and nurses association;
- implementing the curriculum in the training of health care and hospital workers (with the aim of a medium-term change of the curriculum);

12 Hellbernd et al.
- continuing basic instruction in the field of ongoing training and education (of doctors, health care workers and nurses), organised via the umbrella organisation of province hospitals;
- continuing further training organised via the Lower Austrian Medical Chamber;
- continuing to establish a uniform documentation and evidence system according to the standards of forensic medicine (GÖG Health Austria/ ÖBIG);
- public relations work and distribution of the guideline ‘Ihre Hilfe entscheidet’ (Your support is decisive) by the umbrella organisation of province hospitals and through other channels.

**Overall objectives and demands**

In the sense of a modern, women-specific health policy, the following is also required:
- up-to-date surveys (prevalence surveys on the extent of violence against women, acute and long-term health consequences for women and children as well as costs incurred by society and the health care system, etc.);
- implementing uniform further training programmes also in other Austrian provinces, support and funding of existing initiatives by the Federal and Province Governments;
- implementing the issue of violence against women in the education, training, ongoing and further training of all health care occupations (within federal or province competence);
- a uniform documentation and evidence system corresponding to the standards of forensic medicine;
- promoting interdisciplinary cooperation and public relations work;
- integrating the health care initiatives into a national and/or international Action Plan against Violence against Women.

**References**


13 Erdemgil-Brandstätter 2006b


The beginnings

The impulse for establishing the women’s protection group at Vienna’s Wilhelminen Hospital in 1997 was that I had attended a training programme on responses to violence against women. Until then, working as a nurse in the accident surgery outpatient clinic of Wilhelminen Hospital, I had not questioned statements by patients but simply accepted what they said: that they had fallen from a ladder or down the stairs, etc. During that training I became aware for the first time that a number of injuries might have another cause and that it could be a good idea to ask further questions.

Together with the charge nurse of our department I decided to take action. Our first step was to contact the social worker in our hospital, whose work links hospital and extramural structures and who may refer women to service providers outside the hospital. The social worker welcomed our idea but was able to provide assistance only between 8 a.m. and 3 p.m. However, according to our experience, women frequently turned to us during weekends, nighttimes or holidays.

Around that time, the City of Vienna began to establish its 24-Hour Emergency Hotline for Women, which was at just the right time for us. We immediately contacted the then head of the Hotline and as a result it was possible to refer to the Emergency Hotline those women who came to the clinic in the night or during weekends because they had suffered violence.

At first it was a relief to be able to tell the women that they may call the Emergency Hotline, because we had no experience at all as far as dealing with violence problems was concerned, and therefore we were unsure how to go about it. We did not have the courage to ask the women about possible experience of violence. However, in one case, when I suspected that the patient had been abused I said on an impulse that her injuries were not consistent with what she had told us about her accident but that I rather thought she had been abused. The patient answered, ‘You are the first one to ask. I have often been to Vienna General Hospital and Lorenz Böhler Accident Hospital but nobody has ever shown any further interest in my case. I just received treatment. But you are the first one to ask me directly.’ Following this ‘success’ I have gradually become less reluctant to ask women directly whether they have experienced violence.

Establishing the women’s protection group

The next step towards founding the women’s protection group was to convoke a working group. First we worked in the form of a project, assisted by a student of psychology. Eventually, the project became a working group: the women’s protection group, most of whose activities can take place during our regular work hours. Regarding cooperation with other departments, we decided that the department of gynaecology should continue to be in charge of all sexual offences, while the accident out-
patient clinic and the two corresponding inpatient departments of accident surgery should provide services to patients with other types of injury.

We contributed to the preparation of the Violence Against Women and Children Curriculum, a further training programme for hospital staff run by the City of Vienna. In addition, we also hold further training events ourselves, for instance, for the emergency and patient transport services of the City of Vienna. We are also planning to contact the police authorities in this regard. We organise further training schemes in our hospital that are open to all occupational groups, from cleaners to physicians, because violence concerns all of us – either privately because you know a person who lives in a violent relationship or have suffered violence yourself, or because you are faced with violence in the context of work in hospital. It could happen that a patient tells the woman who is wiping the nightstand next to her bed that her husband has been abusing her, and the cleaner is left alone with this information and does not know what to do. We want to serve as a contact point for her in such a case.

**Reporting a case?**

An important aspect is whether a case should be reported to the police. If the woman or man is an adult we do not have the duty to file a report, except in cases of severe physical injuries or if the person in question is unable to manage their own affairs. However, if the incident is not known to the police and the patient does not want to report it we have to respect her decision unless she has severe physical injuries: in this case a report must be filed.

It is also essential to know whether the perpetrator still is in her/their flat. This is a crucial question, because the safety of a victim depends on adequate prevention. Eviction orders are not always issued, as often the perpetrator is no longer present when the police arrive. In many cases, also children are affected. In this context, it has to be ensured that no child is still staying in the flat. For instance, we were confronted with the following case: a woman came to us with her eight-year-old son but her second child, aged two, still was at home with the au pair. The woman was in great fear because the perpetrator had left the flat before the police arrived. She did not want to stay in hospital unless the two-year-old child was also admitted. We thought that this would not be a problem, and that we just had to make a phone call and ask the au pair to bring the child to hospital. But in fact, eventually the police had to intervene and free a hostage because the man wanted to give up the child ‘only over his dead body’. It took four hours until the child at last arrived safely at the hospital.

**Accommodation for women suffering violence**

Accommodation for persons affected by domestic violence is another vital issue. Is it possible for the woman to live with relatives or friends, or in a women’s shelter? If so, how will she get there? It is not possible to call a taxi and tell the driver where to go. The addresses of women’s shelters are kept secret, for good reasons. At best, the address is disclosed to a physician. As a rule, women suffering violence are taken to the women’s shelter by ambulance.

**Our services**

If violence is suspected or proven, we first offer the woman to talk about it with us, i.e., the nurses. Apart from this it is possible to contact the social worker, at least in the morning. It is important to have a separate room for talking so that no one will disturb us. The social worker does not tell us what the talk has been about but only informs us about the next steps, for instance, whether
the woman will go home or to a women’s shelter. We always offer her inpatient admission, especially during the night. In these cases the social worker is involved on the next day so they can inform the woman which assistance services exist outside hospital. The 24-Hour Emergency Hotline for Women is available around the clock in any case. Every woman who has suffered domestic violence gets an information booklet, independent of whether she will go to the women’s shelter or not. The booklets of the 24-Hour Emergency Hotline for Women are available at the hospital and we also have information materials of the Domestic Abuse Intervention Centre Vienna, which primarily cover legal information, in several languages. These booklets are displayed in three places: in the waiting room, at the contact point of the women’s protection group and at the women’s lavatory.

Preserving traces and documenting injuries

At Wilhelminen Hospital, DNA preservation has been practiced for three years. Our hospital was one of the first to use this method.

As a rule, a file is opened for every person who has suffered violence: not only in cases of proven abuse but also in cases where violence is suspected. The information entered includes the type of abuse, personal data and measures taken by hospital staff, as well as the names of physicians and nurses who had contact to the patient in question and whether photos were taken. In order to reduce the workload of the physicians, the nurses have agreed to take over the task to fill in the corresponding data.

These files are kept at the contact point and are accessible to all nurses of the outpatient clinic. At the same time, the information is saved electronically. At present we are in the process of changing over to exclusively electronic filing. This will make it possible to check at any time whether a woman has already been treated before because of suspected or proven violence.

Photo documentation

We also offer patients to make photos with a digital camera in order to have a visual documentation of their injuries, as experience has shown that photos, in addition to medical findings, are invaluable evidence, which may be of relevance in the context of court proceedings. This year, around half of patients who had suffered violence accepted our offer to document their injuries by means of photos. It took us quite a while to be able to make photos that are admissible as evidence before court. Thanks to the assistance by the Crime Scene Unit West of Vienna’s Criminal Police we have learned what aspects have to be considered when making photos so that they may be used before court (e.g., the injury shown on the photo must be clearly attributable to the patient in question). The photos are saved on CD-ROM and filed. The women concerned may always get these photos, while lawyers, police officers and other authorised persons are granted access only on the basis of a written request presented at the office of the outpatient clinic. Within the hospital, only the women’s protection group is permitted access to the photos.

Statistics

Statistical data on the cases we have documented are available as of 1999 only, because it took some time until all staff actually filled in the file sheets also in cases of suspected violence. Since 1999 (37 persons) the number of cases has risen continuously: to 76 in 2006, and this year 96 have been registered already. A rising number of women who turn to us either say that they are victims of vio-
ence or are identified as suffering violence, which shows on the one hand that the taboo on violence has been lifted and on the other, that awareness of violence has been raised among the staff.
IMMIGRANT WOMEN AND PROTECTION FROM VIOLENCE
RAVI K. THIARA
BUILDING GOOD PRACTICE
IN RESPONSES TO BLACK AND MINORITY ETHNIC WOMEN AFFECTED BY DOMESTIC VIOLENCE: ISSUES FROM THE UNITED KINGDOM

Introduction

This paper focuses on building good responses to black and minority ethnic (BME) women affected by domestic violence in the United Kingdom. It is recognised that terminology across Europe differs in the ways that migrant communities become ‘labelled’, and that the histories of migration, settlement, and organisation of these communities are very different across much of Europe. However, I will utilise the term ‘BME’ to refer primarily to women from South Asian, African and African-Caribbean communities in the UK, all of which have a long history of settlement and mobilisation.

BME women in the UK

According to the 2001 Census, BME women make up about 4% (7.9% BME population) of the total population in the UK, numbering 2.3 million out of a total BME population of 4.6 million. At around half of the total BME population, Asian and Asian British form the largest BME group; this is further broken down as 1.8% (1 053 411) Indian, 1.3% (747 285) Pakistani, 0.5% (283 063) Bangladeshi and 0.4% (247 664) other Asian. The category Black, including 1.0% (565 876) Black Caribbean, 0.8% (485 277) Black African and 0.2% (97 585) Black Other, constitute around a quarter of the total BME population. The category Mixed at 1.2% (677 117) forms around 15% of the BME population with a third of this group from white and Black Caribbean backgrounds. Chinese, at 0.4% (247 403) and Other at 0.4% (230 615) make up the remainder of the BME population.

We also know that 45% of the BME population live in London, with the West Midlands housing the second highest percentage (13%). The BME population is also known to be younger than the White British. Women from BME groups are less likely to be employed than White women – especially Bangladeshi (41.2%) and Pakistani (45.8%) women – and this gap has been consistent for the last 20 years. Thus, some BME households are more likely to have lower incomes than White households, with half of Pakistani and Bangladeshi families’ incomes falling 50% below the national average income. BME people are also more at risk of being victims of crime, especially adults from Mixed race (46% in last 12 months) or Asian backgrounds (30%).

Clearly, demographics have changed since the last census as newer groups of refugee and asylum seeking women and women from East European countries have migrated. As a result of this, in the...
domestic violence sector, many refuges are reporting higher numbers of BME women using their services than previously – some as much as 69% and others increases of up to a third. This is partly affected by who is counted as BME and partly through newer ways of service delivery – for instance UK Refuges Online. What is clear, however, is that there are continuing issues but also new challenges in delivering effective responses to BME women and children affected by domestic violence.

Domestic violence and BME women

The last decade in the UK has been a time of political change, with domestic violence being placed high on the political and policy agenda far more than ever before, leading to the Domestic Violence, Crime and Victims Act 2004 and a raft of guidance and policies among statutory services, as well as the development of particular interventions, and especially those focused on the criminal justice system responses to domestic violence. Recognised as the leading cause of morbidity for women aged 19–44 worldwide, in the UK, domestic violence costs 23 billion pounds a year. Concerns about the widespread nature of domestic violence among all groups in society, its pervasive impact on women and on children, amply demonstrated by research, and its cost to major health and social care services has led to some shifts in the way that statutory and voluntary agencies respond to this issue. Emphasis has generally been placed on the need for all agencies to give an appropriate response to the victims they encounter, i.e., mainstreaming.

Specialist BME domestic violence sector

There are different models of service provision for BME women, including specific BME services that are run for and by BME women, specialist provision located within mainstream domestic violence support services, and registered social landlord (housing associations) led provision. There are reportedly over 400 mainstream generic refuges providing advice and support to women and children nationally, of which around 30 were specific services for different groups of BME women and children but tended to be small in size. However, these have been disappearing, as highlighted by Imkaan, so that there are now only half of these services from five years ago. As part of the history of organisation against domestic violence, the specialist domestic violence sector has its roots in autonomous organisations, set up by BME women in the late 1970s and early 1980s. Whilst facing its own challenges, the BME sector has been the bedrock of the challenge posed to patriarchal practices within BME communities and the practice of racism in wider society. Thus it has been crucial to linking issues of race and gender (as well other forms of inequality) as they mark the lives of BME women and the service responses they receive. A related theoretical development has been in foregrounding conceptualisations of intersectionality and multiple oppression.

Specialist refuges, aimed at meeting the specific needs of Asian, African-Caribbean and African women and children, were set up to fill the gap that was left by the mainstream refuge sector. This was highlighted in research commissioned by Women’s Aid. Consequently, although undergoing some changes, specialist domestic violence services have been a crucial site of service delivery to marginalised groups of women and children over the past 30 years. Today, though challenged by newer pressures (a campaign was launched in February 2008 to safeguard the sector from threat posed to its existence), specialist domestic violence services are the source of valuable knowledge, insight, and experience about supporting BME women and children affected by violence and abuse. It is a sector that is also hugely valued by BME women, many of whom cannot envisage accessing any other services.

1 Inter-Ministerial Group on Domestic Violence 2005
2 Imkaan 2008. The Map of Gaps report also shows that access to domestic violence services is a postcode lottery, and that fewer that one in ten local authorities have BME services (Coy et al.).
3 The specialist domestic violence sector refers to services that are primarily targeted at black and minority ethnic women and children.
4 Rai Thiara
Existing knowledge about BME women affected by domestic violence

While it cannot be assumed that all BME women will have the same experiences, expectations and needs, available research does identify some key areas which are important to consider. The importance of these will differ according to class, age, country of birth and ability to speak English as well as determine the strategies employed by women and their access to service provision.

The 2001 British Crime Survey, which found that one in five (21%) women and one in 10 men (10%) have experienced at least one incident of domestic threat or force since they were 16, pointed to little difference in the prevalence of domestic violence by ethnicity.5 But we also know that 59% of domestic violence murders in London in 2005–2006 were BME women compared to 47% in 2002–2003. Though BME women are just as likely as others to be victims, there are differences in how they respond to violence and how they are treated by services. Whilst a Home Office publication points out that ethnicity should not be marginal but integrated into the delivery of all support services, this has to be seen against a backdrop of research which has highlighted the general inability of the mainstream sector to meet specific needs and shown that one specialist worker employed in a mainstream service that has not fully addressed equality and diversity issues is not an adequate or desirable response.6

It has to be underlined that the needs and experiences of BME women and children are not uniform, but there are particular issues that are common to many. It would also appear that the voices and experiences of some groups of BME women, for whatever reason, have been given greater visibility than others. The discussion below highlights some of the issues that are important to consider and which continue to nuance the experiences of BME women.

Reporting and help-seeking

Research shows that women from various BME groups are less likely to access existing services and that there is generally a low level of awareness as well as misconceptions about refuge support services among large numbers of BME women, which leads them to endure abuse for longer periods.7 Research also shows that Asian women in particular are likely to severely underreport.8 According to Southall Black Sisters’9 women had endured violence for between three and 40 years before seeking help. More recently, this has also been reported for African-Caribbean women and for more vulnerable groups such as those with ‘no recourse to public funds’. Indeed, research shows that BME women in general are less likely to seek help from agencies which they view as insensitive to their values and needs and where they often face barriers of racism and prejudice.10 As well, a general lack of publicity targeting particular groups of women and children and their communities about domestic violence and the existence of support services has been reported in practice. It has also been pointed out that many agencies make assumptions about the reasons for BME women not taking up services – not trusting outsiders, not wanting to expose their men, and not trusting statutory agencies, wanting to resolve it themselves etc. – rather than looking at what they themselves are doing to build trust among such women and to respond more positively.11

Widespread stereotyping and racism

Although more BME women are accessing domestic violence services than in the past, mainstream statutory and voluntary services still struggle to adequately meet their needs.12 Women commonly re-
port experiences of racism and prejudice leading to reluctance in seeking help from agencies perceived to be insensitive to their needs. On average a woman has 11 contacts with agencies before getting the help she needs – this rises to 17 if she is BME. It is evident that racism compounds the vulnerability of women affected by domestic violence and ‘institutionalised’ racism frustrates women trying to get an appropriate response from services.

Stereotyping and other forms of discrimination have also been reported by research as a common experience for BME women in accessing services which result in seeing the violence as ‘normal’ in some communities or focusing on the immigration status of the victim rather than protection. If a woman, as tends to be the case for BME women and children, has to move further to secure safety and is removed from any support networks and then subjected to racial harassment/bullying in unfamiliar areas and new schools, this compounds the experiences of violence in the home. Add to this the social barriers (silencing within communities) and pressures many women from BME groups face in reporting abuse and seeking help and it is evident why so many do not, and the courage required of those that do. It has been highlighted by research that not only do many women endure abuse for longer but that they tend to experience severe abuse. In particular, some groups of BME women tend to report higher levels of extreme isolation.

**Cultural relativism and reductive approaches**

Research has pointed to the ‘double victimisation’ of BME women – the violence perpetrated by partners and family members and then the failure of services to provide appropriate support and interventions. The failure to protect by agencies such as the police and health professionals along with the neglect by family members further reinforces and perpetuates violence in women’s lives. Dealing appropriately with issues of ‘culture’/difference can be scary business for professionals. Batsleer et al. have importantly shown the contradictory ways in which domestic violence can be either overlooked for ‘cultural reasons’ as a ‘homogenised absence’, which has the effect of normalising the violence in particular communities, or that it brings heightened visibility to BME women and their communities as part of a ‘pathologised presence’ resulting in particular scrutiny. Certainly, many studies have shown how discourses of ‘culture’ serve to marginalise and exclude women from services resulting in a lack of protection for women in the name of ‘cultural sensitivity’ and lead to cultural relativism. In this way, mainstream services’ anxieties about engaging with ‘race’ or cultural issues intersect with the ways in which all communities cover up domestic violence to support ‘cultural privacy’ and create barriers to appropriate intervention. This has been further exacerbated by the recent focus on ‘terrorism’ and particular forms of harm practiced by particular communities.

According to recent research, professional responses are often marked by a ‘reductive approach’ to BME women’s needs. This betrays an absence of a more complex understanding of the subtleties of different communities, as the differing needs of specific groups of women get reduced to ‘culture’ which in turn is reduced to language needs and religious differences which are then associated with particular groups of women, i.e., South Asian women rather than African-Caribbean women. This in turn serves to focus attention on cultural differences at the expense of institutionalised racism and equality issues. Such responses feed into discourses of multiculturalism, criticised by BME women for homogenising communities and only listening to the most powerful groups (men).

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13 Sen
14 Parmar et al., p. 6; Cooke, et al.
15 Imkaan 2003; Batsleer et al.
16 Thiara et al.; Humphreys/ Thiara; Minhas et al.
17 Gill 2004b; Rai/ Thiara
18 Thiara/ Hussain
Many have argued for ensuring the rights of women without trampling on the BME communities – ‘multiculturalism cannot be an excuse for moral blindness’ has become the mantra for those pointing out the pitfalls of such responses.\textsuperscript{19}

**Culturally specific forms of harm**

It is widely accepted that BME women are more likely to suffer abuse by multiple family members and that there are culturally specific forms of harm that have raised much concern in recent years. However it is worth noting that an overriding emphasis on these forms of harm has often detracted from a focus on the wide range of abuse experiences of BME women and the services that are needed to meet their needs. There are, of course, some contradictions here as, while it has taken the police and other statutory agencies a very long time to take seriously the issues for BME women and practice is still ad hoc, issues of forced marriage and honour based violence are very high on the agenda, inevitably begging the question why that is so.

**Forced marriage**

Forced Marriage (FM) signifies the absence of consent and occurs where women are placed under duress in the form of emotional pressure, threats, imprisonment, abduction, physical violence and sometimes murder. Increasingly, FM is seen as a key form of domestic violence and/or child abuse in some communities (including South Asian, Greek, Turkish, West African and traveller) and has also been linked to high rates of self-harm and suicide attempts amongst some teenage girls.

The Forced Marriage Unit, set up in January 2005, reportedly deals with around 250–300 cases a year, around 30–50% of which are children under 16. Community based women’s organisations report seeing similar numbers each year, and many more go unreported. Developments around FM have been fast moving and a recent Home Office report suggests there are large numbers of children missing from schools as a result possibly of the practice of FM.\textsuperscript{20} One report gives an estimate of 1 000 forced marriages a year pointing to many more that are never reported.\textsuperscript{21}

Although there have been efforts by government to raise awareness among police officers and other statutory sector professionals, there is ongoing debate about what responses need to be made, especially as the possibility of new criminal legislation was seen to be unnecessary, supported by many BME groups. There is now a Civil Bill on FM to provide victims routes to protection (incorporated in Family Law Act – third party injunctions and injunctions). However, responses to victims by frontline services tend to be patchy and confused.

According to the Foreign and Commonwealth Office, many of the girls have suffered sexual abuse (covered up by the family) and the vast majority of FM cases display signs of trauma and the related emotional and sometimes physical abuse to which they are subjected. Most of the girls have either self harmed (cutting or overdosing), have substance use issues, are anorexic or depressed. A recent government consultation on the possibility of developing new legislation to outlaw the practice was considered to be unnecessary in the UK.

**Honour and shame**

Shame – personal, family, community – is a big factor in women deciding to stay or leave abusive relationships. This is so for many women, not just BME women, and it is important to make connections between how issues of shame shape all women’s responses to their abuse. Within BME communities, some cultural beliefs can act as further barriers to help-seeking – for Asian women these include

\textsuperscript{19} Siddiqui
\textsuperscript{20} Khanum
\textsuperscript{21} Southall Black Sisters 2001
izzat and sharam (honour/shame) which play a role in controlling women’s behaviour, just as stigma and shame prevent many BME women from seeking help. The small size and close-knit nature of communities can often limit choices for women as they become concerned about others finding out, something used by abusive men to exert greater control.

**Honour based violence (HBV) – crimes of dishonour**

Since the number of ‘honour’ killings has increased (estimated at over 20 known cases in recent years), the issue of so-called HBV has recently begun to be raised as a major concern and has clear implications for the lives of BME women though, like forced marriages, such violence is rarely reported. It is also linked to the high rate of suicide among Asian women, some of who will kill themselves to preserve the family honour rather than disgrace the family by leaving a violent relationship. The Association of Chief Police Officers set up a HBV multi-agency group and produced the HBV strategy which has recently been out for consultation as part of an ‘integrated strategic response’. The fact that 59% of domestic violence murders in London in 2005–2006 were BME women has led to greater concern about addressing all possible reasons for this disproportionality. The impact of honour or ‘family dishonour’ in disabling many women from seeking external help has to be understood. The potency of family honour as a deterrent to women seeking help is greatly exacerbated when they do not receive the appropriate understanding and interventions that are needed.

**Female genital mutilation**

Concern has been raised about the practice of FGM for some time by women’s organisations and it is estimated in the UK that around 25 000 girls are at risk though the development of interventions has been slow.

**Immigration and ‘no recourse’**

The issue of immigration continues to impact particularly viciously on the lives and choices of BME women. It often determines whether a woman actually seeks help as well as shapes the service response that she gets. Where women with insecure status have no recourse to public funds they have been excluded from existing support services. Research found that in England many domestic violence workers were uninformed about the issues faced by women with unsettled immigration status. Recent research shows that during April 2005–2007, 637 women with ‘no recourse’ approached 13 BME specialist services and London based domestic violence organisations. Further data from 10 groups shows that only 9% of 429 women were housed, and there is no indication of where the remainder went. It is also evident that most such cases are supported by BME services though the national charity Refuge reports spending 200 000 pounds a year supporting women with no recourse. Clearly, there has been a failure to address this issue seriously, a situation that continues to leave many women unprotected and in abusive situations.

**Mental health and domestic violence**

The issue of mental health, especially high rates of self-harm and suicide among Asian women, has caused concern among BME specialist services for some years. Six research studies show elevated rates of self-harm, particularly amongst Asian women under 30 who had rates of self-harm two and a half times those of white women and seven times those of Asian men. In general, it is known that one in four suicide attempts are because of domestic violence.

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22 Council of Europe 2002  
23 Gill 2004a  
24 Rai / Thiara  
25 Imkaan 2008  
26 Merril/ Owens 1986; Yazdani; Soni-Raleigh
**Relationship between mothers and their children**

Recent research has pointed to the need to see domestic violence as also an attack on the mother-child relationship, which leaves an ongoing legacy. Particular issues were raised by this research for BME women which showed that some were systematically denied relationships with their children, high levels of child abuse, intense isolation (impacting on their confidence), child contact issues and highly frequent threats of and/or actual child abduction.

**What works**

Having looked at some of the general issues that mark the experiences of and responses to BME women affected by domestic violence, this section examines what works for women. Research, though limited and only focusing on particular groups, shows us that specialist services led by BME women are highly valued by women.

**Specialist BME services**

Although it cannot be assumed for all women, some studies suggest that when seeking help BME women were very positive about being able to speak to a worker from a similar background and felt this helped them to make an informed choice. This was also highlighted by a Home Office publication. Studies show that this is especially the case for women who do not speak English, particularly older generation women who have been expected to ‘put up’ with violence in the home and see it as an acceptable part of marriage. Building up ‘relationships of trust’ can also be better facilitated if a woman is being supported by a worker who has a similar ethnic/cultural background with an insight into the pressures and contradictions experienced as well as similar experiences of racism and oppression. The employment of one worker within a mainstream service, however, is viewed as inadequate as many BME women often require the sensitive cultural context only afforded by specialist services. Thus, having staff from similar backgrounds is a key factor which can help women to feel less isolated and to build up their confidence. Knowing workers understand the specificity of their situations can be crucial to women’s recovery from domestic violence, as is being able to meet other women from similar backgrounds who have gone through the same experience.

Language support has been shown to be highly important for women who do not speak English and who may have been extremely isolated, thus enabling the process of beginning to ‘open up’ and name their abuse experiences. Women may be unable to access written information about services and interpreters are rarely present at police stations and hospitals. Simply employing interpreters has widely been reported as poor practice in domestic violence support work; indeed women may be reluctant to fully recount their abuse experiences to a stranger with whom they have no relationship of trust. The fact that some agencies often rely on members of the victims family or their children for interpreting has been emphasised as even poorer practice. The importance of sensitive and sympathetic support work in appropriate languages as a key to women rebuilding their lives is identified by numerous studies.

**High levels of support**

Much of the research on BME women shows that for a range of personal and social reasons, including extreme isolation and guilt at having failed the family and community, nature of their abuse experiences, language needs, and racism, women often require higher levels of support and over a longer period of time. It is evident that many BME women (especially Asian women) face the dual problem of racism...
(from other residents and workers in mainstream refuges, in localities while living in refuge or when re-housed, children face racism in schools) and rejection from their own communities (which causes further isolation making it harder to re-build their lives). This leads to them needing to be supported more intensely and for longer. This can include advocacy with statutory agencies, specialist counselling and general emotional and practical support. A study has also shown that the recovery period from domestic violence and moving on for BME women is much longer than that for white women.32

Isolation can be a greater issue for BME women as leaving home and their support networks makes them more vulnerable and takes longer to overcome. A recent Home Office publication also highlights that BME women preferred ‘longer-term support from an advocate or support worker rather than short-term crisis intervention’ as it enabled ‘relationships of trust’ to develop.33 However, much of the current developments around streamlining and making generic support to all domestic violence victims often ignores the compelling research evidence in relations to the high levels of support required by many groups of BME women.

**Outreach support**

Going into a refuge is often reported by women as a last resort - many women prefer to stay in the community and receive help for domestic violence, others have no choice because of ‘no recourse’ and other issues. The experience of one of the projects funded by the Home Office Crime Reduction Partnership Violence Against Women Initiatives showed that some women wanted to remain in the home to show to their communities and families that they had done nothing wrong.34 However, in doing so they required considerable support from workers who had an understanding of their situations and choices.

The role of outreach support services has been especially crucial for many BME women who face numerous barriers (personal and social), where they move to new/unfamiliar areas, or where they continue to experience post-separation violence and child contact issues and possibly threats of abduction.

A recent Home Office publication, based on an evaluation of projects funded under the Crime Reduction Programme – Violence Against Women Initiative, greatly emphasises the importance of accessibility to support services, stating that ‘whether the services are aimed at BME women or not, the issue of ethnicity should not be marginalised’.35 In particular, it highlights the role of support and advocacy (including outreach) in effective work around domestic violence with BME women and children on an ongoing basis. The nature of outreach support required in these situations can be quite different from the limited Floating Support services that many agencies now offer. It requires creative and flexible ways of working, and the work being done by many BME support services shows that outreach is an essential ‘route to safety’ for many hard to reach women.

**Advocacy with other services**

Given the reality of racism, intense isolation and language barriers faced by many BME women, advocacy support is crucial. Research has shown that many women do not know how the system works and need help to negotiate their access to mainstream services which often respond in negative ways to them.36 In practice, there is often a lack of coordination among services in responding to the needs of BME women and children and advocacy is particularly useful in ensuring that a multi-agency approach is taken to meeting the needs of BME women escaping domestic violence.37

32 Humphreys/ Thiara
33 Parmar et al., p. 3
34 Malos et al.
35 Parmar et al. , p. 1
36 Minhas et al.; Thiara/ Hussain
37 Thiara/ Hussain
Although not all BME women want to use a specialist service or speak to a specialist worker and there are differences in this in terms of age and generation, the importance of choice for women is crucial for effective interventions. Moreover, BME women need to be central to the development of services, they need greater sensitivity and responsiveness from mainstream services and they need BME women led services. It is important to emphasise that the existence of specialist BME services does not mean lack of integration for these groups of women.

Conclusion - some cross-cutting issues

Segregation versus mainstreaming
Debate around effective interventions for BME women affected by domestic violence is at times couched in terms of segregation versus mainstreaming where meeting specific needs is seen to be synonymous with segregation. Under the recent community cohesion agenda in the UK, the push is increasingly towards generic services meeting the needs of diverse groups of women and children. However, there is considerable resistance to this from BME women’s groups and activists.

The UK experience shows that women and children need choice, that BME women need to be central to the development of services, and that we need both – greater sensitivity in mainstream services/agencies but also BME women led services.

Intersectionality
The ways in which we conceptualise oppression is key to informing effective interventions, though often in contradiction with wider political agendas. Given the unquestionable existence of institutionalised racism and sexism (among others) there is a need to build an understanding of the ways in which multiple oppression impacts on BME women experiencing domestic violence. This means that oppression has to be considered in all its complexity without the privilege of isolating one from the rest – intersectionality. And we need to look at women’s ‘relationality’ – how different groups of women are themselves implicated in power relationships.

Broader view
In discussion about BME women and interpersonal violence, it is tempting to focus on practices such as forced marriage and ‘honour based violence’ (which clearly need to be challenged). There is, however, a need to refocus on the whole range of BME women’s abuse experiences and responses to this and not just those that play into our thinking about ‘culturally oppressive’ practices (which have a subtext which is about ‘othering’). A murder of a woman is still murder whether it is motivated by and a result of ‘honour and shame’ or the actions of a controlling man. Is ‘honour and shame’ not about power and control? Thus it is important to take a broader view as ‘culture’ is neither homogenous or static and changing and complex needs require thoughtful and complex service responses.

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The activities of TERRE DES FEMMES

TERRE DES FEMMES (TDF) is a women’s human rights association that was founded in 1981, in the conviction that violence against women did not get the attention it deserved. Our goal is to make it possible for women and girls all over the world to live free, independent lives on a basis of equality. Girls and women need their own strong lobby and organisations that back their interests in order to enhance their standing in politics, in the business world and in society.

We are engaged in public relations work and political lobbying regarding women’s rights. We build networks, provide assistance in individual cases and promote support projects abroad. Our national headquarters where all activities are coordinated is located in Tübingen, Germany. In summer 2008 a new office opened in Berlin. The funds of TERRE DES FEMMES primarily come from donations, membership fees and project support. Eventually, 2004 saw the establishment of the TDF Foundation.

TERRE DES FEMMES is active at many different levels: there are more than 25 local groups in individual towns and cities that carry out various types of action; in addition, projects are run and we cooperate with partners at national and international levels, for instance in the Human Rights Forum or in European Union projects. TERRE DES FEMMES also acts as a lobbyist in national politics (e.g., through participation in expert talks), and provides support in individual cases to assist women who are directly affected by violence.

Our work focuses on the issues of honour crimes, domestic violence, workers’ rights, trafficking in women as well as forced prostitution and female genital mutilation.

Why do we need a campaign on honour crimes?

In 2002/3, TERRE DES FEMMES ran the STOP Forced Marriage campaign. As a rising number of individual women and girls turned to TERRE DES FEMMES because they were forced to marry against their will, and in view of the authorities’ obvious inability to act, we placed a focus on awareness raising among the general public. Another central theme of the campaign was prevention, under the slogan ‘Forced marriage: an issue at our school’. In this context, a folder with teaching materials and a poster targeting young people were prepared. Eventually, the campaign was also aimed at cooperating with people who had experienced this form of violence in the past.
Our campaign revealed a great lack of knowledge in Germany and touched a social taboo. It met with much criticism that a human rights organisation was pointing out violations of human rights among the group of immigrants.

More and more girls in at-risk situations asked TERRE DES FEMMES for help. The existing protection centres still were by far too few in number, and many authorities were not aware of the specific situation of persecution that girls and women threatened by forced marriage were facing. The institutions that provided support mostly did not know the connections between violence in the name of honour, forced marriage and honour killings. For these reasons, we decided to launch the NO Crimes in the Name of Honour campaign, which was run from 2004 to 2006. An honour killing that had taken place in 2003 near our Tübingen office was an additional trigger.

Ulrika Gashi, a 16-year old girl, had been murdered by her father. Hanife Gashi, the girl’s mother, wanted to organise a public commemoration event for her daughter and therefore contacted TERRE DES FEMMES. This was the start of an intensive cooperation. Ms Gashi was the first person from the family of a victim who publicly took a stance against honour crimes.

The goals and demands of the campaign

The campaign aimed to draw attention to the specific violations of women’s rights that are committed all over the world on grounds of a patriarchal code of honour. Another goal was to bring about changes in legislation and rigorous criminal prosecution in all countries where honour killings are not regarded as crimes. Further objectives for Germany included improvements in the protection of victims, the establishment of additional specific protection centres, better integration of services as well as conducting a representative survey on honour crimes.

The modules of the campaign

- Conferences, expert talks, readings, lectures and interviews
- Political lobbying (e.g., petitions, public statements)
- Publications: Tatmotiv Ehre [Honour as a crime motive], a collection of texts, and the book Mein Schmerz trägt deinen Namen [My pain has your name] by Hanife Gashi
- Touring exhibition: Tatmotiv Ehre [Honour as a crime motive]
- Theatre play: Savage Rose
- Cultural evening event against honour crimes
- Materials on prevention
- Individual support.

I will only describe two highlights of the campaign. At the opening event in Bonn, on 25 November 2004, in particular the cross-border nature of honour crimes was pointed out. At the panel discussion, the following women were present as speakers: Rana Huseini, journalist from Jordan; Lale Akgün of Germany’s Social Democratic Party; Birim Bayam of the Papatya protection centre for young women immigrants; Fatma Bläser, writer, activist and woman affected by forced marriage.

The expert talk that took place on 8 March 2005 in Berlin was organised in cooperation with Amnesty International and the Friedrich Ebert Foundation, with women experts from Jordan, Syria, the United Kingdom and Germany among the participants. Because of the honour killing of Hatun Sürücü in Berlin in February 2005, the event met with great interest among the general public.

Another focus of our public relations work was the touring exhibition Tatmotiv Ehre [Honour as a crime motive], which was shown in more than 60 towns and cities of Germany during the campaign. Typical-
ly, the exhibition was combined with lectures, readings, film showings or performances of the Savage Rose theatre play which the Interkulturelle Bühne theatre association of Frankfurt had prepared especially for this campaign.

In addition, also other prevention materials were produced and distributed (e.g., the emergency leaflet on forced marriage and marriage-related abduction).

The campaign has meanwhile been concluded, but the work to stop honour crimes is continuing. At present we are preparing support guidelines for authorities regarding responses to women affected by honour crimes, and we advocate improvements in the right to return for victims of marriage abduction.

NO Domestic Violence: The current campaign from 2006 to 2008

The new TERRE DES FEMMES campaign against domestic violence primarily addresses the general public, experts and the business sector. In the field of domestic violence, TERRE DES FEMMES has cooperated with the BODY SHOP for several years already.

I will give a short overview of a number of campaign modules.

The opening event, at a Frankfurt school, included the first night performance of Du bist unschlagbar [You can’t be beaten], a musical theatre play for young people which had been written especially for this campaign. It aimed to draw public attention to the theme of domestic violence by artistic means. Another important aspect is its contribution to prevention work. The play is offered for performance in schools. In the long run, TERRE DES FEMMES aims to encourage schools and other public institutions to draw up curricula in which domestic violence is presented as a violation of human rights in an adequate way.

On 8 March 2007 TERRE DES FEMMES organised an expert talk in Berlin with Ms Maria Böhmer, Federal Integration Commissioner. It was an exchange of opinion among prominent experts from the fields of science as well as practitioners, which focused on the situation of women immigrants experiencing domestic violence. The aspects discussed also included the question to which extent the available information actually reaches immigrants and whether there is need for specific forms of support. In particular, the following themes were addressed: anti-violence legislation and strategies to improve the corresponding provisions with regard to women immigrants; new laws and insights regarding the need for support and health care services for immigrants suffering domestic violence.

It is estimated that 25% of job-related problems such as reduced productivity and incapacity for work because of illness are accounted for by domestic violence. According to a study by the Lower Saxony State Ministry of Social Affairs, Family, Women and Health, the financial loss for the public because of absence from work, costs of visits to the doctor as well as reduced work performance because of domestic violence amounts to approximately 14.8 million euros in Germany. In view of this fact, enterprises should be motivated to take social responsibility, publicly stand up against violence and offer support to the workers affected. THE BODY SHOP has listed a set of measures to this effect: the Workplace Policy. In line with this policy, employers commit themselves to get active against violence in public as well as within the enterprise and, for instance, to provide information and access to support to employees affected by domestic violence. It obviously is in the interest of employers to preserve the health and thus the fitness for work of employees. The existing Workplace Policy of THE BODY SHOP, an enterprise that may serve as a model regarding responses to domestic violence, helped motivate also other companies to form an alliance against domestic violence.
For summer 2008, a seasonal action against domestic violence has been planned. A team between 10 and 20 persons will travel to various towns and cities in order to address local passers-by and draw their attention to the problem of domestic violence.

These actions will take place on two weekends per month over a period of three to four months. The women and men of the team will have T-shirts and bags that show the slogan Frauen schlägt Mann nicht [Men just can’t beat women]. Also, leaflets are distributed, with facts and information on the issue of domestic violence.

In November 2008 the next campaign will start; this time, the focus will be placed on female genital mutilation.
In order to illustrate the situation of immigrants in Austria who have experienced domestic violence I will describe the cases of two of my clients whom you might know from the media: Fatma and Şahide: both of them were killed by their husbands; Şahide in 2002 and Fatma in 2003.

In 2004 the Association for Women’s Access to Justice and the Domestic Abuse Intervention Centre Vienna submitted a complaint regarding these two instances of violation of human rights to the CEDAW Committee, which considers the progress made in the implementation of the UN Convention on the Elimination of All Forms of Discrimination Against Women.1 In August 2007, the Communication by the CEDAW Committee on these two murders of women was published.2

Before going into more detail regarding the legal situation of immigrants in Austria and eventually presenting recommendations for improvements regarding responses to immigrants who have suffered violence, I will tell you more about Fatma and Şahide and what my memory of these two women is.

Fatma had repeatedly been threatened by her then husband. When she turned to the police after several threats to kill her, the police issued eviction and barring orders against her husband and reported the case to the Public Prosecutor, requesting the detention of Fatma’s husband because of criminal dangerous threats. This request was rejected, however. The police did not report to the Public Prosecutor subsequent incidents of threats of murder. Fatma, with the assistance of the Domestic Abuse Intervention Centre Vienna, applied to the competent district court for an interim injunction. After another threat by her husband to kill her, she filed a petition for divorce at the court. On 1 September 2003, the district court issued an interim injunction. 10 days later, Fatma’s husband followed her home from work and fatally stabbed her.

In spite of the eviction and barring orders issued by the police and the interim injunction forbidding him to return to the family apartment and its immediate surroundings, in spite of talks with the police during which it was made clear to Fatma’s husband that violence was no legitimate means of solving conflicts but a criminal act, and in spite of all efforts on the part of the victim to protect herself, it was still possible for the perpetrator to make threats of murder against his wife, to approach her and finally to murder her.

According to the statement by the CEDAW Committee, the Austrian authorities were, or should have been, aware of the danger for Fatma, and it was not justifiable that the Public Prosecutor rejected the
request by the police to detain Fatma’s husband. In the case of a divorce, the perpetrator would possibly have lost his residence permit. Therefore, there was reason to assume that he would do anything to prevent this.

The Committee does not accept the argument on the part of the State of Austria (in the case of both Fatma and Şahide) that the imposition of detention would have constituted a massive interference with the perpetrator’s fundamental rights but states that the rights of offenders cannot supersede the rights of victims of domestic violence (with reference to CEDAW Communication 2/2003 on Hungary).

In the case of Şahide, who was fatally shot by her husband in the family apartment on 7 December 2002, the police had known since 1999 that her husband used violence against his wife and three kids. The Public Prosecutor rejected the request by the police to detain him also in this case, and stopped the prosecution twice, the last time on 5 December 2002, two days before Şahide was murdered. On the day of the murder, Şahide called the police emergency phone line saying that the offender had returned to the apartment in spite of the interim injunction. However, no police intervention followed her call because her husband left the family apartment while she was on the phone with the police. According to members of the family, the perpetrator had made several threats to kill Şahide and other relatives who had reported him to the police. However, no reports had been filed by the police, and the report stating that the offender, in spite of an effective weapons prohibition against him, was carrying a handgun was not pursued on the part of the police.

The CEDAW Committee found that the police, in view of many years of violent behaviour on the part of her husband, had failed to act with due diligence when Şahide emergency call on the day of her murder did not result in further action. Because the extent of violence that the offender used against Şahide (threats, intimidation and beatings) was a known fact, the Public Prosecutor should not have denied the requests by the police to detain the husband.

According to the CEDAW Committee, the State of Austria violated its diligence obligations with regard to the protection of the two women. The Committee here refers to General Recommendation No. 19, which sets out that states may also be responsible for private acts if they fail to act with due diligence to prevent violations of rights or to investigate and punish acts of violence, and for providing compensation. The experts of the Committee also maintain that the state established a comprehensive model to address domestic violence but that the political will by all state actors is required to support this system.

Based on the cases of Fatma and Şahide mentioned before, I will first describe the situation of immigrants in Austria and then present the recommendations by the Committee, which in part correspond to the solutions that I am proposing.

Women immigrants from so-called third countries continue to depend on their husbands with regard to both residence permits and work permits, in spite of a number improvements since 2005 in the law relating to aliens, for instance Section 27 of the Establishment and Residence Act, which lays down the right of long-term residence and right of stay for family members: now women who have become victims of violence, if an interim injunction has been issued, have the right keep their current residence status. However, for this status to be extended the woman has to meet certain requirements. These requirements, in particular, include

- evidence of a monthly income of at least 726 euros (however, frequently immigrants only get marginal part-time jobs, often in the cleaning or catering industries, where wages are very low),
- evidence of accommodation in accordance with local custom (which is often unavailable because of the low income).

Living under such difficult conditions, it is hardly possible for both women and children to cope with the trauma of the violence experienced, which in turn makes it more difficult to learn the German lan-
guage. As a consequence, women affected by violence are struggling with the fear of losing their livelihood year after year.

**What would be necessary for an effective protection from domestic violence of women immigrants?**

First and foremost, they would need an independent right of residence extending over a longer period of time in order to be able to secure their livelihood. This has been demanded by victims’ protection organisations for a long time already. In concrete terms, such a long-term residence permit should be valid for at least three years. For women immigrants in general, and in particular for immigrants from ‘third countries’, it would be necessary to be granted long-term residence permits with full access to the labour market, and independent of their husbands. While they are looking for a job, immigrants should have a right to welfare assistance. In this context the women in question could be referred to German language courses. Eventually, the local authorities should provide childcare services for their children.

Integration in the labour market would be easier if young immigrants, through the Public Employment Service, could get access to vocational training programmes, with daily rates of payment that ensure subsistence. It would be possible, and a necessary step, to join forces to draw up such a model. Many young women who come to Austria would like to take part in vocational training schemes and find employment. The result would be skilled workers. Such qualifications would also advance the social integration of the women concerned.

I cannot but endorse the recommendations of the CEDAW Committee to organise more training programmes for judges and prosecutors that focus on domestic violence, the CEDAW Convention and the Optional Protocol. The corresponding programmes should be obligatory during the education and training stage and also treat the specific situation of immigrants.

Competent interpreters should be hired for victims of violence in contacts with the police and the courts.

What is also urgently needed is

- an expansion of support services for immigrants in the intervention centres/violence prevention centres;
- increased staff resources for an intensified support for victims in high-risk situations.

In addition, the mother-tongue counselling services for victims who contact the women’s phone helpline should be expanded. At present, the phone number 0800 222 555 may be called around the clock for phone counselling, but only in German. Support in other languages is available at certain hours only.

It would be important to have a women’s and girls’ shelter specifically for immigrants, in particular for girls (over 16) and young women who are affected by forced marriage and domestic violence. Such a shelter should provide intensive support services in the girls’ and young women’s mother tongues, in consideration of their specific cultural situation.

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3 Protocol complementing the CEDAW Convention, which states may adopt voluntarily. On 22 December 2000, the Optional Protocol entered into force also for Austria.
To conclude, another important recommendation by the CEDAW Committee deserves mention: It is necessary to implement and monitor the Protection Against Violence Act and the criminal law aspects it includes, by preventing violence against women with due diligence and by responding to violence quickly, imposing adequate sanctions in order to make it clear to both the perpetrator and the general public that domestic violence is condemned by society. Because in fact, it is not enough to have an excellent Protection Against Violence Act unless it is adequately implemented by the corresponding actors.
NEW DEVELOPMENTS IN THE AREA OF SERVICES FOR WOMEN AND CHILDREN
Introduction

If it is agreed that also children who are affected by domestic violence should have a right to support, this means that their need for the corresponding services has to be identified systematically and that these services have to be available. As studies conducted in Switzerland\(^2\) and Germany\(^3\) have shown, this cannot be taken for granted, however. A number of women’s shelters have established specific services for children and have further professionalised them in the course of time. Still, the extent to which this is achieved strongly depends on the design and the resources of the individual service providing agency. Usually, support that meets the specific needs of children is possible only in large women’s shelters. In addition, there is the question of aftercare after moving out of the shelter. Interviews with 20 mothers and 30 children in Switzerland showed that there was no direct connection between violence experienced by children and support services provided to them.\(^4\) In part of the cases, child therapy measures were started, but there are no (inter-)institutional procedures that ensure a systematic identification of the need for support of this target group, and there are no specific services for children and young people that are oriented towards the problem of domestic violence. Now that anti-violence laws exist in the German-speaking countries\(^5\), under which violent persons may be ordered to leave the household and the police has been granted specific powers for this purpose, the question arises which support girls and boys need after eviction orders have been issued, whether the experience of violence among these children differs from the experience of children who have not witnessed the eviction of perpetrators, and which support measures are needed and sensible.

In order to develop and test new support services, in 2004 the State Foundation of Baden-Württemberg started the Programme of Action on children who witnessed or suffered domestic violence.\(^6\) A total of 14 pilot projects were run to test different practical models and to gain knowhow on the kind of support that children and young people need in this situation in life, on ways to reach them and themes to address, and on ways to integrate their families in the support system.

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1 This article will also be published in the documentation of the 6th Swiss AGAVA congress on children experiencing violence, which took place in Zurich on 16/17 November 2007.
2 Seith 2006a and Seith 2006b
3 Seith/ Kavemann
4 Seith 2006b
5 Anti-violence legislation entered into force in Austria in 1997; in Germany in 2002; in several cantons of Switzerland in 2002, in the canton of Zurich on 1 April 2007; Protection Against Violence Provision Amending the Civil Code (Section 28b) on 1 July 2007.
6 Seith/ Kavemann
Domestic violence and the situation of children

In order to investigate violence-related stress among children and young people, a survey was conducted among 150 girls and boys aged between 8 and 18 who took part in Baden-Württemberg’s pilot projects: a specifically designed surveying questionnaire was used that the staff of the pilot project completed. This showed the following picture:

- almost all children had witnessed situations of violence – and some of the children, massive violence;
- in the majority of cases, the violence had been directed against their mothers (99%);
- mostly, their fathers had been the perpetrators (87%);
- almost all children had witnessed effects of violence such as weeping, shock and despair;
- more than half of the children had seen injuries.

In addition, the children had suffered considerable stress also because of violence by their parents directed against them. The definition of violence that we used follows the traditional definition of danger to the welfare of the child; it ranges from mild corporal punishment to severe physical abuse, neglect, sexual exploitation and psychological violence.

- The majority of children (77%) had suffered violence themselves before the start of support services.
- In the course of the support period, the share of children who indicated at the time of the survey that they were exposed to differing degrees of violence fell to 29%.
- In one third of cases, the youth welfare department had been notified of a situation of danger.

Interventions undertaken as protection measures against domestic violence may also serve as indicators for assessing the stress to which children are exposed in cases of domestic violence. We investigated how many mothers had turned to women’s shelters, if police interventions had taken place and eviction orders under anti-violence law had been issued and whether applications for extending prohibition to return orders against the perpetrator had been filed.

- Four out of ten girls and boys had already fled to a women’s shelter with their mothers.
- Six out of ten children had witnessed police interventions or eviction orders by the police, respectively.
- In 35% of cases, applications for protection under anti-violence laws had been filed. This is a high share compared to other studies. We assume that this considerable extent of legal protection measures that were taken is due to the close links between providers of support services for the children and for the parent at risk, which in turn is the result of intensive consultancy in the context of the pilot projects.

As support services for children were provided both in the context of eviction procedures and also in the absence of measures taken under anti-violence laws, comparisons between groups were possible. The analysis showed that there was no difference regarding violence-related stress of children whose parent had been ordered out of the flat and of children living in a women’s shelter.

Support for children affected by domestic violence

The pilot projects tested different forms of individual sessions and group sessions. The groupwork services focused on play therapy, experience-based or social education approaches. In the individual settings a range of different approaches were pursued and advanced in the context of different frameworks.

7 Seith/ Kavemann
These approaches included
- crisis intervention sessions, partly together with the mother or parallel to counselling for the mother;
- pro-active individual case management for children after police interventions, stay in a women's shelter or during a stay in a safe apartment;
- outreach work with children after police interventions or eviction orders, partly combined with family-oriented counselling;
- intensive individual work for children in the context of drawing up an assistance strategy and finding complementing support services;
- individual sessions for children who took part in groupwork;
- therapeutic work with clay (a specific art therapy approach that is not oriented towards language).

Preparing a specific safety plan, presenting support options and providing legal information are important elements in particular in individual settings. Many of the children concerned also benefit from the management of concrete problems regarding their present situation in life. Cooperation with other service providers in the local network has turned out to be of crucial strategic importance in this context, for instance, with regard to further long-term support, accommodation outside the family as well as organising a change of school and day care institutions.

**Motivations and views of parents**

The parents (or rather, mothers, to be precise) play a pivotal role with regard to support that is made available to their children. In the majority of cases it was the mothers with whom the children were living, and who actively tried to find support for their children. They sent the children to the group if their behaviour and general condition gave rise to concern or because they wanted to prevent their children from suffering trauma because of the violence experienced.

Ms Cristo registered that her daughter ‘was not well’, that she tended to be aggressive and that she was full of fear and sadness. Similar to Ms Cristo, Ms Bär observed that her daughter did not want to go to school, that she started to have problems at school and suffered massive fear. For Ms Ernst the greatest problem was that her children did not want to accept the separation. She hoped that the group would help improve the emotional situation that had got out of hands. Ms Diesner asked for professional support for her daughters and sons not because of manifest problems but because she feared possible negative effects, ‘for if you miss something or other now, the children might have problems later in life, with their future partners or with boys in general.’ As a mother, she felt she was too closely involved and thought there was the risk that she might fail to notice possible problems early enough. For her, the group sessions most of all had a preventive function.

The majority of parents confirmed that the support services had had positive effects. They saw that their children felt better, that they became more lively and that sleeping problems and problems at school lessened.

Ms Bär registered that after one year in the group her daughter had become ‘completely different. She is more outgoing, she talks more and, I don’t know how to put it: she is more self-assured. I’d say this is a very positive sign.’ In the group she had begun to talk about problems of violence and now she had more confidence in herself. For Ms Bär it was relieving to see that her daughter met other chil-

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8 Only one out of 40 parents experiencing violence who were interviewed was a father.
9 All names have been changed in order to protect the persons interviewed.
Children whose families also struggled with problems. She had found friends there and during holidays she missed the group. In sum, both Ms Bär and her daughter felt better, even though Alexandra continued to show massive psychosomatic reactions, her problems at school still worried her mother and visiting contacts to the former partner were very stressful.

Although there is more than one factor that determines how children feel, for instance, protective interventions by the police and courts as well as safe accommodation in a women’s shelter, the parents affected by violence, from their point of view, tended to see a cause-and-effect relation between the support services for children and how they felt. In sum, the services were relieving for them, in particular if they were able to gain confidence in the persons providing support services. It was more difficult for parents to assess the effects of the support when they had had specific expectations that were not met, although this does not mean that the children, from their point of view, did not benefit from the services.

Ms Ernst, when asked what effects the group had had, distinguished between personal advantages for her and benefit for her children. She said that for herself, the group had ‘not been very helpful’ because the children ‘still did not accept the point of the separation’. However, in the interview she emphasised that this must not be misunderstood: she was convinced that ‘there is something going on in the children, but for me it is hard to say in what respect it has become easier for them.’

Both the providers of support and the mothers underlined that it was very important to link services for children and consultancy for the parent experiencing violence, because this made it possible to discuss current parenting questions. They said that it was helpful and stimulating to be able to call at any time if problems arose, to ask for advice or to be confronted with attitudes that differed from their own views.

For Ms Bär this became a valuable resource. ‘Whenever I have a problem, I may make a phone call and tell them what has happened. I can ask how I should handle things, and so on. They are always ready to help. That’s just great.’

Ms Ernst was confronted with new impulses and felt challenged to reflect upon her own patterns of action. ‘Well, thinking in a different way about a few aspects or just taking things easy every now and then, for instance, if she [her daughter; author’s note] is not outgoing, I can’t force her to open up – so, just dropping the matter and waiting, for maybe she will come to me of her own accord – these were points that make you reconsider your own principles. So, by and large, I’m satisfied. And I know that they were well taken care of. That was important to me. They liked it here. Therefore I’d say it was certainly worthwhile.’

Parents affected by violence: Access to and participation in the provision of support for children

In order to be able to refer children to support services, it is necessary to be in contact with their parents, or the parent mainly responsible for the child’s upbringing, i.e., the mother in most cases. At institutional level, the women’s shelters and women’s counselling services were the most important links between the children and the pilot projects, while the General Social Service Offices (ASD) or youth welfare departments or the police played insignificant roles regarding first contacts to the pilot projects. Referrals by the ASD or by youth welfare departments were rare, which means that the services were not available to as many children and parents as possible.

In most cases the agencies that provided support services for children decided to establish contacts proactively. It is important to build and maintain rapport so that a child may be integrated in the services in question and/or to motivate their mothers to take them to the service. An important factor that
effectively helps the children is to ensure that the contact to their mothers is maintained during the daughter’s or son’s participation in a support group, counselling sessions or therapy. An interesting aspect was that parallel to the services provided to the children, good contacts to their mothers were also registered to high degrees. As a rule, at least an initial talk, an interim talk and a concluding talk took place.

Our study has revealed another factor that is essential when support services are planned: parents affected by violence also face difficulties that result from social, economic and health-related problems. 59% of mothers of children who participated in the groups, and 77% of mothers whose children attended individual sessions, faced considerable stress. The most frequent problems mentioned were language difficulties, but also numerous health problems or overwork as well as multiple experience of violence in the course of life, worries because of unemployment, difficulties regarding housing or low income as well as parenting problems. If parents are struggling with additional problems this is a specific challenge for consultancy services in the context of domestic violence. Because of their problems, parents might fail to acknowledge the troubles and interests of their children, even if their children are important to them and they want to help them.

The analyses have shown that the need for talks on the part of parents was considerably higher than expected when the pilot projects were organised, and that the parent suffering violence as well as the violent parent were involved in the counselling process to markedly differing degrees.
- Two out of three parents affected by violence accepted assistance for themselves by the organisation supporting their children or by a different agency. The most frequent setting was individual sessions, while groups of mothers seemed to be rare, and some of the mothers had therapy.
- Fathers who tended to use violence were less often integrated in the support services. Only one out of six fathers used the counselling services of another agency and not more than five percent attended a group for violent men.

It has turned out to be absolutely necessary to integrate in the support services also the parents affected by violence, and this has been achieved to a large extent. Services that address this target group need sufficient capacities in order to ensure that the required functions may be performed, and close links to other agencies are needed for further referral of clients. Another essential point is that work with parents in the context of partner violence almost exclusively means work with mothers. For the small number of fathers experiencing violence, corresponding services should also be available.

We have also found out that violent parents are very rarely integrated in the services. A plausible reason is that this would take much time and effort, and attempts to link support for children with services for their violent fathers have hardly been made so far. We still need to create a scientific basis in order to know under which conditions such an integration is possible or whether it is an additional risk for the children’s welfare.

Conclusions

The support services complement already existing measures taken by authorities in charge of child welfare (ASD and youth welfare departments), they reduce their workload and may provide cooperating assistance. They contribute to ensuring the welfare of children and improve their well-being. The children in question suffered massive stress because of the violence, which could be reduced through the support services provided. This in turn stabilised their situation in life. The violence in their parents’ relationship had stopped to great degrees, and also abuse and neglect of the children was observed to far smaller shares at the end of the groupwork and support period compared to the initial situation.
However, the support services provided were sufficient only for part of the children. There are individual differences regarding what is helpful for children in the stressful situation of violence at home and what contributes to overcoming this experience. For this reason, the support services offered should respond to individual needs, taking into account
- the current situation in life and the personal safety of the child;
- the current stress situation for the child and their individual coping resources;
- protective and supportive v. stressing and endangering behaviour by members of the family;
- additional problems (e.g., at school);
- the extent of stress to which the mother/the parent experiencing violence as well as sisters and brothers are exposed, and their need for support.

Even though only few children were in acute at-risk situations at the end of the project, more than one out of four children experienced violence to differing degrees also after the conclusion of the group-work or counselling period or therapy, respectively. This points to the demand for further support, which has also been realised by parents and pointed out by project staff as well as cooperating organisations.

References


To remind you of where I come from – 15 years ago, when the transformation of the institutional practices of protection of women started in Austria, I was here at the conference organised by the Federal Minister of Women’s Affairs, Johanna Dohnal, entitled Test the West: Gender Democracy and Violence. That was in 1992, and there was a war going on in my homeland. Rosa Logar asked me how I was, and I said, ‘I feel cold all the time’. So she took me to a big store and bought me one of the warmest duvets there. This was the year that brought news of mass rapes in Bosnia and we, as feminists from the ‘aggressor state’, had different reactions. In my case, there were moments when I felt cold to the bone. Living in Belgrade, the city where orders were given to kill and rape during the war in what was then Yugoslavia, meant one had to go through the process of realising that one’s own fellow citizens are fascists. I needed to go through the feelings of fear, helplessness and guilt before I could get up and move for action. This emotional process of dealing with so-called victims’ feelings drew me closer to the women with whom I work as a counsellor, and at the same time, moved me directly into the women’s anti-war movement.

At the outset of the war, I was a feminist activist and a volunteer on the SOS Hotline for battered women in Belgrade, together with others organising different activities in order to understand what was going on inside and around us. It was clear that besides the classic activist guilt (guilt that comes from the feeling that, no matter how much an activist does, there is still more injustice to overcome), we also had to deal with aggressor country guilt. This meant realising that guilt is a feeling – a feeling I can work through and transform into political action – and that it is a particular phenomenon of collective responsibility that concerns me. I needed to take a stand about the fact that people in my homeland were subjected to pain and suffering, they were being killed and these crimes were done in my name. This was precisely our practice and politics for many years to come: making our bodies and our resistance publicly visible by standing in Women in Black vigils on a city square with the message NOT IN OUR NAME.

Learning that the message from guilt feelings can be transformed into citizens’ courage was an empowering process. By 1994 feminists in Belgrade had formed a few historic women’s groups to respond to political and women’s needs. The Autonomous Women’s Center (AWC) was one of them.

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1 The Belgrade Women in Black Against War group was founded in 1991, with the slogan ‘Against our own occupying others,’ following the model of activists in Israel who started vigils with the slogan STOP THE OCCUPATION in 1988. http://www.zeneucrnom.org
2 SOS Hotline (original name: SOS telefon za žene i decu žrtve nasilja – SOS Telephone for Women and Children Victims of Violence) was founded on 8 March 1990 in Belgrade.
3 Activists from the first feminist group in Belgrade, Women and Society (founded in 1980), initiated the SOS Hotline in 1990. Soon after the war started, feminists moved in different directions and by 1994 many other groups were formed: Women’s Parliament, Women in Black Against War, Center for Women’s Studies and Autonomous Women’s Center.
As most of us in the women’s movement were also active in the anti-regime and anti-war movement, one of the ongoing discussions in which we were engaged was about the so-called ‘neutral-ity’ of counsellors versus our political commitment. Nationalism was rising to its devastating size and feminist organisations were affected as well. In that period, in Croatia and Serbia two service-oriented feminist organisations (the Center for Women War Victims in Zagreb4 and the Autonomous Women’s Center) decided to take an explicit non-militarist and non-nationalist stand. It was therefore a daily virtue to keep the services of AWC open to all women (nationalist and non-nationalist), to have a precise political standpoint, holding the Serbian government responsible for the war, and at the same time we collaborated with institutions of that same government in relation to joint clients. In that period, we learned that ‘Clients first’ is not a priority of institutions of nation-states. For them, it was ‘Nation first’, which meant that national interests preceded the needs of clients.

In 1994 two counsellors of AWC paid a visit to the psychiatric hospital in Belgrade in order to offer support to a few women raped in war who were their clients. The chief psychiatrist’s answer was ‘No’. Psychiatrists kept women raped in war far away from us – ‘national traitors’ – in order to keep the survivors as token evidence in international politics that Serbian women are also raped in war. Later we learned that this same chief psychiatrist photocopied and distributed the medical dossiers of rape survivors to foreign journalists(!), but would not allow the support of volunteers from non-governmental organisations.

These few images serve as an introduction to understanding how the war in the region shaped the experience, knowledge and politics of a feminist organisation in Belgrade during the 1990s.

15 years Autonomous Women’s Center

The Autonomous Women’s Center was founded in 1993 by feminist activists and volunteers of the SOS Hotline in Belgrade. This was the first women’s centre with a safe space for counselling in Belgrade. In the beginning, services were adapted to the huge needs of refugees and women survivors of the war. During this period, the activists were developing hotline support and ways of counselling professionally, and also were active in street demonstrations against the Serbian regime and against war. There was almost no collaboration with state institutions at the time, and by 1999 the Milošević regime was definitely not accepting non-governmental organisations (sending financial police to NGOs) and vice versa. Nevertheless the Center has grown, and it now has 22 staff members and more than 20 regular associates in three teams.

After the political changes, in 2002, the activists and counsellors of the AWC divided the Centre’s activities into two main groups: those focusing to elaborate the educational and lobbying means to facilitate working with the state, now that such cooperation was finally possible, and those continuing to develop counselling and therapy as a means to facilitate changes for individual women. This division of labour among activists of the Center means that on the one hand AWC works on growing as a service provider, and on the other, on increasing the protection of women through state institutions, laws and public documents.

Before I continue to present the AWC here in Vienna, in the context of the 10 years of the Austrian model, I need to say that feminist activists have become counsellors-experts in Belgrade by learning and using the shared knowledge of many other feminist centres in the world, of which I will now

4 During wartime the Autonomous Women’s Center collaborated with two sister organisations: Center for Women War Victims, founded in 1993 by feminists already engaged in the women’s safe house and the SOS Hotline in Zagreb, to organise support for women survivors of war and violence, http://www.czczz.hr and also with Medica Zenica – Women’s Therapy Center, founded that same year in Bosnia and Herzegovina, http://www.medica.org.ba.
mention some. For me it is crucial to remind ourselves that we learn from others, and that is exactly one of the reasons why we have come to this conference.

In the first phase after starting AWC, we had regular trainings and advice for a decade with experts from the Rape Crisis Centre ‘Against Her Will’\(^5\) from Holland, and many other therapists from the USA, Germany, Australia and other countries. We were translating historic manuals from the Washington DC Rape Crisis Centre and London Women’s Aid and many indispensable essays of feminist theorists.\(^6\) After the overthrow of the regime in 2000, a few AWC activists were inspired by the community-based intervention programme of the Duluth Model and by the Austrian model of protection against violence in the family. In 2006 the AWC translated an essay that Rosa Logar had presented to the UN in order to distribute it to participants in our training programmes.\(^7\) Staff in most of the state institutions had been highly neglected, isolated geographically, politically, as well professionally during the Milosevic regime – therefore, offering a brochure with Austrian experience as a gift was a political act of respecting them, treating them with dignity, and giving them the chance to be informed professionals and citizens.

Facilitating change of state institutions and documents

In 2002 the AWC teams started to support institutions working with women who have survived violence in the family, first with community health centres that still are part of the state-organised service. Soon the collaboration was extended to include social work centres as well as the Ministry of Social Affairs and Politics, then the Ministry of Health and later the police and justice systems.

Here the AWC was faced with different issues: first, institutions had, and still have, different levels of motivation for education on violence against women. Second, they have different attitudes toward non-governmental women’s organisations, ranging from respect and praise (rarely) to negation of our expertise (more often). Since there is still no National Plan of Action for Violence Against Women, collaboration of non-governmental organisations with governmental institutions is sporadic and depends on the individual personalities of decision makers and their political goodwill.

I will now list the most important aims and successes of the Autonomous Women’s Center in influencing change of state institutions and their policies in relation to violence in the family.

- Since 2002, organising education for professionals in primary health care and social work centres to recognise and document injuries caused by violence, and to provide adequate services to women who are exposed to violence: trainings done in 16 Belgrade municipalities and 10 other communities in Serbia.  
  Example: The Ministry of Labour and Social Policy accredited the AWC team in 2008 for the education of social work centres in Serbia on violence against women.
- Facilitating the elaboration of concrete documents of work in the above-mentioned institutions for accepting standards and protocols. Protocols of work have been specifically outlined, published and distributed for primary health practitioners, social work centres and police.  
  Example: The Ministry of Health has accepted the Protocol in the Primary Health Care for Treating

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5 The Dutch government financed the organisation Admira to create a programme through which the best feminist therapists and experts trained counsellors in Bosnia and Herzegovina, Croatia and Serbia from 1994 to 2005. The experts who trained activists in AWC were: Gerda Aarnink, Anja Meulenbelt, Ingrid Foeken, Gunille Klieverda, Sylvia Borren, Els Auberg, Marlies Boisch, Marlies Mannesse.
6 Diana Russell, Donna Hughes, Andrea Dworkin, Judith L. Herman, Ellen Bass, Laura Davis, Sandra Butler.
7 In 2007 Rosa Logar and Sylvia Taller were key speakers in a historic, magnificent all-day event, ‘The Austrian model of intervention in cases of violence in family’, organised by the AWC and held in the building of the parliament of Former Yugoslavia, where 400 representatives of social work centres, police, community health centres and jurisprudence institutions filled the parliamentary hall. Each guest received a copy of the booklet describing the Austrian model.
Women with Experience of Violence in Partnership drawn up by the AWC team, and invited AWC to take part in the Implementation Working Group for this protocol (2008).

- Facilitating the introduction of data collection systems and documenting violence in social work centres and community health centres.
  
  Example: In the 16 municipalities in Belgrade, social work centres have been introduced to an electronic database system (computers, expert support, data programme – provided by AWC) that enables to outline a statistical picture of the characteristics of violence and the intervention of professionals.

- Developing a model of coordinated action in the local community as a means of prevention of violence against women in nine counties (five counties-towns, and four Belgrade counties).
  
  Example: AWC supported the development of a model of cooperation in Lazarevac (one of Belgrade’s 16 municipalities) which became a model of good practice: they carry out permanent collaboration between municipality government and the social work centre, police and the community health centre. As part of their commitment, the social work centre organises case conferences and has developed a Mobile Team for Violence in the Family (on call 24 hours a day).

- Permanent pressure on decision makers on national and local levels to create the state policy documents and laws and to standardise the protocols and procedures on protection from violence.
  
  Example: In 2007 AWC organised discussions on protection practices in Serbia and formulated a list of recommendations to the Ministry of Justice for improvement of the articles in the Criminal Law and Family Law concerning violence in the family.

- From 2006, motivating judges and prosecutors to consider seriously the theme of violence against women by organising round table discussions, professional seminars, research and public discussions in order achieve equality in the judicial practice.
  
  Example: The biggest improvement has been seen among judges in family courts in Belgrade who have issued orders of protection measures even in cases where economic and psychological violence was recognised, without evidence of physical violence.

- Monitoring of law implementation on the protection of women survivors of violence.
  
  Example: Three years of research on monitoring criminal charges for violence in the family8, in 529 cases in Belgrade and Niš, showed that 30% of cases were dismissed by the public prosecutor after a prosecution process of a duration of around four months. Of those cases that actually came before the court, 60% of perpetrators were charged with suspended sentences and 20%, with effective prison punishment9.


Local and international networking, research, and strengthening the women’s movement

AWC is active in prevention campaigns, research, networking and strengthening the women’s movement. Below I will note some of the most important aims and successes of the work in these fields.

- Research conducted by the AWC in Belgrade with a sample of 1 456 women, as a component of the World Health Organization (WHO) survey “The WHO Multi-Country Study on Women’s Health and Domestic Violence Against Women” (2005), showed that one in four women suffered physical

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8 The Law on Amendments to Criminal Law of Republic of Serbia, passed in 2002, defined violence in the family as a criminal act for the first time in Serbia. Article 194 provides for punishment of perpetrators of family violence with a fine or imprisonment up to one year. (Note: only one year!)

9 Konstatinović Vilić/ Petrušić
and/or sexual violence, and one in three women experiencing violence suffered injuries.10
- Supporting and facilitating the local communities to be involved in the Council of Europe campaign to combat domestic violence against women, 2007/2008. The response amounted to the participation of 10 city government-counties, Belgrade County, as well as the City of Belgrade Department of Social Affairs, and the local government of the autonomous region of Vojvodina.
- Since 2001, coordinating the national campaign for 16 Days of Activism Against Violence Against Women each year by pointing out the accountability of the state, engaging approximately 30 to 50 women’s organisations which carry out street actions in their towns, printing between 30 000 and 50 000 leaflets, distributing radio jingles for 50 to 100 media presentations.
- Initiating and supporting transfer of information, knowledge and skills to the local Network Violence Against Women of women’s organisations working with women survivors of violence in Serbia. This Network includes 35 women’s organisations, mainly SOS Hotlines and safe houses for battered women (8).11 Most of them are small activist organisations with enthusiasm and few resources.
- Since 2006, organising peer-support education and raising awareness of students at Belgrade University regarding the need for protection from gender-based violence, through educational and peer discussion workshops, and motivating them to self-organise.
- Since 2007, AWC has been a focal point – Civil Society Contact Organisation – for 48 women’s non-governmental organisations in the implementation of the Poverty Reduction Strategy of Serbia: strengthening women’s organisations to be visible in civil society and influential in government planning (through the annual ministerial plan).12
- Moderating the women’s e-mail list (zenskaposla) with more than 440 addresses of activists throughout Serbia, feminists, professional women advocating women’s human rights and others, with a daily exchange of approximately five to 15 e-mail messages (in 2007 there were 3 091 messages).

Facilitating change for individual women: Provision of services

In the course of 15 years, the Autonomous Women’s Center has managed to develop different services in order to respond in the best ways possible to women who have survived male violence. Since state institutions were offering no specific support for women, the non-governmental organisations had to cover the various needs of women surviving all different types of violence: in the family, sexual violence, sexual abuse of children, rape in war, sex-trafficked women, and others. The AWC works with adult women and covers most of their needs for counselling and legal rights, except the need for safe housing.13

To give you a general idea, in 2007, AWC provided 5 216 services for about 2 000 women,14 which means that, on average, each woman used approximately 2.5 services.

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10 WHO survey ‘The WHO Multi-Country Study on Women’s Health and Domestic Violence Against Women’: ‘23% of ever-partnered women reported having suffered physical violence, and 6% sexual violence by an intimate partner; 4% had experienced such violence during the past 12 months; 30% of the women who had experienced physical violence by their partners reported having been injured.’
11 Women war survivors asked not to use the word shelter for services for battered women because it retraumatises them with memories of wartime and shelters in protection from the shellings and bombs.
13 This year there are eight safe houses for battered women in Serbia (7.6 million inhabitants). In 2006 a media campaign was launched in support of a Safe House in Belgrade, after which the city government as well as other institutions allocated some money for its operation and for building another safe house.
14 It is still difficult to state the exact number of clients because separate databases for different services are not yet synchronised.


<table>
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<tr>
<th>Type</th>
<th>Sum</th>
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<tr>
<td>SOS Hotline counselling</td>
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<tr>
<td>SOS legal counselling</td>
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<tr>
<td>Individual counselling</td>
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<td>Court representations</td>
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<td>Self-help group sessions</td>
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<tr>
<td>Conference case advocacy</td>
<td>40</td>
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<td>Total</td>
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- SOS Hotline and individual counselling is attended to by specially trained counsellors using feminist principles of empowering women.
- SOS Hotline legal counselling is done by young lawyers over the telephone, particularly about the Criminal Law (2002) and measures of protection in the Family Law (2006).
- Self-help groups proved to be a great means of empowerment, as has been shown from the early years of the women’s movement. The groups are led by trained ‘experts of experience’, for women surviving violence in partnerships (groups for sexual violence still need to be formed).
- E-mail counselling and support started in 2006, an excellent tool for women who use the Internet. The future plan includes moderating an e-mail forum for survivors.
- Court representation and lawyer’s counselling are effected by lawyers who are trained to work with traumatised women. The legal support is offered for cases involving criminal charges against perpetrators in the family, and for family protection measures. In 2007, court representations were made 70 times in 27 court proceedings for 22 women.
- Participation of AWC counsellors in conference cases regarding domestic violence in the social work centres (as of 2006). The AWC counsellor serves as support of the woman survivor of violence and monitors the process, in order to make sure that the case managing is done in the women’s best interest, given that institutions still do not act on women’s needs, but often stereotype women in patriarchal roles.

Inventing the profession of feminist counsellor in Serbia

The main success of the counselling team of the Autonomous Women’s Center has been in making counselling of women survivors of violence a profession. The counsellors’ work is based on knowledge of the women’s mental health movement and feminist principles in counselling. Given that there are no institutionalised education programmes to prepare professionals for working with survivors of violence trauma, the AWC team has used the experience of long-term knowledge acquired from feminist therapists and counsellors to create its own training programme. This training programme lasts up to one year of theoretical and practical learning for those who want to become counsellors. Presently, AWC has ten counsellors and five apprentice-counsellors.

Recently, two dimensions of work have been discussed among the counsellors in the team:

15 Experts of experience are women survivors of violence who themselves have gone through the self-help groups.
16 In the region, the only other women’s organisations working on sexual violence are: Incest trauma centre, Belgrade, www.incesttraumacentar.org.yu, and in Croatia: Women’s Room, Zagreb, www.zenskasoba.hr/
17 The e-mail counselling address is found on the AWC web site, with 12 hits a day, each with a duration between 5 and 10 minutes, which makes it the most frequented women’s web site in Serbia.
**Affirmative action as restructuring the emotional order within oneself**

When we talk about affirmative action as a feminist principle, we usually mean the politics of a certain organisation or institution toward supporting women facing multiple discriminations. The AWC has a history of advocating affirmative action measures from its founding when we insisted on working with women of all ethnic origins who had been raped in war. In addition, the AWC database has shown from the beginning that about half of the clients come from doubly discriminated groups, most of them being Roma women and/or emotionally intense women, women in psychiatry, poor, foreign women, women with disabilities, etc.

Lately, discussions have moved further to include the personal changes each activist and counsellor has to make in order to understand multiple discriminations. Affirmative action can be understood as the choice one makes in one's own mental and emotional space in order to understand and affirm an experience of women/clients who belong to discriminated groups. This means choosing to experience the Other: to meet, to encounter women who belong to the discriminated groups we do not belong to. This encounter can bring experience as well as knowledge important for counsellors, so that they will be able not to make their own reference group's assumptions (cultural, class, national, race, etc.), but to be open, collaborative and understanding of the ways in which the Other understands herself, with the interpretation map she has from her own reference group and herself as an individual.

Affirmative action is, therefore, understood as a process of restructuring the emotional order within oneself. It is an individual decision that is important for the professional attitude and is supported by the team. This means that the strategic planning of the counselling team includes encounters with women’s groups from different discriminated populations. The counselling team therefore takes a stand that working through one's own emotional patterns is the beginning of the knowledge of ourselves that can bring change in our relations to others, in our deconstructions of patriarchal control of power in ourselves. This is how affirmative action can be used, as a politics of relationship that implies particular effort in enlarging our own experience.

Affirmative action understood in this way is, therefore, not only a set of standards the women's organisation formulates in order to offer more chances to women who have not had the opportunity to experience those conditions in terms of accessibility, extra training, working hours, and other decisions, but also a decision to work on our personal emotional order, so that we can understand and hear women from discriminated groups other than our own.

**Feminist ethics of care**

Feminist ethics of care has different meanings depending on the context, but basically it starts from overcoming the patriarchal, dualistic gender-role division given in the culture where men should take care of themselves only, and women of others only. Feminist ethics of care is, therefore, based on the concept of caring for oneself and for others equally, as an individual choice and as a citizen's responsibility.

This concept is especially important in relation to counselling and other service/care professions, when the profession itself involves offering care to others. Women in these professions face a dual role, caring for others in their work as well as for those at home. The outcome, we know, is burn out.

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18 The principles of work were documented in the Politics of Work of AWC in 2000.
19 In 2007 the counselling team organised exchange visits to women’s groups: Out of the Circle, Organization for protection of rights and support of women with disabilities http://www.izkruga.org/ and ASTRA- Anti Trafficking Action http://www.astra.org.yu/, the future plan includes the Roma women’s group in Belgrade.
20 Sevenhuisen; Zajovic; Yuval Davis; Tronto
21 During the ten years of totalitarian regime in Serbia (1990–2000), employees in social work centres, police units, courts and health institutions had low salaries, received no specialised training, and most of them were exposed to widespread corruption in the system. Due to this history of systematic structural neglect of their professions, their exhaustion and burnout is very high.

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162 New Developments in the Area of Services for Women and Children
and, if we go more specifically to long-term service providers, institutional violence. In the service providing institutions, institutional violence implies two common reactions: ignoring the needs of clients or/and being constantly angry with clients. Furthermore, institutional violence retraumatises survivors of violence. It is therefore crucial for all service-providing professions to include ethics of care of workers as part of their work policy. This clearly means: we choose to take care of our own mental and emotional well-being as care providers in order to be capable of caring for others. This also means that emotions of workers are taken seriously. It is a historic decision for every organisation that takes such a stand, because historically emotions are devaluated as belonging to the ‘female world’, while every stand on rights and efficiency of organisation is valued as coming from the ‘male world’. It is therefore a feminist stand to equally value workers’ rights as well as their emotions, and moving the concept of justice to include both.

The AWC counselling team has made initial decisions on its own standards of feminist ethics of care in counselling work. One part consists of individual supervision with a psychotherapist (on a monthly basis), intervision with colleagues (on a daily basis) and case management discussions during the weekly team sessions. In addition to this, another feminist organisation, Žene na delu, runs special bodywork seminars entitled ‘We place ourselves first,’ dedicated to lessening burnout of activists working in the field of violence against women.

To conclude: Perspective of a feminist counsellor

What have I learned? That an important dimension of our work is validation of the experience of trauma. In order for a woman to overcome trauma, she needs me, she needs another person whom she can trust and who wants to listen.

A society – and that means me as a citizen – has a responsibility of listening to the other, to my neighbour, or to a woman in Bosnia and Herzegovina, or Kosova, where soldiers who killed her family wore uniforms Made in Serbia. And we have some different layers here. It is particularly healing for survivors to be able to tell their story to people belonging to the group of perpetrators/aggressors. This means, for example, that for women who have been victimised by Serbian soldiers, it is of special meaning to be heard by someone like me who is a member of the Serbian state. If I listen, if I believe, understand her pain and say I am sorry for the crimes done in my name; if I feel the depth of my experience of asking for apology for what the Serbian regime has done in my name, in me and in the woman I talk to, if she touches my heart – then she has a chance to feel she is heard, to feel her pain has been recognised, and after that she has a possibility to regain trust in others. She has a chance to let go of the hatred that has been discharged in her body. Many times in my life, these encounters ended up in embraces and common joy. Warm tears also.

Along a similar line are testimonies recounting the experiences of men against violence against women. The impact of those men who take collective responsibility and say yes, other men have done crimes as men, therefore in our name, and we are sorry – we shall talk about that soon.

22 Poulin/ Walter
23 Intervision is a term used for checking emotional responses of counsellors after their sessions, among counsellors on duty.
24 Žene na delu (Women at work) is a feminist organisation in Belgrade. http://zenergija.org/
26 Women’s Peace Coalition was formed in 2006 with activists of the Women in Black Network in Serbia and Kosova Women’s Network, in order to strengthen collaboration, women’s solidarity and women as dynamic actors in peace movements. Women in Black have taken many actions with the feminist approach to transitional justice, one of them being: to ask for apology for the crimes done in our name. I am proud to say that many of us in the last forty years of the women’s movement have used passion for other women in opening and revaluing differences in society in order to lessen the misogyny of this world. http://www.zeneucrnom.org/index.php?option=com_content&task=view&id=198&Itemid=54
If we look at the governmental/state institutions in relation to this first of all principles of counselling work: it is the state through its institutions, which has to trust the experience of survivors. Patriarchal systems do not believe women. This has been a basis of misogyny for millennia. Therefore we all have a long work to do to unfold and reframe patriarchal standards and to trust in women's experiences. A woman victim/survivor needs laws and services that will listen, trust her words and that will confirm her pain. This is equally true for women in wartime and for women on my street. This means that all the institutions created up to now and those that we have yet to create, laws, protection measures, national action plans – all of these serve, among other functions, to give traumatised women and men a confirmation that ‘yes, the crime happened and yes, it was inflicted upon you, and we know it and this is what we shall do as a consequence’. This validation of a terror, a confirmation of a most intimate pain in our lives, is a need of our existence; it provides a matrix for the meaning of our lives. At the same time, this validation of personal pain is the first act of public justice.

This therefore means that laws, courts, international and local documents, protocols, standards, UN resolutions and other mechanisms are there as well in order to lessen the traumatic pain, to support healing of survivors in order that they can grow, overcome pain and become honourable citizens of this society. This also means that state institutions need to find measures through which to hear survivors’ stories, to find ways to honour them for sharing their very personal experience, before other measures of justice are applied. Because the first measure of justice is to listen with trust. It is, yes, because of the safety of women that we need all possible measures of protection and jurisprudence, and, yes of course we need all of the above-mentioned institutions because of the rule of law and the attempt to believe in democracy, but their function on the personal level is crucial, and that is the function of validation of injustice experienced through traumatic feelings. If a survivor’s pain is not acknowledged by a perpetrator, which we cannot expect, then the acknowledgement of the crime and of her emotions as consequence of this crime must be the function of the state.

A good implementation of a law takes permanent account of the dimension of mental health of a victim/witness: is she heard in a court, is she is taken care of through witness protection procedures, is she not confronted with a perpetrator if that might be retraumatising for her, and so on. And, if the perpetrator is declared guilty, she has a confirmation from the state that, yes, an injustice was done to her. This act of a public acknowledgement of guilt serves to enlarge mentally healthy dimensions in her life: ‘Healing Wounded People’ is one of the three reasons for the formation of the International Criminal Tribunal for the Former Yugoslavia, as Richard Goldstone has pointed out.27 Healing is justice: If the standardised procedures are adapted to a survivor’s needs, that means the state is taking care of her emotions. What does this mean? That in the process of making more democratic courts, laws and protocols, we are taking seriously the emotional lives of survivors. This means we are finally reordering patriarchal values: emotional reactions become equally valuable as rational acts; the pain of a survivor becomes an equally important quest for justice as any other material evidence of injustice. Because traumatic experience per se is injustice for the world. The personal therefore is validated as the political, as a need of the state to act upon this is how we move closer to the notion of a feminist state.

This essay is the outcome of joint work of feminists of the Autonomous Women’s Center and sisterly support for editing English from Shebar Windstone and Laurence Hovde.

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27 See Goldstone
References

Autonomous Women’s Center Belgrade: http://www.womenngo.org.yu/english/


Introduction

This paper is about the way services for victims of domestic violence have developed in Amsterdam. I will discuss the following topics:
- Blijf Groep, the organisation that provides the services;
- an overview of services provided;
- a look back on the way the organisation has developed in the course of the years 1990, 2000 and 2008;
- plans for 2008 and beyond;
- strategic aspects: developments in the background;
- an example of a new programme: assisted return;
- conclusion.

The service-providing organisation

Blijf Groep provides a range of services for victims of domestic violence in the Dutch provinces of North Holland and Flevoland.

The Netherlands has a population of over 16 million. The most recent estimates indicate that there are approximately 500 000 incidents of domestic violence in the Netherlands each year. Of these, between 12% and 15% are reported to the police. The Netherlands has a comprehensive system of services for victims of domestic violence, which included more than 3 000 places for women and their children in 2005.

Blijf Groep provides services for approximately two million out of the 16 million people in the Netherlands and is the largest organisation of its kind in terms of both size and work area. Its work area includes Amsterdam and the region around it, which houses roughly a million people.

As a major conurbation, Amsterdam has all the problems of such urban areas. As far as domestic violence is concerned, this means more violence,
more specific forms of violence such as honour-related violence, and a greater concentration of multi-
problem victims and perpetrators. At the same time, it has complex care and support structures. The
problems of the victims include not only the trauma following violence, but also mental health, social
and educational problems in combination with addiction, unemployment and a lack of daily occupa-
tion. A majority of victims are immigrants.

It is our impression that, on average, domestic violence occurs more often in Amsterdam than in the
rest of the country. This is borne out by the fact that the number of incidents of domestic violence re-
ported to the police in Amsterdam in 2005, i.e., more than 6 000, was three times the national average.

An overview of services

The chart below gives an overview of the services the organisation provided on 1 January 2007.

Blijf Groep services

- The chart starts at the top with the client who turns to the organisation for help.
- The domestic violence advice and support units offer clients advice and immediate assistance by
telephone 24 hours a day, seven days a week, although personally outside office hours in emer-
gencies only.
- Local support teams of the advice and support units offer short-term counselling aimed at stop-
ping the violence; interviews, five on average, may be held at the office or at the client’s home; the
programme also offers access to the Aware in-home alarm system.
- Out of Sight is a small-scale secret location providing shelter to victims of extreme violence, oper-
ated in collaboration with the police; it is for clients from outside the Amsterdam area.
- The Time Out programme provides emergency safe shelter for periods of up to six weeks, during
which women can choose an appropriate follow-up.
- The longer-term 24-hour shelter programme provides shelter for an extended period in a setting
where staff is available 24 hours a day.
- Assisted independent living programmes in Amsterdam, Flevoland and the Zaan area provide an
intermediate form of sheltered accommodation where women can learn to live independently again.
- The intensive counselling programme in the Zaan area and the intensive family therapy programme
in Haarlem are follow-up programmes in a group home.
- The aftercare programme provides help to clients living independently after a stay in one of the
shelters.
- Finally, the chart shows the possible moments at which clients can end their contacts to Blijf Groep.
Looking back and looking ahead

Blijf Groep has not always been as presented above. It has shown strong growth and has expanded significantly, particularly in the past five years. Looking back on the situation in 1990 and again in 2000, and comparing this to the situation in 2008, we see the following development.

1990
- There were three independent shelters in Amsterdam: Blijf van m’n Lijf, the first shelter in Holland set up for abused women and their children (in 1975); Het Eliashuis, a women’s shelter which had traditionally been a crisis centre (after 1975); and Vrouwen 40–60, a shelter for women aged 40 to 60 and specifically targeting that age group. In sum, there was room for 65 women and as many children. There were no shelters at all in the province of Flevoland, and there were six small-scale independent Blijf van m’n Lijf shelters in towns of North Holland, each catering for approximately 10 women and their children.
- Funding was provided by the municipalities, drawing on state funds for women’s shelters.
- All the shelters, in principle, were open to women from all over the country; one of the shelters in Amsterdam would also admit local women, but the others would not normally, for safety reasons.
- Few of the staff were paid: e.g., in the Amsterdam shelters approximately 15 professional workers were working together with approximately 40 volunteers; in the other North Holland shelters a few professional workers would work together with volunteers; efforts were being made to increase the budget to attract more professional workers.
- The annual budget in Amsterdam was approximately half a million euros.

2000
- The three Amsterdam organisations joined forces under the name Vrouwenopvang Amsterdam, with the capacity to admit 75 women and their children at two locations.
- There were several units for assisted independent living in Amsterdam, an intermediate stage between a stay at a shelter and living independently.
- There was a new unit for assisted independent living in Flevoland.
- There was a telephone hotline which gave immediate help and advice to victims of domestic violence, referring agencies and other stakeholders.
- There were various projects: a prevention project, a project which developed a compulsory programme for perpetrators, a preventive educational project and one providing aftercare to women in their own homes after leaving the shelter.
- There were a number of small-scale support units in Amsterdam and Flevoland providing short-term help to about 100 women a year.
- There were several places for women needing emergency shelter in their own region.
- The services in North Holland were not developed further, but the Aware programme was offered outside that area (giving women an alarm system at home so they could call in immediate police assistance if their former partner threatened them again).
- By this time the municipality of Almere was providing funding (for Flevoland), as were various charities and businesses, and a small sum was provided by a health insurer.
- Capacity was, in principle, still available for women from all over Holland; however, 50% of the space in Amsterdam was accounted for by local women.
- The number of paid staff had increased significantly: 75 people (60 FTE) worked in Amsterdam and Flevoland, and approximately 10 FTE in each of the organisations in North Holland; volunteers were not involved any longer.
- The annual budget in Amsterdam and Flevoland was approximately 2.5 million euros; plus several hundred thousand euros annually for each of the small-scale centres.
2008:
- The organisation has expanded to more areas in North Holland and has a new name; the target population has increased to include all those involved in domestic violence.
- The total number of places has grown to 150, half of which are situated in Amsterdam (where 150 women and their children can stay at any given time); shelter is provided at eight locations; two small-scale units want to retain their autonomy and have not joined the organisation.
- There are a number of new services; especially the advice and support units have expanded considerably; these units provide advice and support to one thousand clients each year in Amsterdam, and to several hundred in Flevoland; a fair number are also assisted in Alkmaar.
- An assisted return programme offers short-term counselling to victims and their partners; its aim is to stop the violence.
- The Aware programme is available in all areas served by Blijf Groep.
- Non-residential services are now also available for children in various parts of Amsterdam.
- Legislation permitting a temporary restraining order has entered into effect; a pilot project was implemented in one of the Amsterdam districts in 2007, coordinated by the support units.
- Funds are now provided by a number of municipalities (Amsterdam, Diemen, Almere, Lelystad, Zaanstad, Haarlem and Alkmaar), a number of health insurers, charities and enterprises, while the province of North Holland and perhaps also the Ministry of Social Affairs provide funds for special projects.
- The local focus has been strengthened, only part of the capacity is earmarked for clients from other parts of the country; by now more people living at home are offered assistance than people living in the shelters.
- A number of secret shelters have been set up, the others are anonymous and safe.
- The number of employees has risen to over 200, more than 140 FTE, 20 of whom are men; 30% of staff was born outside the Netherlands.
- The annual budget is 11 million euros; together, the two small-scale independent shelters have approximately one million euros at their disposal.

Plans for 2008 and beyond
- Conversion of several of the existing shelters to create one new – open – crisis centre.
- Providing a number of places for male victims.
- Establishing more very secret locations.
- A separate project for victims of honour-related violence will be started.
- Running a facility for long-term secure sheltered housing for women and children.
- Developing the advice and support units so that coordination and organisation become more important features of the help provided.
- Developing neighbourhood services: courses for women; empowerment groups; groupwork for children and their parents; training for professionals; information and advice.
- A project for male victims will be started.
- Introduction of a special law imposing a temporary restraining order for perpetrators of domestic violence.
- Provision of online e-help.

Strategic aspects

In this section, the strategic development is considered from five perspectives:
- becoming part of the mainstream of recognised welfare services in the Netherlands;
- increasing support in society;
- expanding and diversifying funding sources;
- developing the internal organisation;
- raising the profile of the organisation.
From ideology to pragmatism

When the first *Blijf van m'n Lijf* shelter was set up in the Netherlands, it was important – in the same way as in a number of other European countries – to get onto the political agenda the inequalities of power between men and women and at the same time to supply proof that women's abuse existed. It was also important to give women an effective opportunity to change their lives, and indeed our first poster made the point: ‘You can leave if you want to’.

During the past ten years new insights have been developed within the women's shelter groups, influenced by our contact – and increasing collaboration – with the police. In 1995, for example, we started the first project in the Netherlands that provides compulsory treatment for perpetrators. The project was funded by the Ministry of Justice and implemented in collaboration with the Amsterdam police.

Among these insights are the following:
- Domestic violence is not a private problem, but one of safety.
- Help must be directed at stopping the violence and this means focusing on the whole family/the social context.
- Domestic violence often involves a spiral in which the violence keeps escalating. In addition, domestic violence is often transgenerational: the roles of perpetrator and victim are passed on from one generation to the next (the children who witness domestic violence). It is important to limit the damage by tackling the problem as early as possible.
- Interventions must target a broad group integrating all people involved in domestic violence: victims, perpetrators and witnesses.
- An integrated approach is important, involving cooperation between helping agencies, the police and prosecution services, in such a way that all the necessary expertise is mobilised in the client's interest.

We have come to regard violence differently. We no longer view domestic violence purely as the result of inequalities of power between men and women. Of course we are still concerned with these inequalities and the abuse of power: domestic violence will always involve inequalities of power, but other dimensions must also be taken into account. A number of risk factors are relevant. These include:
- low self-esteem;
- low socio-economic status or economic dependence;
- substance abuse;
- intergenerational factors such as growing up in a family where there is a lack of attention or where there is abuse and neglect;
- different cultural or subcultural beliefs.

Our vision of safety has become less monocausal and more dynamic. It is about providing care while remaining aware of the risks. Employees and clients are responsible for their own actions and for their own contribution to the violence. Lack of safety from within is at least as important as lack of safety from without. Women who call on our services are victims of violence who deserve protection. In the past there was little regard for the fact that women, even though they may be victims of violence, can also create their own lack of safety: among themselves in respect of other women, but also in respect of children and employees. Our tendency to think of victims and perpetrators in black-and-white terms has also become more differentiated.

A recently published large-scale national survey among clients of women's shelter services has confirmed our experience in practice: women who turn to a shelter with their children are in a very vulnerable position, there is a multiplicity of problems with consequences for their health and their perspective of an independent existence.

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1 Judith Wolf et al.
Support in society
The political origins of the *Blijf van m’n Lijf* shelters in the Netherlands are left-wing and socialist. The initial approach was that of a group of activists calling attention to a problem denied by society. Other women’s shelter groups had a charitable, church background with broader political support. In 2000 the Amsterdam *Blijf van m’n Lijf* shelter merged with one of these organisations and this brought together the two points of view. Since then systematic association has been sought and links have been forged with various political parties at this local level. Consequently, we have enjoyed broad political support in Amsterdam for a number of years. Despite changing political coalitions, though with a consistently dominant social democratic party, this process has continued successfully and funding has gradually been made available for expansion.

Domestic violence is a national political priority. The Ministry of Justice is responsible for coordinating an integrated approach, in which all the relevant organisations have a part to play: social services, health services, children’s services and of course the women’s shelters.

As a result domestic violence is no longer exclusively, or even primarily, a theme monopolised by the women’s shelter groups. The role of these organisations has changed as a result. They are now organisations with expertise in domestic violence; they regard this field as their core business and provide professional help and assistance. Some actors within the movement regret this loss of uniqueness, while others do not consider it to be a problem.

Diversification of funding
The Dutch Government began to subsidise the *Blijf van m’n Lijf* shelters in the 1980s. As a matter of principle, the shelters only wanted to accept these funds for a number of non-core tasks, such as housekeeping and child care, but not for the services provided to the women. Later, from about 1990, the funds – still state funds – were distributed locally by more than 40 of the larger municipalities; if a municipality felt a particular task sufficiently important it would sometimes add a sum out of municipal funds. However, the organisation’s total dependence on these funds left it very vulnerable. Every shift in political priorities had an impact and, as the subsidy was subject to annual review, this meant a lot of active canvassing to ensure a constant flow of cash.

About ten years ago, when it became clear that the problem of domestic violence was not solved simply by providing safe shelters for the women concerned, and as more became known about the consequences of violence for victims, efforts were made to seek funding from health care resources as well. This took several years, but we eventually succeeded and a proportion of our counselling services are now funded from health care sources.

Because of the increasing recognition of domestic violence from a safety point of view (domestic violence is not only a health care problem but also a safety problem) we have succeeded in obtaining funding for preventive activities from this source. Our expanding remit has also led to an increase in resources. Success in one municipality makes it easier to persuade other municipalities to follow suit.

We actively seek funds for new projects from charities and enterprises, and the funds from the various sources are combined so that we can offer women an integrated package of help and assistance.

For some years now the various shelter organisations have increasingly cooperated at the national level. The organisational form that was adopted is a national committee. On the one hand this is intended as a national lobby, and on the other hand, aimed to ensure more unity of action and a higher profile.

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2 Dutch Ministry of Justice
A volunteer organisation turns professional

The organisation has grown internally as well. The table below shows the various phases of this process.

**Stages of professionalisation**

<table>
<thead>
<tr>
<th>Organisational phase</th>
<th>Missionary</th>
<th>Transitional</th>
<th>Professional</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Focus on enterprise and productivity</td>
<td>Focus on management</td>
<td>In addition to management, focus on integration</td>
</tr>
</tbody>
</table>
| Characteristics      |  - A lot of ‘soul’
                      |  - Ideology
                      |  - A saviour’s role
                      |  - Inward looking
                      |  - Loyalty | - Confusion
                      |                      | - Resistance
                      |                      | - Loss of loyalty
                      |                      | - More awareness of the outside angle
                      |                      | - Shift in professional role | - Loyalty to profession
                      |                      |                      | - Coherence
                      |                      |                      | - Aware of drivers
                      |                      |                      | - Core tasks
                      |                      |                      | - Rights/ responsibilities |
| Method               | Everyone has a say, ‘my idea’ | Distinction between deciders and doers | Layered communication structure; interfaces; each layer has more say in what it does |
| Role of management   | Management is a broad top layer immediately above workers (based on consensus);
                      | Board is very much ‘hands on’ | Management team
                      |                      | Broader responsibilities for director
                      |                      | New board | Middle management
                      |                      |                      | MT at strategic level
                      |                      |                      | Director is a member of the board
                      |                      |                      | Supervisory board model |
| Vision               | Product-oriented
                      | ‘We supply … you buy’ | More oriented towards client needs | Future- and funding-oriented |
| Control              | Little control
                      | Few systems
                      | Little management information | More systems
                      |                      | Management information still not complete | Reliable management information
                      |                      |                      | Accountability (in terms of euros) |

The development of knowhow will have high priority in the coming years. Facts and figures will be gathered more systematically and will be used effectively to ensure further methodical development. To this end, we and approximately 10 sister organisations have sought collaboration with Radboud University in Nijmegen.

A more public profile

Except for high security locations, the shelters are no longer closed, secret strongholds. In the past few years we have made visible (as far as we are currently able to) more and more of our activities, objects and results. Our communication is more open, we organise working visits and communicate our vision in local media. In 2008 we will revise our web site and materials.

The principles that form the basis for the development of a new crisis centre (*Het Oranjehuis*), to be built by 2009, illustrate the way in which we are trying to raise our profile and become more visible.

- Though it is to be safe, it is not to be secret: a shelter at a secret location is no longer strictly necessary for a large group of women. Moreover, safety is often more fiction than fact: a secret address is less secret in practice than it is supposed to be, so that perpetrators can still pose a safety risk.

- The aim is a safe – or safer – return home: at present approximately half of the clients in the shelters return to the old situation within two weeks without a great deal having changed. This is mainly because they want to end the violence, but not their relationship. In a recognisable shelter, the client can keep in touch with her home while she and her partner receive support looking for ways to keep violence out of their relationship.

- It is important to break the isolation: being offered shelter at a secret address often leads to social isolation because the women concerned cannot tell anyone where they are and certainly cannot receive visitors. A recognisable, visible shelter for a given area avoids this isolation for both the women and, more importantly, for their children: the opportunity to invite friends helps their social develop-
ment. By staying closer to the community, it is easier to take the step back into the community.

- We want to reduce feelings of shame and being a victim: many victims are ashamed of what has happened to them. Having to hide in a secret shelter only strengthens this feeling. Moreover, secrecy often confirms the clients’ feeling of being victims. A recognisable and visible building radiates self-confidence, and this can have a positive impact on the women and her children. This is also consistent with the importance that has long been attached to empowerment: making progress by addressing the clients’ strengths.
- We want to make a statement: domestic violence is a societal problem that cannot be ignored. Victims should not have to hide, lock themselves up, and feel ashamed. A shelter that is visible leaves no room for doubt: domestic violence exists and it requires support from the entire community to tackle it.
- In this centre we will join forces: by combining a crisis centre, an advice and support unit, non-residential services (such as empowerment groups), and assisted independent living programmes, we will strengthen our capacity to help.

**Assisted return**

The assisted return programme is a good example of the new type of service we provide, which is why I will discuss it in more detail here. We started operating the programme several years ago and it has now become an established part of our services. It is a short-term, system-oriented programme offered to both victims and perpetrators, designed to stop the violence.

Many women return home from the shelter very quickly. An internal preliminary study indicates that these women share the following features:

- They have little or no problem awareness; they do not seek help themselves.
- There is a regular pattern of communication by means of violence that has repeated itself through several generations.
- There is an extreme lack of power and control, also with regard to raising the children; the situation gives rise to much concern.
- They have little ability to cope and probably realistically assess that they cannot deal with life as a single parent (at least not without assistance).
- Economic dependence and problems concerning their residence status exacerbate the situation, as do problems with language and communication.
- Often medication and a wide range of psychosomatic and mental health problems are involved.
- Many of them are under pressure from friends, neighbours and the police to go to the shelter, but would in fact prefer simply to go home; a stay in the shelter sometimes exacerbates the situation in the sense that the partner becomes a bigger threat, family relationships are discontinued, and the woman becomes an outcast.
- After returning home, they return to isolation.

The help we provide aims to break through the spiral of violence that has developed in the family. Our approach includes the following elements:

- Once the violence has stopped, the first step must be to make the violence something that can be talked about.
- Arrangements are made concerning the woman’s return home and/or continuing the relationship.
- Both partners are given tools to enable them to be a couple without outbursts of violence.
- Clients must become aware of alternative ways of dealing with conflict and be able to apply them.
- Clients must gain an understanding of the consequences of violence for their children and be able to support their children in this respect.
- Clients are made aware of and/or referred to additional helping agencies.
From a methodical point of view the following points are important:
- Our approach is competence-, goal-, and future-oriented, stressing the clients’ opportunities and the situation here and now; clients are encouraged to set their own goals and future perspectives, both individually and together, and to work at them.
- Our approach is system-oriented, designed to help both partners and, where necessary, the children as well.
- There is respect for diversity: one of the key features of the method is teaching people to cope with differences and to increase tolerance of differences.
- Use is made of the balance model: support is designed on the one hand to reduce risk factors and onerous circumstances and on the other hand to enhance opportunities, possibilities, protective factors and skills; we seek to strike a balance between the burden and the ability to bear it and ensure that this balance is clear and acceptable to both partners.

This is a short-term, proactive outreach method, with which a quick start is made and which can be used for clients from various cultures. It is important that domestic violence is discussed as explicitly and specifically as possible. The counsellor remains impartial throughout, though of course the person who uses violence remains responsible for it. The responsibility of both parents for their children is discussed. A directive and, where necessary, confronting and authoritative approach is adopted towards male clients/ perpetrators. The process is shown in the following chart.

The process of service provision

```
Registration
  ↓
1st interview with client
  ↓
Telephone contact with partner
  ↓
1st interview with partner
  ↓
1st interview with system (involve children/network)
  ↓
Referral interviews with system
  ↓
Closure and follow-up
```

The initial, preliminary results are as follows:
- 30% of the women and their partners were born in the Netherlands, the others were immigrants.
- Three quarters had children.
- The relationship had lasted at least several years, and on average about ten years.
- It was possible to hold interviews with both partners in half of the cases.
- It was possible to end the violence in more than half of the cases.
In addition to these direct results, there were also side effects: the programme contributed to a change in the way we think and act within our own organisation – traditionally the women's shelter organisations have considered it a success when a woman has built up a new existence as a single parent. Now success means ending violence in the relationship. There is more room for the perpetrator and for a dynamic process within the family. There has also been a transfer to others of the knowledge and understanding gained in this project: to women’s shelters in other parts of the country, to the police and prosecution services and to other organisations concerned with tackling domestic violence.

**Conclusion**

This paper has focused on the development of new services and the context in which they have been developed. Our experience has largely been positive. The services we provide and the internal organisation have developed gradually and coherently. Each development built on what went before. Today *Blijf Groep* is on the road to becoming a social enterprise, both energetic and pragmatic. The building blocks for this have been discussed above. As yet the organisation has not engaged in commercial activities.

We have succeeded, within the bounds of legislation and political processes, in directing the process of transformation ourselves. We have become increasingly client-oriented. We still believe in our ideal – to improve the position of women – even though we have abandoned some of the earlier approaches: the self-help principle, monocausality as a way of thinking about abuse, and our horizontal organisational form.

The important characteristics of our organisation are: giving priority to prevention activities and early intervention, direct accessibility, an active approach, belief in the victims’ own strength and empowerment. Our staff make a conscious choice to work in this setting; they are highly motivated and enthusiastic.

**References**

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For two days now we have heard a lot about the Austrian legislation on the protection against violence and the corresponding intervention centres, about their importance and usefulness for women affected by violence. Experts from Austria and abroad have pointed out in what ways the situation has changed and improved as a consequence of protection against violence laws not only in Austria, but also in other countries. Apart from the legal reforms and the expansion of services for the protection of victims, communication and networking in the field of anti-violence activities were also mentioned as quality criteria. We have heard that women’s organisations, especially women’s shelters, played a major role in drawing up and implementing the Austrian laws on protection against violence. To sum up the reactions, the Austrian law on the protection against violence and the Austrian intervention centres were deemed very successful by all participants. Rosa Logar even called the Austrian model ‘one of Austria’s most-demanded export articles’.

However, it has also been indicated that laws including accompanying measures for the protection of victims are not enough. A variety of specific forms of support and services are needed to provide sufficient protection and individual help for every woman who is affected by violence. Also in this respect, Austria is well equipped, although there is still room for improvements and additions. For almost 10 years, a nationwide women’s helpline has been operating free of charge, which is completely financed by the Federal Government, and which started to provide counselling in languages other than German in 2005. Austria has a large, nationwide network of women’s counselling centres, regional hotlines and counselling services for victims of sexual violence, as well as specific centres for children and for men. In 2007 there were 26 autonomous Austrian women’s shelters operating according to international quality standards, which are models for many European institutions of this kind.

30 years of women’s shelters’ activities in Austria

In addition to 10 years of protection against violence laws and intervention centres, 30 years of women’s shelters in Austria are a success story that should also be honoured. Women’s shelter activists have actively contributed to the existence of such laws; in particular, they prepared and laid the foundation for such legislation: they were the ones who removed the taboos regarding the theme of violence against women and children and made it a public issue, which started off the awareness-raising process in the late 1970s. Courageous and committed representatives of the women shelter movement realised very early that in order to support women affected by violence, cooperation with the police is essential. They contacted the police in order prepare joint solution strategies for the prevention of domestic violence. As a consequence, the issue of violence against women and children was integrated into the training of police officers. This would also be necessary in other professional areas, such as the justice system, medicine, health care, the school system, etc. The efforts of the women shelter activists have been successful. The result is the Federal Act on the Protection Against Domestic Violence.
Moreover, the women’s shelter activists have made a significant social and political contribution towards fighting and eliminating violence against women and children in families and relationships, an aim which they still pursue with all their power. In their immediate environments, women’s shelters are active in public relations work and sensitisation as well as awareness raising. Their representatives work with students and teachers in schools, they initiate campaigns and information events and organise networking and cooperation meetings with authorities and institutions that may at some point encounter the problem of domestic violence.

Prevention pays

Domestic violence offences constitute a serious damage to the national economy. If too little is invested in the prevention of violence, in the long run this may be very costly for the state, i.e., the taxpayers. Women’s shelters make an essential contribution to preventing violence; nevertheless, their means are cut back. While women’s shelters have become recognised and well-known services for victims, after three decades some of them still have to fight for their existence. Long-term financial and legal security, which was conceded to the intervention centres and violence prevention centres from the beginning, cannot be taken for granted by women’s shelters. I am thinking of the only women’s shelter in the Tyrol, which badly needs a new house and the binding assurance of sufficient, long-term funding. In Styria, women’s shelters are included in the Act on Centres for the Protection Against Violence, but the financing method that it provides, based merely on a daily rate, makes it next to impossible for their staff to continue working. This precarious situation has negative effects on the quality of service, staff and not least on the inhabitants to be counselled and protected, as well as their children. In the same way as the intervention centres, women’s shelters merit to be able to count on long-term funding models, valid for several years at a time, that are secured by law.

Right to protection and safety as well as professional assistance

As stated in the CEDAW Convention\(^1\), the most important international human rights document for women, every woman affected by violence has the right to comprehensive protection, safety and support. According to a recommendation of the Council of Europe in 1997\(^2\), one place in a women’s shelter per 7 500 inhabitants shall be provided in each member state. This is far from true in Austria, where not even the recommendation by the Committee on the Rights of Women of the European Parliament that was issued already in 1986 has been met, according to which one place in a women’s shelter per 10 000 inhabitants should be provided.\(^3\) Despite the opening of some new and larger houses over the past few years, there are still not enough places for offering the necessary protection to all women and children, especially in emergency situations: in the 26 autonomous women’s shelters, there are 718 places for women and their children. According to the EU recommendation, we need at least 800 places. Especially in the large provinces like Styria, and also in the Tyrol, places are lacking. It should also be considered whether we can offer protection services to women who live in rather isolated regions (e.g., Waldviertel, Mühlviertel or Southern Burgenland), and what kind of services that should be.

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2 Council of Europe
3 European Parliament. The corresponding section of the Resolution - Item 26 – reads as follows: (The European Parliament,) with regard to the availability of refuges, calls on housing authorities to recognize: the necessity of providing adequate refuge provision, at the rate of one family place per 10 000 of population.
The importance of quality standards

In the course of time, women’s shelters were gradually able to improve the quality of their work and especially, to provide better protection and safety for their residents. Simultaneously, women’s shelters have faced new challenges due to developments in society. One example concerns the general principles of confidentiality and anonymity. In order to preserve the rights and the integrity of a woman, it is necessary that she herself decides which details about her are disclosed and which are not. Up to now, women’s shelters used to make a point of passing on information only if the women concerned agreed. Recently, some women’s shelters had to step down from this approach, because the funding authorities attributed more importance on controlling than on protecting the women affected by violence, as has been documented in Styria, by the Act on Centres for the Protection Against Violence. This example shows that it is very difficult to adhere to basic principles and guarantee the protection of women by all means.

A positive development is the system of court assistance which was legally established within the framework of the Code of Criminal Procedure in 2006, according to which every victim of a violent crime has a right to psychosocial and legal assistance during criminal proceedings, free of charge. Women’s shelters used to give their clients free support when accompanying them to court or other authorities, but on the basis of the new legal regulation and financial support they have been able to expand and improve this service.

New strategies in women’s shelters’ activities

The women who work in women’s shelters come together at the meetings of the Umbrella Organisation of Austrian Autonomous Women’s Shelters (AÖF), where they critically reflect on and analyse their activities and develop strategies for working with their teams and for their target group. The prevalence survey on the extent of violence against women published in Germany in 2004, for example, has led to intensified discussions and considerations at the AÖF meetings. Drawn up on behalf of the German Federal Ministry of Family Affairs, Senior Citizens, Women and Youth, this survey included important findings with regard to support for women affected by violence. One example is that women who have experienced violence tend to turn to hospitals, doctors or therapists rather than women’s shelters and services for the protection of victims. Even if this finding cannot be directly applied to Austria, it challenges us to reconsider the work of women’s shelters.

For example, the following questions should be discussed: How can services and support be improved, how can the access to women’s shelters be facilitated, especially for women who have little or no access, such as women with sons over 14, women with disabilities, immigrant women, women with psychological illnesses, women who cannot separate from their pets and/or their farm, as well as women who are affected by human trafficking or forced marriages? In order to give women a chance to develop their own perspectives after staying in a women’s shelter, it is important to know their situation in life and their access to education, the labour market and available housing in the region concerned. Particularly for women with an immigrant background it is often hard to start their own lives.

In the following section I will describe the new strategies and models developed by women’s shelters over the past few years:

- Mothers of male youths over 14 usually cannot bring their sons into a women’s shelter to live with

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5 http://www.prozessbegleitung.co.at
them. Different housing is provided for the young men. As the province of Burgenland has only few services available for young people, the women’s shelter in Burgenland chose a different approach to solve this problem. Already when planning the new women’s shelter, a special housing unit for women with sons over 14 was designed in order to make things easier for women who are mothers of sons that age.

- The majority of women’s shelters, especially those recently built, have barrier-free access or ramps and rooms designed for women with disabilities (e.g., for older women with mobility problems).
- The Women’s Shelter at Amstetten (Lower Austria) focused on the situation of women on farms, who often find it hard to separate from their place of work. In cooperation with other women’s shelters in Lower Austria and the farmers concerned, a special pilot project for farmers was developed. Approximately 1 700 women participated in the information events and workshops that were designed especially for women farmers and supported by the Lower Austrian Chamber of Agriculture.6

- Over recent years, the share of immigrant women living in women’s shelters has risen to slightly more than 50%. Therefore many of the women’s shelters have staff who are able to counsel women affected by violence in their own mother tongue. The women’s shelter at St. Pölten (the capital of Lower Austria) recently opened a special counselling unit for immigrant women, to make up for the fact that St. Pölten has neither a women’s counselling centre nor one for immigrant women.
- Women’s shelters are open to all women, also those who are affected by forced marriage or women trafficking. However, surveys as well as practical experience have shown that this group of girls and women need specific protection services.
- The example of Vienna has shown how access to a women’s shelter can be made easier for women and their children: now, women looking for a place in a women’s shelter can reach all four refuges under a single telephone number instead of having to dial up to four different numbers.
- Between 2003 and 2004, the Association of Women’s Shelters in Vienna, in cooperation with the Umbrella Organisation of Autonomous Austrian Women’s Shelters and the Counselling Centre for Immigrant Women, carried out the pilot project FEMQUA7 in the field of education for immigrant women, as a part of EQUAL: in one of the women’s shelters in Vienna, special basic computer courses with a duration of twelve months were organised to make access to the labour market easier especially for the immigrant residents of the shelters. This pilot project turned out to be highly successful. Almost half of the 27 participants actually found jobs. Four months after the end of the course, 11 women had jobs with an income above the minimum income limit. Regrettably, the project was not continued due to financial reasons.

Women with psychological diseases who turn to a women’s shelter for help represent a great challenge, as in most cases, the required personal and time resources are not available and it is often not possible to cooperate with competent physicians. In the course of the latest AÖF meeting it was mentioned that particularly in rural regions, services that can admit women with psychological diseases are lacking, especially if they bring their children.

Women’s shelters are open to all women, regardless of their geographical or ethnic origin or religion. The diversity and cultural differences among the residents can enrich and benefit all of them. However, the situation may become a burden for the women who work in women’s shelters, if there are not enough means for interpreters. To rely on children as interpreters is particularly problematic. Especially in rural areas, immigrant women are excluded from the labour market. But without a perspective to find a job and affordable housing, there is no possibility to lead a self-determined, violence-free life. In many cases, because of lacking perspectives immigrant women have no other choice but to return to the perpetrator.

6 For more information on the project, see http://www.aoef.at/projekte/index.htm
7 For more information on FEMQUA, see http://www.aoef.at/projekte/infoindex.htm (Archiv - EQUAL-Projekte)
These problems and challenges cannot be met by women’s shelters on their own. Efficient networking and a continuous exchange of experience with other institutions for the protection of victims and the competent authorities is urgent. To increase resources is also essential. The precondition for this is the political will to support women’s shelters’ activities.

References


MULTI-AGENCY COOPERATION FOR THE PREVENTION OF DOMESTIC VIOLENCE AGAINST WOMEN
Intro, basic data

The Czech Republic as an independent state became a member of the United Nations on 19 January 1993 and has continued in its enforcement of obligations arising from conventions obligatory for the Czechoslovak Republic, including the protection of human rights. On 1 May 2004 the Czech Republic became a member of the European Union.

The Czech Republic has 10.2 million inhabitants; 5.2 million of the population are women. More than one million people live in Prague, the capital of the Czech Republic.

Before 1990, the domestic violence issue hadn't been mentioned or discussed in the Czech Republic. The problem of violence against women was recognised at the beginning of nineties by women's non-governmental organisations. In spite of the effort of these organisations, Czech society is still living under the influence of deeply rooted prejudices and attitudes regarding the traditional division of roles between men and women. In many cases, these opinions are reflected in an unequal standing of partners within marriage, when raising children, and during divorce proceedings, including their standing before the State authorities.1

Recently, the issue of domestic violence has been perceived more as a matter of public concern, but still it is far from easy to promote the gender base of the topic. Governmental institutions and also a number of NGOs are dealing with domestic violence as a problem of general violence within the family, not as a problem of violence against women. Generally speaking, in the Czech Republic there is a tendency to promote a criminological approach towards domestic violence rather than a gender-based one.

Prevalence of violence against women and children in the Czech Republic

Because violence against women is a new topic, there had not been any findings about prevalence of this phenomenon in Czech society till 2003. Women's NGOs were assuming similar prevalence as in the neighbouring countries and estimated a number of 10% to 30% of women who had experienced partner violence.

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1 Coomaraswamy
In 2003, the Czech Academy of Science carried out the International Violence against Women Survey. This survey was responded by 2000 women and showed that 59% of them had experience with at least one form of violence during their lives. 38% of those women experienced physical or sexual violence from their (ex-)partners. Among the most frequently named forms of violence were slaps, kicking, biting, slugging, threatening by physical violence, pushing, arm twisting, pulling hair etc. 20–25% of the women indicated experience of these forms of violence. 41% of the women said that they felt their life was in danger during those attacks.²

Results from the cross survey of 1690 respondents older than 15 years elaborated by Stem agency for White circle of safety and Philip Morris in 2006 showed that 13% of respondents were victims of domestic violence. In most cases it was a combination of physical and psychological violence (48%), 18% of respondents reported physical violence and 14% of respondents stated that they were victims of sexual violence within the family. 770 respondents were willing to talk about personal experience with domestic violence, which is 45% of all respondents.³

Statistics of the ROSA organisation have repeatedly shown that in cases of domestic violence against women, children are exposed to the violence in more than 90% of cases and are at great risk to become victims of violence also. Being exposed to the violence leaves a huge trauma on children. Not only the numbers and high prevalence rate but also the dramatic and traumatic effects of violence on women and children has to result in bigger efforts of governmental and non-governmental institutions to join their forces.

Services for women who are victims of domestic violence and their children

We can say that specialised services for abused women are provided mainly by non-governmental organisations. There are several centres for victims of domestic violence, providing psychological, social and legal help, however their background varies, from organisations with a feminist approach to charity organisations or a criminological approach without a gender perspective. In 2005 the Ministry of Labour and Social Affair initiated a study about the quality and accessibility of services for victims of violence. According to the findings, services for abused women are concentrated in several big cities; some parts of the country are entirely lacking specialised services. Also for women from rural areas and disabled women specialised services are inaccessible. In the Czech Republic there are no obligatory specific standards for organisations working with victims of domestic violence.

Shelters for victims of domestic violence

The network of shelters with a secret address is insufficient. In fact, there are only three for the whole country; two of them are located in the Bohemian part and one in the Moravian part of the country. There is another charity network of shelters for women in need, however the addresses are publicly known and they are not specialising in victims of domestic violence only. In the Czech Republic there are no specific standards and methodical guidelines for shelters with a secret address.

The stay in the shelter with secret address is not free of charge for abused women. The payment in the shelter is regulated by Law 108/2006 Sb. The situation of funding for shelters for victims of domestic violence is very unstable. Organisations providing this type of service have to apply for new funding every year and the amount of funds is not secured.

² Pikáková
³ BKB
SOS hotline
In the Czech Republic there is no hotline for victims of violence available free of charge. Almost all NGOs working in the field operate lines offering counselling for victims. Some hotlines are operating 24 hours a day, some only during the working days.

Legal protection of victims of domestic violence

Protection under the Criminal Code
Until 2004, the Czech Republic did not have specific legislation addressing the problem of domestic violence. Acts of physical violence among adult family members were judged under Sections 221–224 of the Criminal Code as bodily harm (causing bodily injury to another person intentionally or by negligence). The victim had to have injuries that required sick leave longer than 7 days to be eligible under this paragraph. During the criminal procedure, victims also had to sign that they agree with the criminal prosecution of the partner who had been abusive. Consequently, many victims decided to stop the prosecution, either because of threats from the partner or because of hope that the partner would change. Legislation until 2004 also did not pay attention to the substance characteristic of domestic violence – repetition and escalation of abuse, lack of proofs etc. The non-governmental organisations providing services for victims repeatedly asked the government to take steps towards better protection of victims of domestic violence. After this constant pressure, a new Section 215 a) of the Criminal Code entered into force in July 2004. This paragraph punishes the abuse of a close person living in the same residence. The punishment is up to 3 years if someone maltreats a person who is in a close relationship with them and who is living on the same premises. In cases where violence is committed over a long-term period or against several persons, the sentence can amount to between 2 and 8 years.

In the Czech legislation, there is no definition of domestic violence. Abuse is understood to be the intentional maltreatment of a close person. This behaviour involves a higher degree of crudeness, it is supposed to be repeated, lasts for a longer period of time, and the victim has to perceive the perpetrator’s behaviour as an injures graves. According to the interpretation of the Section 215 a) of the Criminal Code, abuse is not only beating or physical violence, but also psychological and/or sexual abuse, threatening, forcing a person to do humiliating favours to the perpetrator or other activities which are psychologically or physically exhausting to the victim. If the perpetrator is accused under Section 215 a) of the Criminal Code, the victim doesn’t have to agree with the prosecution, it is done independently of their will.

In spite of the fact that Section 215 a) of the Criminal Code has been in force for more than 3 years, there are still problems with implementation. Police don’t use this legal provision to combat domestic violence as often as they could. Very often police use different parts of the Criminal Code, e.g., Section 197 a) – Violence against a group of inhabitants or an individual, Sections 221–224 – Bodily harm, Section 231 Restraint of personal freedom etc., instead of Section 215 a). The table below shows the numbers of cases prosecuted under Section 215 a) of the Criminal Code since July 2004 in the Czech Republic. For better illustration it is important to mention that the Czech Republic had 10 234 092 inhabitants in 2005.

Cases prosecuted under Section 215a) of the Criminal Code

<table>
<thead>
<tr>
<th>Date Range</th>
<th>Number of cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 July 2004 – 31 December 2004</td>
<td>161</td>
</tr>
<tr>
<td>1 January 2005 – 31 December 2005</td>
<td>546</td>
</tr>
<tr>
<td>1 January 2006 – 31 December 2006</td>
<td>532</td>
</tr>
<tr>
<td>1 January 2007 – 30 September 2007</td>
<td>533</td>
</tr>
</tbody>
</table>
Acts of domestic violence can be prosecuted also under following provisions of the Criminal Code:

- Section 197 a) Violence against a group of inhabitants or an individual (0–1 year, or financial penalty): threatening someone with death, a serious bodily injury or other serious detriment in a manner giving rise to reasonable fear
- Section 219 Murder (10–15 years): intentional killing of another person
- Section 221–224 Bodily harm (2–8 years): causing bodily injury to another person intentionally or by negligence
- Section 241 Rape (2–8 years; when the victim is under 18 years, punishment is 3–10 years, when the victim is under 15 years, punishment is 5–12 years): forcing someone else by violence or by threat of immediate violence to sexual intercourse or a similar form of carnal knowledge, or abuse of someone else's defencelessness to submit to such an act,
- Section 242 Sexual abuse of a person under 15 years (1–8 years): having sexual intercourse (coitus) with a person under the age of fifteen years, or sexual abuse of such a person in another manner
- Section 215 Abuse of a person who was consigned to custody (0–3 years in the case of battering or maltreating a person in their care or upbringing or 2–8 years in the case where the person perpetrates the crime in a very severe manner, against several people or during a long time)
- Section 231 Restraint of personal freedom (up to 2 years): unlawfully (without authorisation) preventing someone else from enjoying personal liberty (freedom)
- Section 217 Endangering moral upbringing of youth (2–5 years): intentionally, or by negligence, exposing a person under eighteen years of age to the danger of depravity by (i) making it possible for such a person to lead an idle or immoral life; or (ii) luring such a person into leading an idle or immoral life; or (iii) enabling such a person to gamble on gaming machines equipped with a technical device which influences the result of the game and offers the possibility of a pecuniary winning
- Section 217 a) Seduction of a person under the age of 18 to sexual intercourse (1–5 years or a financial penalty): offering, promising or providing consideration (remuneration) or other benefit or advantage to a person below the age of eighteen years for sexual intercourse (with such a person), or for (viewing) this person's own sexual satisfaction, denudation (stripping off of clothing) or other comparable behaviour.

Civil court protection
The Section 215 a) of the Criminal Code made it possible to prosecute acts of domestic violence, but didn’t bring better protection from reoccurring violence. In the Czech legislation there had not been an established system of protection and restraining orders, so victims couldn’t apply for this kind of court decision. After long discussion and pressure from the non-governmental organisations, the Act 135/2006 of protection of victims of domestic violence had been adopted in March 2006 and entered into force in January 2007. This new legislation is based on the Austrian model of protection against domestic violence and the proposal had been introduced in cooperation with NGOs working in this field. Here are the main changes:

Changes in police law
Since January 2007 police have the right to evict a perpetrator of domestic violence from the house for a period of 10 days if there is a risk of dangerous attack against life, health, freedom or peril of very severe humiliation. The decision to evict the perpetrator is based on evidence of violence, with stress on previous attacks. Police can issue an order to forbid entry at home and/or to contact the endangered person. The period of 10 days cannot be reduced. Police should inform the victim about the possibility to apply to the civil court to prolong the period of eviction. The eviction can be prolonged up to one year at most. Police must report the eviction to the intervention centre within 24 hours. If there are underage children in the family, police have to inform the Social Welfare Office. Eviction of the perpetrator is not connected to a criminal procedure; it is part of an administrative procedure. Eviction is perceived as a measure of prevention, not as a sanction towards a violent person.
Between 1 January 2007 and 30 September 2007, 665 perpetrators were evicted (660 men and 5 women). 689 persons were endangered by violence (664 women and 25 men). 773 children were witnessing the violent incident and police intervention.

Changes in civil law
Section 76b of the Civil Procedure Code provides the court with the opportunity to order that the perpetrator
a) provisionally leave a flat or house which they share with the proposer of the protection order as well as the proximate surroundings and that they don’t enter the flat or house
b) stop to contact and meet the proposer.

This protection order can be applied if the actions of the person against whom the proposal is submitted are endangering the life, health, freedom or dignity of the proposer in serious way. The protection order can be issued for one month and it can be independent of the police protection order. If the proceedings have already started, the judge can prolong the expulsion, maximally up to one year. If the police protections order precedes the civil court protection order, the civil protection order is valid from the next day after the police protection order has run out. If the victim asks the civil court to prolong the police protection order during the period of 10 days, the police protection order lasts until the court decision, which is limited up to 48 hours after submission of the proposal.

Changes in Law about Social Provisions
Since January 2007, the local governments are responsible for establishing and running Intervention Centres. In the Czech Republic, there are 13 regions with local governments plus the capital Prague. The Intervention Centres are responsible for coordination of multi-agency cooperation in tackling domestic violence and for providing proactive help to victims. Persons who are endangered by domestic violence are entitled to get immediate psychological and social support. Intervention centres should also arrange subsequent social, medical, psychological and legal help. In case minors in a family where domestic violence occurs are witnesses of abuse and police expel the perpetrator, police have to inform the social department about this fact. Intervention Centres, police and social department should closely cooperate. Within 48 hours after expulsion, the Intervention Centre should contact the victim and offer information about supporting organisations, shelters, legal steps etc.

Challenges to implementation of new legislation against domestic violence
Intervention Centres are run by non-governmental or municipal organisations with different backgrounds (some intervention centres are run by bigger NGOs which are in some cases not specialising in the issue of domestic violence, e.g., humanitarian organisations, charities or marital counselling centres). Before January 2007, many of those organisations that are now Intervention Centres did not provide services for victims of domestic violence.

There is no mandatory and systematic training for professionals from key institutions (e.g., police, health care providers, social workers, judges, prosecutors etc.). Trainings are rather occasional, based on the willingness of participants or their bosses.

New legislation does not satisfactorily cover the situation of children exposed to domestic violence, who are used by violent fathers as a tool for manipulating, and being in contact with, their partners (lack of protection of children’s rights, abusing parental rights).
Stalking
In the Czech Republic there is no legislation against stalking. Activities of non-governmental organisations dealing with the problem of violence against women are now pointing to this missing part of protection of victims, as many cases of stalking are connected to domestic violence. The proposal of new anti-stalking legislation is now under preparation.

Multi-agency cooperation in the Czech Republic
Considering the fact that experience with violence has a huge influence on the life of victims in many spheres and due to the dynamics of violent relationships, multi-agency cooperation is essential to better protect endangered persons. In the Czech Republic multi-agency cooperation is a relatively new form of preventing and tackling the widespread problem of domestic violence. It is realised on several levels and has different forms.

Governmental actions
There is no special national plan of action for combating violence against women. There was only part 6 – Repression of Violence against Women – of Governmental Priorities and Procedures for Promoting Gender Equality (Resolution No. 236/1998 of the Government of the Czech Republic). In 2003 and 2004 an interdisciplinary project of the Ministry of Interior aimed to establish a legal frame and methodical guidelines for implementation of interdisciplinary teams (interlinking medical, social and police support) for the detection and prosecution of domestic violence cases. The participants in these round tables represented governmental and also non-governmental institutions and organisations.

There is no separate funding for the issue of domestic violence/violence against women in the state or municipal budget. Spending on support of particular NGOs combating violence against women is a component of the annual overall state and municipal budget that is calculated for the support of all NGOs. This means that there is not an exact amount of money (e.g., a percentage) calculated for the support of NGOs providing services for victims of domestic violence. There is no budget line in the central budget of the National Police Headquarters, Prosecutors’ Office, Court System, National Social, Family and Child Protection Services as well as Health Care System for the issue of violence against women.

According to the Report of the UN Special Rapporteur on violence against women from 2002, victims of domestic violence in the Czech Republic do not receive special assistance and there is a lack of professionally trained staff such as psychologists, social workers, police, doctors and nurses who are capable of responding to cases of domestic violence. Reportedly, neither the police nor the Public Prosecutor’s Office nor the courts have a special department for dealing with cases of domestic violence.

Multi-agency cooperation on government level
The Governmental Committee for Equality between Men and Women recently established the Commission for Prevention of Domestic Violence. The first meeting of this Commission will be held in December 2007. Representatives of all respective Ministries and NGOs working in the field of domestic violence will participate in this Commission. The priority should be the formulation of the National Action Plan against Domestic Violence in the Czech Republic.

Multi-agency cooperation organised by NGOs
Non-governmental organisations dealing with the issue of violence against women and/or specifically domestic violence had not been established until 1990. In 1995 Koordinační kruh proti násili na ženách (Coordination Circle on Violence Against Women), consisting of 5 organisations started to
work. It was the first attempt to link activities of NGOs working in the same area and raise awareness about domestic violence among the public and professionals. Although this cooperation never formally stopped, since the end of 1990s it has not been continued. One of the reasons may be a different background of organisation and different views on domestic violence issues (gender-based and criminological).

In 2003 ROSA organisation became a coordinator of the Media Campaign on Domestic Violence Against Women, which covered the entire Czech Republic. The campaign was financially supported by the Open Society Fund. 10 NGOs from different regions in our country were involved in the campaign. All these organisations had been working together for almost two years and finally decided to continue this cooperation by establishing the Coalition of Organisations Against Domestic Violence (Koordona). Nowadays there are 12 member organisations in Koordona. One of main goals is to establish common quality standards of services provided to the victims.

Many NGOs feel the need of multi-agency cooperation and start to coordinate round tables with professionals and governmental bodies, multi-agency teams etc. Since January 2007, the Intervention Centres have the task to coordinate cooperation of the respective institutions engaged in tackling domestic violence on regional level.

**Multi-agency cooperation on local level (projects of ROSA organisation)**

Basic info about ROSA organisation

The civic society ROSA (established in 1993 as the first organisation to deal with domestic violence against women in the Czech Republic) provides direct services for women and children endangered by domestic violence. These are the services ROSA offers:

- individual psychological, social and legal counselling
- group therapy for victims of domestic violence
- individual and group work with children, witnesses of domestic violence
- SOS hotline
- Internet counselling (for victims as well as for professionals working with victims)
- shelter with secret address.

ROSA is also active in the prevention of domestic violence, as well as in publishing and training. ROSA organisation participated in the DAPHNE Project Bridging Gaps, coordinated by WAVE – Women Against Violence Europe in the years 2005–2006. This project was aimed at forms of multi-agency cooperation, best practice models in different EU countries, and as a result, the manual From Good Intention to Good Cooperation was published. Participation in this project had been very inspiring and motivating for us, so we decided to translate this manual to the Czech language and start multi-agency cooperation at local level of Prague 4 district, where our organisation is based.

The multi-agency team against domestic violence started its work in January 2006 with support of the Open Society Fund Prague. At the beginning the main aim was to initiate cooperation between non-governmental organisations and key institutions in the field of prevention and intervention in domestic violence cases at local level. First the participation in the multi-agency cooperation was based mostly on personal motivation of particular key persons in different institutions. Further development of work in the multi-agency team was supported by the fact that in 2006 the Parliament of the Czech Republic adopted the new Act 135/2006 Sb. for better protection of victims of domestic violence, so we had a better legal framework. Because of this legal change, there were also better conditions for training different groups of professionals. For example, police had to prepare for their new task – the eviction of perpetrator from home.
The participants in the multi-agency team, which meets regularly once in 6 weeks, come from the following institutions and organisations:
- Police of the Czech Republic (Prague 4 district)
- City Police of Prague
- Social Welfare Department (Prague 4 district)
- Social Welfare Department (Prague 12 district)
- Department for Legal Offence (Prague 4 district)
- Director of the primary school (Prague 4 district)
- Hospital (Prague 4 district)
- Lawyer
- Psychiatrist
- Coordinated by ROSA, o.s. (psychologist, social worker).

At the first meetings we introduced our organisation and institution and defined its role in the chain of intervention in domestic violence cases. We worked on rules of meetings, standards and principles for cooperation and common definition of domestic violence. The main goals of multi-agency teamwork were:
- preparing the implementation of the new Act 135/2006 Sb. against domestic violence
- offering effective help to victims of domestic violence at Prague 4 district
- applying guidelines from the Manual From Good Intention to Good Cooperation to practice at the Prague 4 district
- monitoring domestic violence cases in the area of Prague 4.

To set a baseline of knowledge about domestic violence, the dynamics of violent relationships, standards of work with victims, risk assessment and safety planning, we agreed within the team to prepare training for different institutions. During the year 2006 ROSA organisation provided:
- two-day training for 40 police officers (Prague 4 district)
- two-day training for Department for Legal Offence (all officers)
- two-day training for Social Welfare Department (Prague 4 district)
- seminar for teachers from basic school about effects of domestic violence on children.

For the beginning of 2008 we plan to provide training for nurses from Thomayer Hospital at Prague 4 district, especially in the emergency, surgery and gynaecology units.

Examples for the activities of the multi-agency team are:
- creating and publishing leaflets for victims of domestic violence (with special contacts for Prague 4 district). The leaflet should empower victims and inform them about their rights, so it contains also information as to what they can ask and expect from different institutions, e.g. what police should do for them, how social workers can help them, what doctors should examine etc. This information had been provided by institutions participating in the multi-agency team and the leaflets were distributed to victims by professionals from these institutions;
- map of services for women victims of DV in the Prague 4 district;
- coordination of services according to the new law against DV;
- public discussion about domestic violence, primary school (Prague 4 district);
- translation of the Manual From Good Intention to Good Cooperation and its distribution to all relevant Ministries, newly established Intervention Centres, key institutions and NGOs working with domestic violence issues for practical application;
- monitoring of domestic violence cases.

We found cooperation with the local primary school very useful. Our organisation provides accommodation in a shelter with a secret address to endangered women and children. Because of safety,
dren often have to change schools. The director of school keeps some places open for children from our shelter and also cooperates very well in creating individual safety planning for children.

Half of each meeting we dedicate to specific cases we are dealing with. We plan possible activities for better protection or share important information about the case (if the victim agrees). After evaluation of teamwork, the participating institutions have established these interim results:
- higher respect between partners
- raising awareness about the topic at particular institutions
- easier cooperation and exchange of information about clients
- training
- distribution of leaflets through the project partners
- higher respect for the work of the NGOs
- monitoring of DV.

Since 2007 we do not have any financial sources for multi-agency cooperation. Despite this fact, we are continuing our work, because we can see the importance of common activities, case management and closer cooperation between NGOs and governmental institutions. Currently we are planning these activities:
- training for health care providers
- proactive approach and closer case by case cooperation (in case of urgent need social workers and psychologist from ROSA will provide telephone intervention or go directly to meet the victim at the respective institution)
- seminar about multi-agency cooperation for representatives of different Prague districts, local governments, police, health care providers and NGOs.

With the support of Prague City Hall we recently started deeper cooperation with Prague City Police in the project Partnership. In October 2007 we trained 40 city police officers how to identify and treat victims of domestic violence, how to do risk assessment, safety planning etc. The training was very successful and for the future we are planning to organise special DV training for two city police officers in each Prague district. Within the framework of the project Partnership we have also created new web pages, which are divided into 4 sections: for victims, children who are witnesses of domestic violence, for teenagers and for professionals. This web page 4 will be connected to the web page of Prague City Police and in the section for professionals police will be able to download forms for risk assessment and safety planning.

In spite of the fact that we have reached some goals that we set up at the beginning of multi-agency cooperation, there are still many challenges we have to face. The work of our team started from the activity of individuals committed to the idea of elimination of violence against women and children. There is also a legal framework for the protection of victims. But we still miss mandatory standards for different key professions and institutions in cases of domestic violence, as well as written commitment to multi-agency cooperation signed by responsible officials. Therefore, the question of sustainability and further development has to be addressed. Recently, we have to consider what will happen if one or more of the participants has to leave or will be replaced by others, who are less committed to cooperating and how we can reach systematic change and adoption of mandatory standards for treating victims of domestic violence.

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4 www.stopnasili.cz
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http://www.awf.or.jp/h0040.pdf

*Pikálková, Simona*: International research on violence on women – CR; contribution to sociological research of violence in families 2004.  
First I would like to give you some facts about the city of Gladbeck: Gladbeck is situated in North Rhine-Westphalia, the largest of Germany’s states. Together with nine other cities, Gladbeck is part of the administrative district of Recklinghausen and has approximately 80 000 inhabitants.

Aims of cooperation

The aims of networking and committee work regarding violence against women and children were already outlined many years ago and adapted by the local Round Tables:
- protection and safety of women and children
- reorganising structural power relations
- outlawing violence against women
- holding perpetrators responsible.

The Round Table of Gladbeck

The Round Table of Gladbeck was established in 2002 as a subunit of the workshop on crime prevention and inner city safety.

- Preconditions
  - Transregional political will
    The action plans of the federal and state governments were extremely helpful in supporting the argument that Gladbeck also needs a Round Table.
  - Work on behalf of top-level administration units
    The Mayor as well as his competent advisor commissioned the Women’s Counselling Centre Gladbeck to organise this subunit.
  - Support by local political actors
    All the parties represented in the district council supported the establishment of the Round Table and have been continually updated about its development and work.
  - Financially secured help service for victims of violence
    The Women’s Counselling Centre Gladbeck receives substantial support and its services are basically secured from a financial point of view.
Participants
Representatives of the following authorities more or less regularly take part in the Round Table, which is coordinated by the Women’s Counselling Centre Gladbeck:
- police (a police unit commander and the prevention officer)
- courts (court clerk’s office, prosecuting attorneys, lawyer)
- city administration (equality officer, office for family, youth and social affairs, RAA – regional association for immigrant families, public order office etc.)
- health care authorities (president of the local physicians’ association)
- women’s infrastructure service (Women’s Counselling Centre Gladbeck)
- others (education counselling centre of Caritas Gladbeck, social care office).

At individual meetings special guests are invited to speak on specific issues.

Lessons learned
The most important lessons learned from the first five years of work may be summed up as follows:
- there should be as little change of participants as possible
- only one organisation should be in charge of coordination (invitation, minutes, responsibility, initiative)
- the time factor is important (meetings should not be held too frequently)
- mutual respect

Results until June 2007
Between January 2002 and June 2007, numbers of operations and clients were steadily increasing and several changes were introduced:
- approximately 100 police operations per year in the context of domestic violence
- approximately 60 barring orders annually
- approximately 90 women per year contacted in person by the Women’s Counselling Centre (contact following a fax message sent by the police)
- the district court informs the police by fax of barring orders and prohibitions to contact or approach the victims
- the police passes information on to the Women’s Counselling Centre (at the end of each quarter, anonymised)
- since June 2004, police also informed the office for family, youth and social issues by fax about operations if minors lived in the household concerned
- March 2005: guidelines for cooperation between the office for family, youth and social affairs and the Women’s Counselling Centre Gladbeck
- March 2007: financial means from the alliance for family, education and future allocated to an intervention project (fees for leading support groups for children, support groups for women and social training courses for violent men).

As of July 2007
As of July 2007, there was a rapid decline of barring orders and sharing of information, detailed as follows:
- as of July 2007 until the end of October 2007 no information was disclosed on police operations in the context of domestic violence;
number of barring orders between July and the end of October 2007 that we know of because the women concerned contacted us of their own accord: nine;
- women that could be contacted by the Women’s Counselling Centre in person between July and end of October 2007: nine.

What had happened?

In the district of Recklinghausen, the police reform for North Rhine-Westphalia was implemented. All contacts were transferred to other positions or remits. The implementation of the reform was due by 1 July 2007, but was not finished until 1 September 2007. Rather than a police station of its own, Gladbeck now only has a district service. The police station competent for Gladbeck is located in Bottrop, the neighbouring city.

Consequences

Within a short period, the Gladbeck cooperation model turned from good to bad practice model. The consequence of the police reform in the district of Recklinghausen is what we call authority amnesia:
- no more disclosing of information to
  - the Women’s Counselling Centre or
  - the office for family, youth and social issues
- no more flow of information between the district court and the police
- no more participation in the Round Table meetings
- no competence for domestic violence
- great uncertainty about the legal situation among the women concerned
- the intervention project is endangered, as no information is available
- cooperation guidelines are obsolete
- lack of motivation among all other Round Table participants.

All accords and agreements seem to be obliterated, as if the official memory had been erased.

Learning from crises

We are used to learning our lessons from crises. Therefore we are able to view this setback also as an opportunity. It has become very clear that
- the whole network will collapse if one part of it ceases to function
- success depends on personal commitment
- there is no secure, defined basis
- we have to start from zero!

Has the network proven as successful as it promised to be?

Obviously, the answer is no. A network can only be implemented if all the participating institutions do not effect major changes in their organisational structure that could lead to authority amnesia.

However, there is one alternative solution to the dilemma:
All of us have to be ready to start anew.
But this calls for one indispensable prerequisite:
We need to agree on clear and binding regulations that are valid beyond organisational changes.

Conclusion

If cooperation does not work or parts of a network stop to function, this adds to endangering women and children as victims of domestic violence. After five years of good cooperation and public relations work, modes of action had been established. In the counselling process, the role and strategy of the police could be explained to the women concerned. Suddenly, other criteria for barring orders were applied, the margin of discretion seemed to have widened. Among the women concerned as well as among counsellors, legal uncertainty has grown.

This crisis has made it clear that violence prevention can become a farce if not all of the actors cooperate in a constructive way. A good example is the Gladbeck intervention project GiP, which had been prepared for 20 years and was supposed to have started in August 2007. However, as no offenders were referred to the project, the start of the project was postponed.

But we are not willing to give up in Gladbeck! Rather, we are off to a new start, trying to avoid the mistakes that were made in the past, so we can become a good practice model again.
NEW LEGISLATION ON DOMESTIC VIOLENCE AGAINST WOMEN AND EFFECTIVE IMPLEMENTATION
In June 2005 the Act Against Gender-Related Violence entered into force in Spain. Its aim is to combine in a single Act measures to prevent violence and to protect victims, as well as provisions on the criminal prosecution of such offences. Under this Act, victims of violence who officially report the offence to the police are legally entitled to comprehensive support services such as legal consultancy, health care and provision of accommodation. The new provisions for the first time take into account the fact that the risk to experience gender-related violence is particularly high for women in specific social groups.

**The road to the Act**

Spain's society has learned that gender-related violence is not a private problem but a wrong that affects society as a whole, as it prevents the development towards a social system that is characterised by equality and respect.

In 1989 the Criminal Code of Spain was amended in order to define domestic violence as a punishable offence. However, under this amendment only one form of violence was punished: physical violence, and only in cases of repeated use of violence (if physical injuries were sustained at least three times). This provision remained unobserved for many years, and injuries that resulted from domestic violence were regarded as minor offences only. In many cases, the perpetrators were not punished at all. In 1995 a new Criminal Code entered into force. The provisions of 1989 were defined in a stricter way and also psychological violence in domestic environments became a punishable offence.

The following provisions of the amended Criminal Code and the Code of Criminal Procedure are essential cornerstones in the fight against gender-related violence:

- The right to protection for victims.
- Amendments to the Code of Criminal Procedure in order to permit summary proceedings.
- Investigating judges may impose pretrial detention as a preventive measure if the offence in question is subject to a penalty of more than two years of imprisonment.
- Barring orders and prohibition of contact as a punishment for all forms of domestic violence.
- Registration in the rape data base: every case of domestic violence that is known to the police and/or the courts has to be entered in the rape data base. The courts, public prosecutors and the

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1 According to studies of 1999, in 73% out of a total of 5000 court decisions regarding cases of domestic violence, the perpetrators were not punished. Further studies conducted between 2000 and 2002 showed similar results.
police have access to this data base in order to be able to assess danger situations correctly. The Ministry of Labour and Social Affairs established a monitoring group on gender-related violence. The function of monitoring is to control proceedings in cases of violence against women. In addition, the monitoring group has to submit to Government an evaluation of the application of the Act Against Violence in order to ensure that the results obtained will be taken into account in the next amendment to the Act.

The Act Against Gender-related Violence, a large part of which was prepared by women’s organisations and feminists, considers the complex problem of violence from a multi-disciplinary perspective. In this context the theme of violence against women was treated as a political and structural problem for the first time in Spain, and as a great challenge for the state and society.

**Figures on violence against women in Spain**

**Reports to the police (2002–2006)**
The period from 2002 to 2006 saw a significant increase in reports to the police by women suffering violence. In 2006 the number of reports was 71% higher than in 2002.

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of reports</th>
</tr>
</thead>
<tbody>
<tr>
<td>2002</td>
<td>47,165</td>
</tr>
<tr>
<td>2003</td>
<td>56,484</td>
</tr>
<tr>
<td>2004</td>
<td>67,161</td>
</tr>
<tr>
<td>2005</td>
<td>72,098</td>
</tr>
<tr>
<td>2006</td>
<td>80,751</td>
</tr>
</tbody>
</table>

Source: Informe anual del Observatorio de Violencia sobre la Mujer

**Number of women murdered (2002–2006)**
Between 2002 and 2006 a total of 321 women over 14 were murdered by their partners (husbands, live-in partners, boyfriends, former boyfriends, etc.) in Spain, which is an average of 64 murders per year. During the same period, the number of women murdered rose by 33% although the new Act had entered into force in mid-2005.

In 2006, i.e., after the new Act had become effective, the number of women who were murdered was as high as in 2004, before the Act. As many as 34% of the murdered women had also been abused before they were killed, and 69% of the women who died had reported the perpetrator to the police before.

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of women murdered</th>
</tr>
</thead>
<tbody>
<tr>
<td>2002</td>
<td>52</td>
</tr>
<tr>
<td>2003</td>
<td>70</td>
</tr>
<tr>
<td>2004</td>
<td>69</td>
</tr>
<tr>
<td>2005</td>
<td>61</td>
</tr>
<tr>
<td>2006</td>
<td>69</td>
</tr>
</tbody>
</table>

Source: http://www.centroreinasofia.es/paneldecontrol/est/pdf/EST014-3274.pdf
According to studies on murders of women in Spain, women are affected by a number of different forms of violence, and they come from all social classes and countries. However, the risk to experience violence is particularly high for women and girls from immigrant families because they are more vulnerable and live more isolated lives.2

Number of murdered women in 2007
In spite of the new Act under which protection orders may be issued (see below for further details), 69 women were murdered in Spain in 20073, and 24 of them had already left their partners at that point of time. One out of three of these women had reported the perpetrator to the police and/or applied for protection orders.

In other words: the death rate of the year 2007 was higher than in 2006.

Both scientific studies and reports on practical implementation point to the need for protection, support and assistance, in addition to the measures that may be taken under the Protection Against Gender-Related Violence Act.

Spain’s Act Against Gender-Related Violence4
The Act on the Protection Against Gender-Related Violence entered into force on 28 June 2005, half a year after the new Government took office. A number of women’s groups played an important role when the corresponding Bill was prepared because they contributed experience in the field of violence against women gathered over many years or decades.

The objectives of the Act are to raise awareness in society of violence against women and prevention of violence.5 Therefore its provisions include not only legal measures but also measures to be taken in

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2 Spain has 41 million inhabitants, and approx. 10% are nationals of other countries. Different to other European countries, no data on forced marriage, honour killings, FGM or other forms of gender-related violence are available.
3 Figures of 30 November 2007
4 Ley Orgánica 1/2004, 28 Noviembre, de Medidas de Protección Integral contra la Violencia de Género
5 The central objectives of the 2007/8 Plan of Action of the Spanish Government on prevention and awareness-raising of violence against women include: enhancing the efficiency of actions to combat violence against women and improve protection of the women concerned. For instance, the 2007/8 budget for combating violence includes the following items:
- social services: 1 430 333 euros;
- information and further training events for public prosecutors, the police and forensic medicine specialists: 345 820 euros;
- (further) training programmes for police officers: 282 841 euros;
- awareness-raising and prevention planning: approx. 5 000 000 euros;
The regional and local governments are in charge of administering the budget for combating violence and supervising the correct application of the Act.
the fields of social welfare, health care and education in order to realise equal rights for women and men. Violence against women concerns many different professions and areas of activity. Thus, the cooperation of the health care system, schools and childcare organisations, social administration, the police and the courts is of great importance.

Educational institutions
The Act aims to prevent violence from developing. Therefore one focus of the Plan of Action is on measures to this effect that are to be taken already in primary school settings. Two central goals of these measures are the establishment of early warning systems and education that is oriented towards gender equality. Studies in this field have clearly shown that experience of violence during childhood increases the risk of becoming a victim of violence, or of committing violence, in adult life. For this reason, it is important to communicate non-violent conflict-solving strategies.

Advertising
The Anti-violence Act also includes provisions that regulate advertising in order to protect women from sexism.

Health care
All forms of violence have effects on health. Physicians, nurses and providers of care services play an essential role in the early detection of violence; it is an important prerequisite for the protection of and support for victims that the violence is detected at an early stage and that a multi-disciplinary team (doctors, social administration officers, psychologists, family counsellors, etc.) are in charge of managing the corresponding intervention procedures. Under the new Act the health care sector has assumed the function of promoting training programmes in hospitals and of integrating in education and further training schedules for doctors expert knowhow on the theme of violence against women.

Specialisation among public prosecutors and the police
A specialisation within individual professional groups is necessary in order to ensure the quality of activities by the authorities in charge and to promote a sensitive course of action on the part of the corresponding officials. Special units dealing with violence against women were established in both the police force and the public prosecuting authorities. Now each public prosecutor’s office has a special unit that is competent for cases of violence against women and whose staff have received special information and undergone special training in order to handle this complex matter. In larger cities, the staff of these units exclusively work in the field of violence against women. In the police force, special training events and further training programmes in violence against women have been organised for the officers.

Recognition of victims’ rights
The most important change has been that the rights of victims are recognised.
- Every woman who reports a case to the police has the right to turn to social welfare authorities to get support.
- Cost-free legal counselling and legal representation in cases of violent offences: legal representation is granted for all types of court action (both civil and criminal proceedings) in which the woman is involved in her role as a survivor of violence. If the victim has died, her relatives are granted the right to legal consultancy.
- Women suffering violence are granted additional job-related rights: a woman’s absence from work is admissible if she has fallen ill because of violence or if she has to appear before court, go to a clinic or a social welfare authority because of an incident of violence;
- territorial mobility: if a woman experiencing violence cannot stay at her former place of work because she cannot sufficiently be protected there, she may look for a new job in another region without any disadvantages for her under labour law;
- there is protection against termination of employment (with severance payment) and admissibility of longer-term absence from the workplace without losing the job.

- Women experiencing violence have a right to social insurance benefits, welfare payments, housing assistance and financial support as long as they have no financial means of their own.
- Women's shelters provide accommodation and protection to victims of domestic violence. Their addresses are not disclosed in order to protect the women.
- All victims may turn to counselling centres for psychosocial support and consultancy. The women's intervention centres provide immediate services and non-bureaucratic assistance to victims of domestic violence. Here the aim is to communicate information on possible legal steps on the one hand and to offer to plan individual strategies and provide psychosocial counselling on the other.

**Court measures**

- Special courts for domestic violence proceedings
  On 28 June 2005, 17 special courts with exclusive competence for cases of gender-related violence were established. Recently an additional 46 special courts have been opened. By the end of 2007, 10 special courts will operate in Spain's capital of Madrid alone, with approximately three million inhabitants, and further 415 courts have been granted the right to institute proceedings connected to violence against women. These courts are competent not only for criminal proceedings but also for civil proceedings in the context of divorce petitions.

- Affirmative action
  Spain's legislation is based on the assumption that violence against women is the consequence of a history of unequal power relationships between men and women, which has led to the oppression of and discrimination against women by men and which restricts women in their free development. Therefore, different legal responses to this problem are needed for men and for women so as to bring about equality.

  In order to take into account this reasoning, the Act provides for different degrees of penalty for the same punishable act depending on the gender of the perpetrator. If a man commits physical or psychological violence against his wife or partner, the punishment is more severe than in cases in which a woman abuses her husband or partner.

  In 2005, a complaint of unconstitutionality was made against this provision but the matter has not been decided so far.

- Punishable offences
  The Act protects women against:
  - punishable offences against life and physical integrity (murder, mild or severe physical injury and termination of pregnancy)
  - punishable offences against freedom (deprivation of liberty, coercion, persistent harassment, i.e., stalking, trespass)
  - punishable offences against the property of third parties (damage to property).

- Penalties
  All aforementioned offences are punishable by imprisonment, prohibition to possess firearms, barring orders and prohibition of contact orders. If a man slaps his wife, this is punishable by imprisonment between six months and one year.
If the convicted offender is ready to take part in a perpetrator programme in the form of therapy, the sentence may be suspended on probation.

If the offence is punishable by imprisonment for a maximum period of two years, it is upon the individual judge to decide whether to suspend the sentence on probation or not. In this case, the perpetrator has to meet certain obligations, for instance, participation in an anti-violence therapy programme.

The prisons have to take adequate steps to ensure that it is possible for perpetrators to take part in anti-violence programmes.

**Protection orders**

Under the Act Against Violence, protection orders have been introduced as measures of prevention.

**Application for protection orders**

Victims of violence may submit the application form for protection orders at any police station, public prosecutor’s office, court or women’s counselling office of the welfare department.

As soon as an application for protection orders is filed with the corresponding authorities, the form and the corresponding certification are immediately sent to the investigating court competent for the place of application. In all cases the court, within 72 hours after the application has been filed, has to schedule a protection order hearing to which the person accused of violence, the victim of violence and their legal advisor are invited to come.

After the hearing, the investigating judge has to decide immediately whether protection orders will be issued, which may include the following measures:

**Penal measures**

In particular, the court may issue a barring order and prohibition of contact to prevent the perpetrator from:

- entering the victim’s flat. In cases of unlawful acts against life and physical integrity or freedom as well as in cases of threats, the court may refer the victim to another flat. Enforcement of these rights is independent of the marital status of the partners in question. The violent partner may be ordered to leave the flat also if he owns it or is the only formal tenant;
- staying within a certain perimeter around the flat of the victim;
- going to certain places at which the victim is regularly staying;
- contacting the victim, also through means of communication (phone, text message, e-mail, letter) or through third parties;
- arranging a meeting with the victim.

The court may impose pretrial detention as a special measure only in cases of severe physical injury, acute danger or non-compliance with the protection order.
The penal measures taken in the context of protective orders are not limited in time but continue to be effective as long as there is the risk that the punishable offence is repeated, and in any case, until the end of criminal proceedings. The protection order expires either when a sentence has been passed or when proceedings are dismissed.

**Civil law measures**
The special court also decides on family law affairs such as custody, residence, maintenance payments, etc. Applications for divorce also have to be filed with this court.

Measures taken under civil law extend for a period of 30 days. If the woman in question does not file further applications, the civil law measures issued by the court cease to be effective. However, if the duration of protection orders is longer than the period of the civil law measures, the measures under civil law will continue to be valid as long as the protection orders are in force. In this case, the women experiencing violence and their children may stay in the flat until the danger of a repetition of the offence is averted.

**Criminal proceedings**

**Summary proceedings**
If the police catches the perpetrator in the act and detains him immediately afterwards, and if the victim and witnesses may be summoned to appear before court, summary proceedings may be instituted.

In this case, criminal proceedings and the protection order hearing are combined.

If the suspect makes a confession, the investigating judge may pass a sentence immediately. If the suspect does not confess to the offence, a trial before a judge sitting alone will take place within the next 15 days.

**Regular proceedings**
If the perpetrator is not caught in the act by the police, regular proceedings before an investigating judge follow. The protection order hearing takes place and the protection order will remain in force until the end of the trial and until the risk of repeat offences no longer exists.

**Concluding remarks**

In sum, the new Act has definitely improved the situation regarding protection from violence against women. However, its implementation has met the expectations of women to a limited extent only. For instance, it is up to victims to report a case to the police and they have to make efforts to get support and protection. Survivors of domestic violence still have to overcome considerable obstacles in order to be protected, to find assistance and to be granted what is their right.

In spite of the good progress that has been made, great difficulties have arisen regarding the application of the Act:
- One of the Act’s disadvantages is that while legal measures have been implemented to a large degree, prevention measures, in particular in the education sector, have been developed only to a limited extent.
- Many women still are reluctant to report a case to the police. Only five percent of all women who have been confronted with violence actually report the offence.
- Anti-violence therapies have not been advanced to a satisfactory degree and they have insufficiently been implemented.
- Although Spain’s legislation states that violence against women clearly reflects imbalances in pow-
er and a patriarchal society, which prevents the actual equality of men and women, at the same time, massive opposition to the use of the term ‘gender-related violence’ has been registered.

Violence is on the rise. Only by solidarity and by continuing efforts in the fight for equality will we be able to curb violence against women.

I am especially indebted to Ajda Sticker for her help.

References


Introduction

Violence against women is a widespread problem, with appalling physical, sexual, emotional, psychological and economic consequences for girls and women.\(^1\) It affects women of every age, in every society and in every socio-economic group. Violence takes many forms, including female genital mutilation (FGM), early marriage, forced marriage, rape and other forms of sexual violence, domestic violence and child abuse.

The framing of violence against women as a problem arose primarily as a result of campaigning by feminist activists and the voluntary sector. The voluntary sector continues to play a significant role in tackling violence against women and indeed has influenced the violence against women discourse more generally, in the way that activists have engaged with the State. Whilst the State is a relative newcomer to the agenda, it has a vital role to play.

The main function of the State has been to enact legislation and formulate policies to tackle violence against women. Although this seems to be a simple concept, there is a history of tension between the State and the voluntary sector over the inadequacy of the State’s response to the issue.\(^2\)

This paper looks at some of the legislation available in the UK, which impacts on violence against women, and considers the effectiveness of the legal framework.

Defining violence against women

In order to ensure that there is clarity around what the term ‘violence against women’ means in the context of this paper, the following UN definition is used:

‘Violence against women refers to any act of gender based violence that results in, or is likely to result in physical, sexual, or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life. Violence against women shall be understood to encompass, but not be limited to the following:

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

(b) Physical, sexual and psychological violence occurring within the general community, including rape, sexual abuse, sexual harassment and intimidation at work, in educational institutions and elsewhere, trafficking in women and forced prostitution;

(c) Physical, sexual and psychological violence perpetrated or condoned by the State, wherever it occurs.’

\(^1\) Gill/ Rehman

\(^2\) Gill/ Rehman
This definition reflects the breadth of the issues involved in violence against women and also the gendered nature of the abuse. This is important so that policy makers have a full understanding of the issues involved in violence against women, otherwise the laws and policies that are formulated are likely to be ineffective. Gender violence is part of a complex matrix of social practices that collude to devalue women as a group, perpetuate unequal practices and inequality and the domination of and discrimination against women, by men.3

Legislative approach of the State to tackling violence against women

The UK legislative approach to violence against women needs to be seen in the context of the wider, human rights based framework. Due to the reframing of human rights as including the private as well as the public sphere, interaction with the domestic State is not the only means of effecting change.4 Challenges to the State's response to the issue have successfully been brought, using both domestic law and human rights legislation.

The European Convention on Human Rights (ECHR) contains a number of Article rights which are very helpful in relation to protecting victims of violence against women.

- Article 2
  This Article is concerned with the right to life.
- Article 3
  Individuals have a right not to be subjected to torture or to inhuman or degrading treatment.
- Article 8
  The right to privacy and family life.
- Article 14
  This Article confirms that rights are protected without discrimination.

The key Article that a defendant is likely to rely on is Article 6, the right to a fair trial. The European Courts have made it clear that the relevant consideration is the fairness of the overall proceedings and therefore, even though there may be a breach in one aspect of the trial, it does not necessarily amount to a breach of a defendant's Article 6 rights.

The ECHR which was incorporated into domestic law by the Human Rights Act 1998 places an obligation on State authorities to act in a way that protects the individual's rights and therefore it is right that violence against women should always be seen in the wider context of a human rights framework.

Domestic legislation

Legislation has been the main mechanism by which the State has chosen to tackle violence against women. There are examples of legislation from the eighteenth century, through to the present day, which illustrate that the Government has sought to protect women and children experiencing violence. In 1853, the Act ‘for the Better Prevention and Punishment of Aggravated Assaults upon Women and Children’ argued that women should be awarded the same protection as poodle dogs and donkeys!


The current Government included domestic violence in their 1997 election manifesto and have backed a number of initiatives designed to tackle domestic violence and sexual violence, for example the spe-

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3 Van der Hoogte/ Kingma; Gill/ Rehman  
4 Howe
cialist domestic violence courts system and the National Action Plans on domestic violence and sexual violence. The development of specialist domestic violence courts, as part of the Co-ordinated Community Response to tackling domestic violence is a particular priority for the Government. These courts are focused on holding perpetrators to account and increasing the support, safety and satisfaction of victims. There are currently 98 such courts in England and Wales, with plans to expand the number to 128 in 2009–2010.

The legal system in England and Wales consists of both civil and criminal jurisdictions. Both systems are independent of each other, and it is possible for parallel proceedings to operate in both jurisdictions. For example a perpetrator of domestic violence may be prosecuted in the criminal courts, whilst also being made the subject of family proceedings in the civil court.

Criminal legislation

There is no specific offence of domestic violence or violence against women in the UK. In the case of domestic violence, there is a Government definition, which enables case of domestic violence to be identified and managed appropriately. The definition is as follows:

‘Any incident of threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between adults who are or have been intimate partners or family members, regardless of gender or sexuality.’

Therefore there are many criminal offences which could fall within the definition. Some examples of criminal legislation which may be relevant to violence against women offences are as follows:

- Offences Against The Person Act 1861 (used to prosecute assaults);
- Criminal Damage Act 1971 (used to prosecute damage done to property, including by fire);
- Protection from Harassment Act 1997 (used to prosecute ‘stalking’);
- Sexual Offences Act 2003 (used to prosecute rape and sexual offences as well as human trafficking offences);
- Criminal Justice Act 2003;
- Female Genital Mutilation Act 2003;

The most recent legislation that focuses on domestic and sexual violence are the Domestic Violence, Crime and Victims Act 2004, the Female Genital Mutilation Act 2003 and the Sexual Offences Act 2003. Although legislation is a useful tool to tackle violence against women, it is also limited in how it can respond to women’s experiences of violence.

Domestic Violence, Crime and Victims Act 2004

The Government description of this Act was ‘the most radical overhaul of domestic violence legislation in thirty years.’ However, feminist activists and the voluntary sector have some concerns regarding this legislation.

- The Act is gender neutral in its wording and could potentially criminalise women who are unable to protect their children or vulnerable adult, because they are experiencing domestic violence themselves;

5 The Crown Prosecution Service can only deal with incidents that are classified as crimes.
6 An adult is defined as any person aged 18 years or over. Family members are defined as mother, father, son, daughter, brother, sister and grandparents, whether directly related, in laws or step-family.
7 Lawson et al.
Breach of a non-molestation order has now become a criminal offence. Non-molestation orders are civil orders of protection, which are designed to offer women protection from violent partners. They can be obtained very quickly from local County Courts, either *ex parte* or *inter partes*. Many women opt for the civil route because their first priority is safety and they do not want to criminalise their partner. Under the new provisions, although women have a choice about whether to pursue any breach as either a criminal or civil option, it may build a delay into the system and in some instances, women will not be able to exercise that choice, because the police have been called and the matter proceeds as a criminal prosecution.

**Female Genital Mutilation Act 2003**
This Act repealed the earlier 1985 Act of the same name. It increased the penalty for committing the offence of female genital mutilation and made it possible to prosecute an offence committed outside the UK, as long as the victim is a British citizen. The limitation of this Act is evidenced by the absence of any prosecutions to date. There are a number of possible reasons for this, including the fact that victims will not wish to criminalise their parents and therefore will not report the matter to the police.

**Sexual Offences Act 2003**
The purpose of this Act was to strengthen and modernise the law of sexual offences, improve preventative measures and protect individuals from sexual offenders. Some very important provisions contained in the Act are:

- widening the definition of rape, to include oral penetration
- a statutory definition of 'consent'
- specific offences relating to children under 13, 16 and 18
- the creation of new offences to protect individuals with a mental disability.

The Government is determined to improve outcomes for rape victims in court. The Government published its response to the Office for Criminal Reform consultation paper, Convicting Rapists and Protecting Victims – Justice for Victims of Rape. This publication details a range of measures which will be introduced in order to increase successful outcomes in rape cases. This will be achieved by strengthening the existing legislative framework and improving care for victims and witnesses. Some of the key measures are:

- changing the law to make video recordings of rape victims automatically admissible as evidence in chief in trials;
- introducing legislation to make all complaints of rape made by the victim to friends, family and others, automatically admissible as evidence at trial, irrespective of the time which may have elapsed;
- continuing to explore avenues to enable information about the psychological responses of rape victims to be presented to juries, in order to challenge myths and stereotypes about victim behaviour.

**Support for victims**
Apart from holding the perpetrator accountable for their actions, it is also crucial to support victims to give evidence in court. In specialist domestic violence courts, victims are supported by independent domestic violence advisors, who help them to navigate through the criminal and civil jurisdictions, offer emotional support, act as a liaison between the victim and the various statutory agencies and who can also attend court with them. An important legislative measure was introduced in 1999, The Youth Justice & Criminal Evidence Act 1999. This Act introduced the concept of special measures which can be applied for on behalf of witnesses who are vulnerable by reason of their age, or a physical or mental disability. There is also protection available for witnesses who are deemed to be 'intimidated'. In the case of intimidated witnesses, the court needs to consider a number of factors, including the nature of the offence, the socio-cultural and ethnic origins of the witness and the behaviour of the ac-
cused or any of his friends, family or associates towards the witness. Once the court is satisfied that the quality of the witnesses’ evidence will be improved by the granting a special measure, then they will grant the application. Some examples of special measures include being screened off from the defendant, giving evidence by live television link, allowing witnesses to give their evidence through a prerecorded interview and also excluding people from the court room, to provide a more private setting. The court can also make an order that precludes the victim/witness being identified by the media.

**Civil legislation**

Where the focus of the criminal law is to deal with offending behaviour, the focus of civil legislation is primarily to protect and increase the safety of the victim and any children.

**Family Law Act 1996**

The main piece of legislation that facilitates this approach is Part IV of the Family Law Act 1996. This legislation provides a civil remedy of an injunction for the protection of victims experiencing domestic violence. The Act also allows victims to apply for an occupation order, which regulates the occupation of the home shared by a couple and their children. The court can make these orders on application or of its own volition, if it considers it should be made for the benefit of a party or any children. In order to make the order the court has to apply the ‘balance of harm’ test. The court needs to ascertain which person and/or children living with the couple will be most at risk if an order is/is not made.

**Adoption and Children Act 2002, Children and Adoption Act 2006**

It is important that children who experience violence or who witness violence are also protected. The Adoption and Children Act 2002 amended the definition of ‘harm’ to include the harm suffered by children who witness domestic violence. In addition, the Children and Adoption Act 2006, once implemented, will require risk assessments to be carried out in cases where the court considers that a child is at risk of harm.

**Protection from Harassment Act 1997**

This Act has both criminal and civil remedies for domestic violence. The main benefit of the civil provisions has been to aid those individuals who are unable to get an injunction under the Family Law Act 1996. The remedies include injunctions and claims for damages.

**Civil Partnership Act 2004**

This Act came into force on 5 December 2005 and created a new form of legal relationship, which may be formed by two persons who are
- the same sex
- not already in an existing civil partnership or lawfully married;
- not within the prohibited degrees of relationship
- both aged sixteen years or over.

The relevance of this Act to violence against women is that it amends the Family Law Act 1996, so that civil partners can also benefit from the protection offered by the Family Law Act 1996, by way of non-molestation orders and occupation orders.

**Forced Marriage (Civil Protection) Act 2007**

This Act will provide injunctive relief and damages for victims of forced marriage. It also enables the court to act preemptively by issuing a Forced Marriage Protection Order in favour of those facing forced marriage. The Act will be implemented in autumn 2008.
Immigration Rules – DV concession 1999

A person from abroad is granted two years leave to enter or remain in the UK by virtue of the fact that they are either married to or are the unmarried partner of a UK citizen. This is commonly known as the ‘probationary period’ and if the relationship breaks down within that period, the person is required to leave the UK unless they qualify to remain on any other basis.

In response to extensive campaigning by the voluntary sector, the Home Office incorporated the ‘Domestic Violence Rule’ into the Immigration Rules. As a result of this change, anyone who experiences domestic violence, during the probationary period may apply for indefinite leave to remain in the UK. The applicant will have to show that the relationship has broken down permanently as a result of the violence and will also have to produce evidence of the violence. The concession also deals with situations where the domestic violence is being perpetrated by another member of the family, the partner is unwilling to offer protection and the applicant has left their partner for this reason. The Government is aware of the acute problems faced by women with insecure immigration status, who suffer violence and is currently finalising a new scheme which will offer help to these particularly vulnerable victims.

Conclusion

Legislation is commonly used to send a message that certain types of behaviour are disapproved of and will be sanctioned by the State. It can also act as a deterrent and offer protection to women experiencing violence. However, legislation on its own is not sufficient to tackle violence against women. It needs to be enacted and implemented appropriately, by police officers, lawyers and judges. Many women still report an unhelpful and judgemental approach from prosecutors and police. Although the definition of violence against women includes psychological abuse, many women still find it difficult to report and when they do, it is often very difficult to prosecute successfully.

In order to successfully hold abusers to account, prioritise the safety of women and children and prevent violence against women, a holistic approach has to be adopted. Legislation has to be underpinned by mechanisms to ensure that victims are fully supported. Legislative reforms also need to be coupled with general education programmes, training for police, prosecutors and judges, awareness raising campaigns and education programmes for children and young people.

References


In Austria, court assistance services have not been available until the year 2000, when the Austrian Federal Ministry of Justice started to fund victims’ protection organisations so that court assistance could be provided. Before, many organisations accompanied to court and provided assistance to individual clients who needed help or who were traumatised. However, these services were not standardised throughout Austria but depended on the capacities of the victims’ protection organisations, i.e., their financial resources and staff situation.

Since 1 January 2006 persons who have become victims of deliberate acts of violence or dangerous threats or whose sexual integrity has been violated have a statutory right to court assistance services. This assistance is available also to close relatives of persons who died because of a criminal act as well as other relatives who witnessed the deed.

The network of court assistance services has grown rapidly: in 2000, the Federal Ministry of Justice funded four providers of court assistance services, and a total of 52 victims received assistance in Austria. In 2006, funding agreements existed for as many as 44 organisations, and more than 2 200 victims were assisted in the context of criminal proceedings.

Court assistance services are provided by established specialised victims’ protection organisations (such as child protection centres, counselling centres or intervention centres/violence prevention centres) and funded by the Federal Ministry of Justice. They focus on psychosocial support for victims, accompany them to the police and to court for questioning and prepare them for the trial. In the context of legal court assistance, lawyers provide legal counselling and represent victims before court. As court assistance services are offered by established organisations, it is possible to draw on the experience and expertise of staff and use the structures of these organisations (e.g., team meetings or supervision as measures of quality assurance).

Three different groups of victims

Court assistance is provided to three different groups of victims:

- children and young people who have become victims of sexual and physical violence;
- women who have experienced violence by men;
- victims of situational violence or violence in the public sphere.

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1 This text is based on an evaluation study on court assistance in Austria, which I drew up in cooperation with my colleague Veronika Hofinger (Institute of Criminal Sociology) on behalf of the Austrian Federal Ministry of Justice. The study was completed in May 2007.

The main part of the study is based on a total of 79 comprehensive qualitative interviews conducted between April 2006 and March 2007 among all stakeholders in the field of court assistance: psychosocial and legal court assistants, heads of victims’ protection organisations, representatives of the police, the courts and legal administration as well as youth offices and children’s and youth ombuds offices. In addition, 13 victims of violence who had used the court assistance services were interviewed.

For the project report please consult http://www.ikf.ac.at/pdf/IKF-prozessbegleitung.pdf
Depending on the group of victims, different guidelines or standards of court assistance apply. The first set of guidelines was drawn up for children, then modified regulations for women were adopted, and finally the preparation of standards for the third group (victims of situational violence and violence in the public sphere) was started.

The standards for the three groups of victims are not identical. They take into account different needs. For instance, children as a rule receive dual court assistance, i.e., a combination of psychosocial and legal assistance, while the clients of women's organisations are free to decide against legal assistance. The standards for victims of situational violence define court assistance as psychosocial and/or legal services. In addition, when children are concerned, it is a standard procedure that two persons provide court assistance to both the child and their (psychological) parent. In the case of women, however, significant others are involved only if needed.

**The standing of court assistance**

In particular psychosocial court assistance is highly esteemed among the professions involved in court assistance, i.e., the police and court authorities as well as youth offices. In the interviews, the representatives of these groups generally stated that this type of psychosocial support gave victims of violence emotional strength and was an effective means of assistance. The significance of legal court assistance was regarded to be rather small by the court authorities, however: in their opinion, the rights of victims were protected by judges and prosecutors anyway.

This positive view of the psychosocial support that the above voiced was confirmed by people who had needed court assistance. The court assistants gave clients a feeling of security in spite of their stress and fear so that they felt capable of giving evidence in the context of criminal proceedings. For these victims who were called as witnesses during the trial it was especially helpful that they had been prepared for the unusual, difficult situation before the court and another positive point mentioned was support with regard to overcoming bureaucratic obstacles. It was primarily the providers of psychosocial court assistance who were regarded as the most significant persons, while legal court assistance seems to become more relevant only at a later stage, when legal matters begin to play a more important role.

The interviews have shown that it is not enough merely to inform victims that there is a system of court assistance services (e.g., at the time when reports to the police are filed) as this is no sufficient motivation for them to actually make use of this assistance right away. Typically, victims turn to providers of assistance only after they have regained psychological stability – or if their fears have become unbearable.

It strongly depends on the judge whether a victim feels taken seriously and respected or not. There are certain questions that judges or opposing counsel could ask (e.g., why a woman has not defended herself against the violence) which make a woman who has suffered violence feel that she is not regarded as a victim but an offender. According to the women affected, such questions increase the pressure and the stress of the situation, which in turn massively raises the risk of further trauma. If such questions are avoided and if the judge gives the impression of taking them seriously as a witness, the women concerned said that they experienced the interrogation as considerate. Another point that the women regarded as important in this context was whether the judge intervened immediately and thus protected the witness when the defendant or defending counsel attacked her personally.

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2 http://www.prozessbegleitung.co.at
There were several respondents who had court experience both with and – in trials in the past – without court assistance services. Their statements clearly reflect what difference this makes with regard to empowerment or intimidation.

**Need for improvement**

The system of court assistance services has effectively been implemented in Austria within a short time. Still, need for improvement has shown in a few fields.

Court assistance should be accessible to all potential clients in the same way. However, the corresponding organisations are primarily found in Vienna and in the provincial capitals, which points to a need for expansion especially to rural areas, for instance by means of mobile court assistance services or provision of financial means for branch offices of the organisations that are currently funded.

Apart from this imbalance between urban and rural areas, the individual groups of victims are not targeted equally well. The group of victims of sexual offences is reached best. This applies to both children and young people as well as adults. In cases of domestic violence, court assistance services are rendered quite frequently as well – which is probably due to the fact that the intervention centres/violence prevention centres that provide these services are informed by the police when eviction or barring orders are issued, and thus may contact victims directly. In the other groups of offences in which victims would be entitled to court assistance, use of this service is the exception rather than the rule.

In addition, access to court assistance has to be facilitated for more groups of persons: for instance, immigrants have to be addressed and informed in their mother tongues, and it has to be ensured (at least for initial contacts) that there are assistants who speak the corresponding language. Another deficit is the lack of specific assistance services (for immigrants, but also for people with special needs or people suffering from psychiatric diseases).

Often police officers are the first to inform victims about the option of court assistance, typically when a report is filed. However, according to the experience of court assistants there are great differences with regard to when and in which form (i.e., in an understandable way and with emphasis), or if at all, this information is provided. Apart from the problem that clients are not referred to victims’ organisations in due time, another point of criticism is that the police do not make it sufficiently clear what the purpose of court assistance is and what an important role it plays.

Questioning by the police takes place without assistance in many cases, and a number of police officers who were interviewed regard this as sensible. The reason they give is that the victim’s statement is more authentic in this way, and that it is in the interest of speedy investigations when as little time as possible elapses between the offence and questioning. Thus, when weighing the goal of effective prosecution against the aspect of taking into account the needs of victims, obviously effective prosecution is occasionally given preference.

Such attitudes are found not only among police officers. Also judges and prosecutors at times regard prosecution as more important than a gentle approach towards the victim. In spite of the very favourable evaluation results that have been obtained, it is still necessary that both the police and the courts continue to endeavour to improve the protection of victims and to raise awareness of the specific situation in which victims of violence find themselves.

Eventually, good cooperation between court assistants and the other institutional actors is an essential prerequisite for rendering effective process assistance services. Beyond collaboration in individu-
al cases, it is important to have sustainable links in this field. Although there are numerous networking initiatives at both federal and provincial levels (cooperation forums, round table meetings), according to victims’ protection organisations it is often difficult to establish a cooperation in particular with court actors. In view of the need for a consolidation of victims’ rights and better understanding of the work requirements and demands of the other actors, continuing cooperation structures are necessary also with regard to quality assurance.
As I am working in the field of substantive criminal law I will focus on Austria’s anti-stalking legislation, i.e., the offence of insistent persecution according to Section 107a of Austria’s Criminal Code, to illustrate how anti-violence legislation is applied. This provision entered into force on 1 July 2006, as part of the Act Amending Criminal Law of 2006¹, i.e., it has been effective for more than one year already. In the department of Austria’s Federal Ministry of Justice which I head, the working group had been convoked that contributed relevant considerations with regard to the wording of this Act as well as the essential input for the definition of this offence.

The initiative to adopt penal provisions in this field in Austria goes back to activities by the Emergency Hotline for Women of the City of Vienna. The Ministry of Justice endorsed this initiative and prepared a bill on behalf of the Austrian Federal Government. I will not go into the details of this offence: from the point of view of an expert in criminal law, a provision that has been in force for one year already is not new at all, and in fact, more recent topics are on the political agenda. On the other hand, one may safely assume that the audience I am addressing is familiar with the constituting elements of this provision anyway.

What deserves mention, however, is that an evaluation of this provision, as well as provisions relating to civil law and security police legislation², will take place soon. When the Act was adopted, the Federal Ministries of Justice and of the Interior, upon request by the Austrian Parliament, made arrangements for a review of the practical implementation of the new regulations.³ It is to be hoped that this review will show whether it is actually true what has also been expressed in the context of this event, namely that there is a shortcoming with regard to responses to violence, i.e., that the criminal courts do not show the commitment that would be needed.

Allow me to make a few comments on this aspect. At first, I would like to respond to Ms Smutny’s statement that for a penal provision, or any legal provision, to work, it should not make a difference whether the appliers of the statute show special commitment with regard to the matter in question or not. On the contrary: an instrument that has been provided by legislature should work also if it is nothing but applied correctly, that is, within the margin of discretion defined by law.

A supposed lack of commitment often is attributed to a lack of awareness. Still, in my opinion, the only relevant point here is whether the legal provision is applied correctly or not. I will give you an ex-

¹ Federal Collection of Statutes BGBl. I No. 56/2006
² In particular Section 382g of the Act on Enforcement Procedures and Section 25 of the Security Police Act
³ Report by the Justice Committee of the National Council of the Austrian Parliament on the Act Amending Criminal Law of 2006, 1383 BigNR XXII. GP. 3; the results will be available early in 2009.
ample: if we lived in Sweden instead of Austria, we would celebrate the 10-year anniversary of anti-vi-

ence legislation next year. In Sweden, the legislation aimed at protection against violence entered

into force in 1998/94 and covers two aspects:

One of them – which leads me to the new penal provisions that we will have as well – is the offence of

violent relationships over a longer period.

In Sweden, the corresponding offence is called gross violation of a person’s integrity or gross violation

of a woman’s integrity ⁵, according to the English translation by Sweden’s Ministry of Justice. Before

long, a similar legal provision will be adopted also in Austria.⁶

What will not enter into force in Austria in the near future is the second aspect of Sweden’s anti-vio-

lence legislation: the prohibition to purchase sexual services⁷, i.e., punishment of customers of pros-

stitutes. Sweden’s Parliament did not define this as a criminal offence because prostitution is regarded

as an immoral act but because the predominant attitude was, and still is, that prostitution is violence

against women.⁸

I am not sure how many of you share this standpoint of Sweden’s legislature, which also is my view. In

any case, on the basis of the applicable Austrian law it would not make sense to raise the awareness

among appliers of law in this regard, i.e., to regard it as violence in itself when the services of a prosti-

tute are used. The simple reason for this is that prostitution is not punishable in Austria – with the ex-

ception of those cases where the woman is younger than 18⁹.

With regard to the offence of stalking, this means that only insistent persecution has been defined as

a criminal offence, in addition to the already existing penal provisions on psychological violence and

violation of a person’s psychological integrity such as coercion and dangerous threat (while for oth-

er forms of impairment of psychological well-being, e.g., harassment, other legal instruments such as

claims for damages or injunctions may be available). Therefore, on principle, the point is that certain

form of conduct are understood as constituting elements of this offence, either rightfully or wrong-

fully. The private view of the person that applies the law cannot be a determining factor here. Even

if this person has a high degree of tolerance regarding psychological violence, they must not play

down insistent persecution, while on the other hand, a person with a high degree of awareness in this

field has the right to make the political demand that in future also facts that at present are below the

threshold of insistent persecution be included, but as far as applicable law is concerned, this thresh-

hold has to be observed.

It has been stated today that one could also see it within the margin of discretion whether someone in

charge was pursuing the matter with much commitment or not. I would like to qualify this from a legal

point of view.

A former expert in my department who had taken part in the preparation of the anti-stalking legislation

when she was still working in the Ministry became a judge at the Provincial Criminal Court of Vienna

after she left the Ministry. As a criminal law judge, in cooperation with a civil law judge, she wrote an

article on the new anti-stalking legislation for a professional law journal.¹⁰ You all know that the penal

provision of Section 107a of the Criminal Code has been criticised for including a few legal terms that

⁴ Act on Violence Against Women (Kvinnofrid)
⁵ Chapter 4 Section 4 Paras. 1 and 2 of Sweden’s Criminal Code
⁶ Proposal to include as Section V(9) of the Government Bill for a Second Act on Protection Against Violence Act (678 BlgNR XXIII. GP) the o-

ffence of continued exercise of violence (Section 107b of the Criminal Code)
⁷ Law that prohibits the purchase of sexual services, 1998:408; regarding Austria see the report by the experts of the Working Group on Pros-

titution of the Human Trafficking Task Force: http://www.bmeia.gv.at/fileadmin/user_upload/bmeia/Arbeitsbericht_Prostitution_in_OEsterre-

ich__-_Rechtslage__Auswirkungen__Empfehlungen__-_Juni_2008.pdf (document in German)
⁸ Ekberg 2004
⁹ Sexual abuse of young people according to Section 207b(3) of the Criminal Code
¹⁰ Wolfrum/ Dimmel

Christian Manquet, From ‘Insistent Persecution’ to ‘Continued Exercise of Violence’
are not clearly defined and have yet to be interpreted. This is not the place to comment on the question whether such criticism is justified on principle. In short: the legal policy goal here was to penalise stalking. Therefore, the provision in question could simply have been, whoever is stalking, or insistently persecuting, another person, shall be punished. In this case we would have only one legal term, which is vague to a high extent, however. The approach towards regulation that has been chosen is the attempt to achieve a higher degree of definition – by, different to Germany\textsuperscript{11}, deliberately\textsuperscript{12} giving a full enumeration of all forms that this offence may take, while at the same time avoiding any further specification so that legislative casuistry will not impede a sensible application of law.

From this perspective, one may reasonably ask, for instance, in which way the first constituting fact of the offence, i.e., (insistently) staying geographically close to a person, could be understood. In her article, my colleague mentioned above wrote that in her opinion one should not pursue too narrow an approach here and that in order to commit a stalking offence it would be sufficient if the stalker (insistently) stayed approximately 30 metres away from the victim’s home and if the victim knew this, even if she did not actually see the perpetrator. In other words, even if the offender does not confront his victim directly, it already constitutes a stalking offence if she knows that he is there. An expert in criminal law who also took part in the evaluation, in an article that was published later was sceptical about this interpretation and stated that this rather was near the limit of admissibility.\textsuperscript{13}

I would not dare say that this expert in criminal law, who presented her position from a legal point of view, shows less commitment than the judge in the criminal court, who would interpret this aspect of the law in a narrower sense.

In my opinion, when examining the effectiveness of the application of this Act, first and foremost, at least this is how I understand the task of this evaluation, it should be considered whether the application of the Act covers the area that Parliament has had in mind, which it consequently expressed in the corresponding legal provisions. In areas where a rather wide statutory margin of discretion and interpretation has been granted, one might ask whether the application of the Act, generally speaking, covers the core aspects of Parliament’s intentions or whether the interpretations chosen rather touch border areas of the admissible range of implementation. If necessary, Parliament could then reassess the matter.

What we know at present is that the Act has met with acceptance by both practitioners and the persons concerned. In the first year after its entry into force, approximately 200 convictions based on this Act were registered in Austria. The evaluation will show in which cases the statutory regulation has not been accepted. Then we will see whether there is need for reconsidering or amending the corresponding provisions.

Already on 1 January 2008 new regulations regarding sanctions for insistent persecution were adopted, which had turned out to be necessary independent of the ongoing evaluation: in the context of measures accompanying the reform of criminal proceedings\textsuperscript{14}, which, for instance, no longer include offences requiring application, those facts that relate to stalking via means of communication, i.e., e-mails, letters, phone calls, etc.\textsuperscript{15} and which originally, due to requests on the part of the police, had been defined as offences requiring application for prosecution\textsuperscript{16}, have become offences entirely liable to public prosecution.\textsuperscript{17} As a consequence, also here, as in the case of the other constituting facts of

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\textsuperscript{11} Section 238 Para 1 Fig. 5 of the Criminal Code
\textsuperscript{12} Notes to Government Bill 1316 BgNR XXII. GP, 2
\textsuperscript{13} Mitgutsch
\textsuperscript{14} Federal Collection of Statutes BGBl. I No. 19/2004
\textsuperscript{15} Section 107a Para. 2 Fig. 2 of the Criminal Code
\textsuperscript{16} Section 107a Para. 3 of the Criminal Code in force until 31 Dec. 2007
\textsuperscript{17} Section II Fig. 4 of the Federal Act Amending the Code of Criminal Procedure of 1975, the Criminal Code, the Juvenile Court Act of 1988 and the Fiscal Criminal Code; Federal Collection of Statutes BGBl. I No. 93/2007
the offence, no initiative on the part of the victim is required any longer, but the investigating and pros-ecuting authorities are obliged ex officio to take action. This means that Parliament deliberately chose not to define the offence as a deed to be prosecuted upon authorisation, which would still have been possible under the reform of criminal proceedings and which would have been a compromise, so to speak, between offences entirely liable to public prosecution and offences requiring application for prosecution.¹⁸

Finally, I would also like to speak about an aspect that was mentioned yesterday. Ms Logar referred to a point which in my opinion is of great relevance. She said that it is necessary to make investments and also gave the example of her own agency (the Domestic Abuse Intervention Centre Vienna) to illustrate that it is essential to have sufficient resources and that this must be taken into account in the corresponding budgets.

This obviously also applies to criminal justice and its available means, which again takes me to the proposal to introduce an additional offence relating to violence. The experience of Sweden has shown that approximately 400 convictions annually result from the offence of violent relationships over a longer period, with prison sentences between 10 and 12 months without probation. If such an offence were introduced in Austria – and as the number of inhabitants is similar a direct comparison is legitimate – the cost of imprisonment alone would amount to more than one million euros per year. Of course, pecuniary considerations should not play a predominant role when legitimate legal policy goals are to be implemented, but still, the effects that this has on budgets – for both the prosecution of offenders and protection of victims – must be taken into account. Eventually, adopting a law without providing the necessary funds for its effective implementation would be in vain in any case.¹⁹

References


¹⁹ The Government Bill introducing a Second Act on Protection Against Violence includes the following estimates of costs involved:
- for the expansion of services such as cost-free court assistance for victims during criminal proceedings and the introduction of court assist-ance also for civil proceedings: up to 7.9 million euros annually;
- for the introduction of separate questioning in civil proceedings: up to 600 000 euros annually;
- for court supervision of perpetrators in the case of sexual offences and sexually motivated violent offences: approximately 2 million euros annually;
- for cost of imprisonment related to the offence of continued exercise of violence: a maximum of 1.3 million euros, and taking into considera-tion the fact that a number of perpetrators would have been convicted also under another provision and the possibility of release on proba-tion: a six-digit amount annually;
- for the option to be granted also lump-sum damages for pain and suffering under the Victims of Violence Act, in the case of severe physical injury: 4.1 million euros annually;
- for changes in maintaining criminal records, with regard to the establishment of a ‘sexual offenders registry’: approximately 1.6 million euros. It has not been possible for Parliament during the current session to take a decision on this Government Bill but the Bill passed the Council of Ministers on 17 September 2008.
THE ROLE OF THE CRIMINAL JUSTICE SYSTEM IN THE PREVENTION OF VIOLENCE AND PROGRAMMES FOR PERPETRATORS
Background on the Magistrates’ Courts

Cardiff is the sixth largest single site Magistrates’ Court in England and Wales. Magistrates’ Courts in England and Wales are the courts of summary jurisdiction dealing with the lower level of criminal activity. These courts however have the power to imprison someone for up to 12 months. Many domestic violence cases are dealt with in these courts as the assaults are charged by the Crown Prosecution Service as common assault which carries imprisonment of up to six months, and assault occasioning actual bodily harm which can be sent to the court of higher jurisdiction, the Crown Court, but are often dealt with in the Magistrates’ Court.

Magistrates’ Courts have lay people (those not qualified as lawyers, also known as Justices) sitting in them as a bench of three with the assistance of a qualified lawyer known as a court legal adviser; there are 270 justices on the bench in Cardiff. We also have District Judges who sit alone in the court but again they are assisted by a court legal adviser, and there are four of them sitting regularly in Cardiff. The Cardiff Magistrates’ Court services a city of some 330,000 people. Cardiff is the capital of Wales and has the highest workload of any Magistrates’ Court in Wales.

We still refer to the courts as specialist domestic violence courts and work to the government definition of domestic violence. The Government defines domestic violence as ‘any incident of threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between adults who are or have been intimate partners or family members, regardless of gender or sexuality.’

How it all came about

Back in 2001 the head of the organisation known as the Women’s Safety Unit in Cardiff (they support victims of domestic violence), Jan Pickles, who has driven many of the innovations we have seen in the way domestic violence cases are dealt with in England and Wales came to me to ask if I would introduce specialist domestic violence courts in Cardiff.

Concerns

Her key concern was the level of attrition (losing cases to withdrawal) in domestic violence cases due to delay. After she had explained the level of the problem it was of concern to me also. On the one hand I was concerned to maintain and be perceived as maintaining the independence of the court, but on the other I was concerned about the cost in time, availability of courts, legal advisors and justices entailed in setting courts up.

Need to fit within the current court structure

We came to a compromise that we would implement the specialist courts but wherever possible dealing with and expediting domestic violence cases needed to fit within the current court listing structure.
The prospect of specialist first hearing/ pre-trial review/ trials/ and sentencing domestic violence courts, appeared unwieldy and difficult to sustain.

Cost and resource neutral
As far as possible therefore we sought to have a system that was cost and resource neutral. We have never achieved this, but got fairly close.

Initial Training for Justices
It is very important to inform Justices what they will be doing and why, and to involve the local advocates, Crown Prosecution Service at the start of such a project in a training event before implementation.

Domestic violence courts procedure

Fast Track system
We fast-track domestic violence cases in Cardiff, i.e., they are dealt with more quickly than other cases so that we can minimise the opportunity for perpetrators and members of perpetrators families to put pressure on the victim to drop the case. The standard procedure currently is that cases come to us having been charged by the Crown Prosecution Service. Then they go into an early first hearing (in the case of a guilty plea, which is likely not to be contested) or an early administrative hearing (in the case of a not guilty plea, which is more likely to be contested).

Domestic violence cases identified by police/ Crown Prosecution Service
Domestic violence charge sheets are marked with a clear red stamp by the police, and this information is then recorded on our files. Everyone is aware what they are dealing with. Case papers are also marked.

Guilty plea normal procedure – note bail form to Women’s Safety Unit and police
In a normal procedure, guilty pleas are dealt with on the day or there is a pre-sentence report, but Women’s Safety Unit who support the victim through the case and keep in constant touch are informed of the next date of hearing or the outcome if dealt with at the first hearing. Any amendment to bail conditions is notified so that complainant can be informed by the Women’s Safety Unit.

Not guilty to pre-trial review in two to four weeks, if pre-trial review is needed
In case of a not-guilty plea, if the file is ready to proceed to trial we set the trial date there and then within four weeks. If not ready to proceed to trial, we fix a pre-trial review fast-tracked within two to four weeks. There is a special domestic violence pre-trial review court each Thursday. Although other cases will be put into the list, domestic violence cases are dealt with in the morning so that the injured party can be contacted, e.g., if bail conditions are changed.

Women’s Safety Unit (Independent Domestic Violence Advisor) monitor and attend
The Women’s Safety Unit Independent Domestic Violence Advisors attend the pre-trial review, monitor the progress of the case and attend the final hearing/trial. If the trial date is fixed on the first day of the hearing we let the Women’s Safety Unit know so they can attend the trial to support the victim. Note that we also list domestic violence trials in the morning, to deal with child care issues, e.g., picking children up from school.
Facility for viewing court, separate entrance and waiting rooms
We liaise with the Women’s Safety Unit and witness support and make facilities available for the victim to view the court before the date of the trial. We also provide separate waiting rooms and entrances and exits for victims of domestic violence.

Trial listed as soon as possible – separate diary (morning listing)
Domestic violence trials are listed as soon as possible, two to four weeks, as mentioned, and this is possible as we keep a separate diary for domestic violence cases separate from other cases.

Domestic violence case priority at trial
We will list a domestic violence case on its own, wherever possible. If we cannot do so, it will never be listed with anything that has been listed for trial before and will be given priority on the day. If both trials are ready to proceed the domestic violence case gets priority. Two domestic violence cases will never be listed in the same court.

Data collection
We collect data. This includes:

- statistical data
  Specific cracked or ineffective trials data on domestic violence cases.
- cracked, ineffective and vacated trials
  Where trials do crack or are ineffective we analyse the cases with the prosecution once per month to see if there is anything we could have done to improve. We have detailed breakdown of what happened in each case.
- late guilty pleas, withdrawn cases
- other matters, e.g. papers marked, listed within timescales
  Other information we monitor which it is important to know is, are charge sheets being marked as domestic violence cases, so that they can be expedited from the earliest opportunity and are the cases listed within the timescales we would expect, i.e., no more than six to eight weeks.
- informing the injured party of change to bail conditions on the same day
  We also monitor informing the victim of changes to bail conditions the same day they are made through the Women’s Safety Unit.
- sentencing
  We monitor sentencing data, too.

Domestic violence sentencing outcomes, Cardiff Magistrates’ Court, October 2006 to September 2007

<table>
<thead>
<tr>
<th>Sentence Type</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Committed to Crown Court</td>
<td>61</td>
</tr>
<tr>
<td>Conditional Discharge</td>
<td>29</td>
</tr>
<tr>
<td>Financial Penalty</td>
<td>13</td>
</tr>
<tr>
<td>Custodial Sentence</td>
<td>19</td>
</tr>
<tr>
<td>Suspended sentence with IDAP</td>
<td>6</td>
</tr>
<tr>
<td>Suspended sentence with Community Order</td>
<td>20</td>
</tr>
<tr>
<td>Community Orders</td>
<td>74</td>
</tr>
</tbody>
</table>
In the past, many domestic violence cases were dealt with by way of financial penalties and conditional discharges, which means, perpetrators will hear no more about it if they do not do it again. Awareness of domestic violence issues through training for magistrates has seen the trend completely change in Cardiff, and now we are seeing a significant number being sent to the higher court to be dealt with and a much higher proportion of Community Orders and Custodial Sentences. In addition, a significant number of the Community Orders will have a requirement attached to them to attend the Integrated Domestic Abuse Programme, which specifically deals with perpetrators’ behaviour.

The total number of outcomes above is 222. We normally conclude 35 to 45 domestic violence cases per month.

**Outcomes**

- Witness non-appearance reduced
  - Witness non-appearance has reduced due to the work of the Women’s Safety Unit and the Witness Care Unit, managed by the Crown Prosecution Service.
- Reduction in the number of ineffective trials
  - Ineffective trials are below the target of 19%, currently 18%.
- Greater number of guilty pleas at an early stage
  - Greater number of guilty pleas as the defendant knows that the victim will get the support she requires to see the case through.
- The South Wales Criminal Justice Board
- Awareness this not just a domestic issue
  - Awareness of all working in the Criminal Justice system that these offences are not just a domestic issue, as was so often heard not so many years ago. These are serious offences which deserve to be dealt with as such.

**Progress**

**Principles extending throughout South Wales and England**

The system is now spreading throughout South Wales as in the whole of England and Wales, with 60 specialist domestic violence courts in the country currently and plans within next 12 months for 100 supported by Independent Domestic Violence Advisors.

**Huge increase in awareness and cooperation across all agencies**

It is worth noting the cooperation that has taken place between all the relevant agencies and the courts. We have a domestic violence sub group of the Local Criminal Justice Board which I chair and which has all the key agencies represented, courts, police, Crown Prosecution Service, probation, Women’s Safety Unit and defence, and each one of us are accountable for the performance of our organisation. If any one agency does not cooperate then the whole thing fails, so we cooperate. Also I should mention the defence advocates in Cardiff who have cooperated with the system from the start. They more than anyone else had the potential to cause difficulty in an area where they have only given support.

**Ongoing Training for Magistrates**

There is also ongoing training for all Magistrates, as we provide training in this area for all JPs, e.g., bail decisions. They need to know background on domestic violence issues.
Developments

- New provisions to prevent cross examination by defendants in person wide enough to include domestic violence
  The Youth Justice and Criminal Evidence Act makes a provision to prevent the cross examination in person by a defendant in cases of sexual offences and where there are child witnesses. Now extended to the situation where the court can prevent cross examination by the defendant in person where it appears to the court that the quality of the evidence given by the witness on cross examination is likely to be diminished if the cross examination is conducted by the accused and that the quality of the evidence is likely to be improved if a direction is given. This applies to domestic violence cases. The court can appoint and advocate to cross examine the victim instead.
- New legislation in 2007 – Domestic Violence, Crime and Victims Act
- Breach of non-molestation order criminal offence in family courts
- Possible extension of restraining order on conviction of any offence
- Restraining orders on acquittal where the court believes a restraining order is necessary to protect a person from harassment.

In short, the system for dealing with domestic violence cases is simple, straightforward and appears to achieve what it set out to do, providing the facility to deal with domestic violence cases in a timely and sensitive manner.
AMANDA ROBINSON
MEASURING WHAT MATTERS IN SPECIALIST DOMESTIC VIOLENCE COURTS

Introduction

‘Measuring what matters’ refers to a series of meetings held in the US during the 1990s to discuss ways to expand, update and improve the criteria used to assess police performance, particularly in light of the proliferation of community-oriented policing programmes across the country. The proceedings took place in Washington, DC and were attended by police executives, researchers and scholars. The final report, published in 1999, included a compilation of papers by leading experts, all of whom argued that police performance measurement needed to be reoriented from an exclusive focus on crime control to measuring what really matters to the communities being served.¹ Among other things, ‘measuring what matters’ means assessing service delivery from the perspective of those receiving the services. While the impact of these proceedings on the actual measurement of police performance is arguable, it serves as a useful example of how the performance of our key institutions could be measured in alternative, and potentially more meaningful, ways.

Using data from seven specialist domestic violence courts (SDVCs) in England and Wales, it is argued here that these courts also need to reorient themselves away from typical criminal justice performance measures (such as arrests, prosecutions and convictions) and towards measuring what matters to the service users themselves (in this case, victims of domestic violence). They must do so because case progression and sentencing practices are variable across the courts, but even if they were consistent, these measures still would not help us identify ‘success’ from a victim perspective. The implications of this change are substantial because what matters to victims is often very different to what matters to police, prosecutors, magistrates and/or judges. Perhaps most importantly, ‘measuring what matters’ is necessary to adequately substantiate the claim made by government that these courts are prime examples of attempts to make the criminal justice system more victim-centred.² In short, SDVCs are in a unique position to adopt alternative measures of performance that reflect what truly matters to victims.

Recent domestic violence initiatives in the UK

In the first few years of the 21st century there have been many changes in the response provided to victims of domestic violence in the UK. For example, the Domestic Violence, Crime and Victims Act,
which received royal assent in 2004, is touted as the biggest legislative overhaul in 30 years. The Home Office’s national domestic violence plan, announced by Baroness Scotland in March 2006, has a tripartite structure whereby ‘one-stop-shops’ for victims, specialised domestic violence courts (SDVCs) and multi-agency responses for very high risk victims (MARACs) come together in a coordinated way to assist victims, hold perpetrators accountable and target resources to the most vulnerable families. This plan capitalises on local innovation and documented evidence that such approaches can make a positive difference in the lives of victims and their children. Other national developments include new guidance for police on investigating domestic violence published by the Association of Police Officers (ACPO) in 2004, a revised prosecution policy published by the Crown Prosecution Service (CPS) in 2005, and a joint national training programme for police and prosecutors developed by the Central Police Training and Development Authority CENTREX in 2005. In addition, the government provided two million pounds to underpin a new national training and accreditation programme for Independent Domestic Violence Advisors (IDVAs) beginning in 2005. The support, information and advocacy provided by IDVAs to victims were found to be crucial in the success of SDVCs.

The Home Office implemented 25 Specialist Domestic Violence Courts in 2005/2006, and as of April 2007 there were SDVCs in 64 sites across England and Wales. SDVCs attempt to improve the efficiency, effectiveness, and empathy of the criminal justice response to cases of domestic violence. Documented benefits of these new courts include reducing the number of cases lost before trial, increasing the number of defendants pleading guilty or being convicted after trial, and providing support and advocacy to victims. However, further investigation of court outcomes is necessary not only because they are how the criminal justice system seeks to portray its own performance, but also because they reflect society’s symbolic and literal condemnation of these crimes to victims, offenders and the wider community. At the same time, we must critically assess whether court outcomes and penalties handed down in SDVCs constitute ‘success’ from victims’ points of view.

Methodology

The paper draws on findings from two government-sponsored evaluations of seven SDVCs in England and Wales. The mixed methods approach included a literature review, site visits, analysis of case files, and interviews with 54 practitioners and 46 victims. Quotes from the interviews are denoted by CJ (criminal justice practitioner), VS (respondent from the voluntary sector), or V (victim). This paper mainly reports on the interview data.

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4 Multi-Agency Risk Assessment Conferences (MARACs) were developed in Cardiff in 2003 (see Robinson 2004; Robinson/ Tregidga) to respond to the needs of very high-risk victims and their children. Recognising the ability of MARACs to deliver improved safety, the Home Office announced nearly GBP 2 million in funding in March 2007 to support the implementation of 100 MARACs across England and Wales by March 2008.
5 The accredited training programme for IDVAs is provided by CAADA (Coordinated Action Against Domestic Abuse). For more information see http://www.caada.org.uk.
6 Cook et al.; Vallely et al.
7 Scotland’s first Domestic Abuse Court was piloted in Glasgow from October 2004 and evaluation research published in March 2007 will inform the Scottish Executive’s decision about rollout of specialist courts to other jurisdictions (see http://www.scotland.gov.uk/Resource/Doc/173485/0048418.pdf).
8 Cook; Cook et al.; Robinson 2003; Standing Together; Vallely et al.
9 The research was funded by the Crown Prosecution Service and the Department for Constitutional Affairs (Cook et al.; Vallely et al.).
10 Criminal justice practitioners include prosecutors and administrators working in the Crown Prosecution Service, police and probation officers, magistrates and court clerks.
11 Voluntary sector respondents include those working in advocacy/support agencies based at the court (Victim Support, Witness Service) or community-based agencies (such as the WSU in Cardiff or CDVAS in Croydon).
Findings

SDVCs from the victim's perspective
Several clear and unambiguous messages emerged from the SDVC’s victim interview data: victims want to have their stories listened to and believed by respectful and well-trained professionals; they want to receive timely information about the progression of the case through the SDVC; and that they want the violence/abuse to cease. It is this last point that is so crucial to understand in the context of criminal justice performance and notions about what constitute ‘successful outcomes’. Namely, what happens in the SDVC – whether the defendant is convicted or not, and if he is, what type of sentence he receives – often has very little bearing on the long-term safety and security of victims of domestic violence. Time and again, victims mentioned being fearful of what was going to happen to them or their children as a result of the case being heard in the SDVC. For example:

‘There were no screens available, my daughter was so nervous, and then he goes and gets off. I have never seen her so upset.’ V

‘I was scared, depressed, and didn’t understand a lot of what was happening… The first time that I had any contact with my lawyer was about 2 minutes before the hearing.’ V

‘He got 18 months probation. He took it badly blaming me for the sentence. He was saying that it was because of me that he nearly got sent to prison. He kept threatening me, and was arrested for breach of probation order.’ V

‘I know that he is just waiting for the injunction to run out. He will want vengeance…. I feel especially unsafe now that the case is over.’ V

These quotes all indicate the insecurity experienced by victims as their cases are progressing through the SDVCs. These feelings of insecurity, anxiety and fear can be exacerbated from having a lack of information throughout the court process. On the other hand, victims can feel empowered when they are kept fully informed and involved in the process.

‘Yes [I am] very pleased about the outcome… She [prosecutor] even asked me what I thought he needed. They made me feel included in what was happening.’ V

Thus, regardless of whether there is a conviction or an acquittal, the process itself will always be difficult for victims, so much so that some will decide that their involvement is ‘not worth it’. When victims mentioned their decision to withdraw or continue with a case, what is notable is that they mention ‘personal reasons’ that may have little to do with the performance of criminal justice practitioners or interventions. This is consistent with other research on victim retraction. As one victim explained:

‘No, I didn’t [retract] but I had thought about it. There were a lot of things that were off-putting. I kept going back for personal reasons though. I had to be strong; I had separated and gone back to him a lot. I needed to show him that this time I wasn’t going to back down.’ V

Although SDVCs aim to reduce levels of victim retraction, unfortunately the situation remains that it is not an uncommon decision amongst victims. The quote above is indicative of the recurring nature of domestic violence and the process of leaving an abusive relationship which is often at odds with a criminal justice system predicated on specific incidents. Practitioners should remember that these decisions will be more easily understood as part of a process rather than a response to a specific incident. The focus should be on providing victims with the information and support necessary to make fully informed decisions that maximise their chances of safety.

12 Findings from the interview data are presented in full in the two CPS/DCA commissioned reports.
13 ACT Department of Justice and Community Safety; Cook; Ford; Robinson/ Cook
**Measuring ‘success’ in SDVCs**

Further complicating attempts to measure performance in the courts is that their practices must be viewed from the perspectives of many different audiences, each of whom might have different ideas about what should be prioritised in terms of case progression. A prosecutor’s success will not necessarily translate into a victim’s safe outcome. The court clerk attempting to ‘speed up the process’ and reduce ineffective trials might be at odds with the advocate who needs more time to support the victim so that she does not drop out of the process. Furthermore, problems for victims can result from a range of different court outcomes, as discussed earlier and reinforced by the following quotes:

‘I felt very unprotected, he was found guilty, I did that to him and am therefore fearful of any repercussions.’ V

‘Probably (I would have needed) some protection as he was found not guilty – what was I meant to do after that, knowing that he is still around, he could have done anything.’ V

Successful case progression is therefore in the eye of the beholder. As a result, the monitoring of case outcomes cannot tell us whether victims are more empowered, satisfied or safer as a result of having their cases heard in a SDVC. These quotes remind us that it is often impossible to simultaneously accomplish the goals of the court as well as those of the victim, especially since both are multifaceted and might also vary on a case-by-case basis. As the government is currently undertaking an SDVC expansion programme, it is worth considering what the overarching rationale for these courts should be – increasing victim safety, improving the efficiency of the criminal justice system, or bringing more perpetrators to justice? Furthermore, we must ask whether it is possible to simultaneously accomplish these different goals, and if not, which should take priority?

In addition, it is unclear what sentencing options should be preferred within SDVCs. The exception is with fines, which were universally viewed as inappropriate by victims and many practitioners, as the quotes below indicate:

‘I wasn’t satisfied with the outcome. I wanted to see him punished for threatening to kill me, but he was just punished for criminal damage and got a fine.’ V

‘A fine is nothing to him, what sort of punishment is that? He appointed a barrister for an appeal so he has money.’ V

‘The fine made me really angry. I had no input so they just took what he said about his financial situation.’ V

In contrast, other sentencing options sparked a range of different views across victims and practitioners. For example, these comments were made in relation to Community Rehabilitation Orders (CROs): 14

‘I was very pleased. He didn’t deserve to go to prison. He has problems and they were recognised – he got fine, probation and perpetrator programme.’ V

‘Most victims do not want the defendant imprisoned, they want to see him change… we take the view that in 99.9% of cases imprisonment would be justified, but whereas that would provide short-term protection we are looking towards long-term protection and it may be that is possible through perpetrator programmes.’ CJ

‘For some victims a CRO is a slap in the face. There is a waiting list for perpetrator programmes so often the defendant walks away from court with no real immediate consequences. Defendants who

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14 The Criminal Justice Act 2003 has replaced Community Rehabilitation Orders (CROs) and Community Punishment Orders (CPOs) with Community Orders that can be tailored to the needs of offenders using twelve different requirements.
are sentenced to CROs frequently show no remorse – in fact they can be seen laughing just outside the court.' VS

In regards to restraining orders, victims were often positive about these orders, although others noted their limitations:
'I was very happy with the restraining order. It was unlimited and that made me feel safe.' V
'I thought the restraining order would make me feel safer but he has broken it. I was led to believe that if that happened then he would be arrested quickly but this hasn’t happened. I feel powerless.' V

The use of restraining orders has been extended to other types of cases by new provisions in the Domestic Violence, Crime and Victims Act (2004), although these changes were not implemented at the time the research was conducted.15

Discussion and conclusions

Interviews conducted with victims having their cases heard in SDVCs did not conjure images of a coordinated, well-maintained or highly efficient system that is able to routinely deliver ‘successful outcomes’. This is not to say that SDVCs are not a huge improvement on what has come before. Indeed, one could argue that it is only because of the system’s heretofore abysmal treatment of domestic violence victims that SDVCs can claim any success at all. Although the SDVCs dealt with similar types of cases (those involving domestic violence), it was apparent from the interviews that the experiences of victims with the SDVC process varied quite substantially, as did their desires about what they actually wanted to happen as a result of the abusive or violent incident coming to police attention. In conclusion, victims have different perspectives on what, if anything, can provide them with ‘justice’ and that, in light of this, outcomes from criminal justice initiatives cannot be easily equated with ‘success’ from their perspectives.

Perspectives of victims and practitioners on the SDVC process and on the resultant punishment illustrate how concepts such as ‘justice’ and ‘fairness’ are formulated and perceived in different ways. Consequently, it is difficult to meaningfully assess the performance of these courts, as safety is not always achieved when criminal justice outcomes are achieved. What produces a satisfied, safe victim in one case (e.g., custodial sentence) will produce the opposite effect for a different victim, or even the same victim at a different point in time. Furthermore, even when a victim’s safety has been increased, this can have occurred due to myriad reasons, only some of which might be due to actions taken within the court. Conversely, outcomes viewed as undesirable by the courts might be exactly what some victims want (e.g., bindovers or conditional discharges). Because courts do not routinely collect information about victim safety as part of the case finalisation process, let alone include this as an official performance target, the situation remains that criminal justice performance indicators are used as proxies. The criminal justice system should be encouraged to collect direct measures of this crucial outcome.

So what else should be measured? What is it about these courts that can make a difference to the victims and offenders coming through their doors? Mastrofski’s work16 elucidated the type of performance that citizens desire during encounters with police using six non-crime indicators: (1) attentiveness, (2) reliability, (3) responsive service, (4) competence, (5) manners, and (6) fairness. He termed this model ‘policing for people’, and it could easily be adapted to evaluate other realms of criminal justice. Recent research in the UK substantiated Mastrofski’s claim that police demeanour is impor-

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15 From July 2007, the courts will be given the power to impose restraining orders on domestic violence perpetrators on sentencing for any offence and on acquittal, if they consider them to be a danger.
16 Mastrofski
tant, especially to domestic violence victims. For example, taking the time to listen, being attentive, empathetic and concerned to hear the victim's version of events all was evidenced as 'quality policing' from the victim's point of view. 17

Likewise, conceptualizing ‘quality prosecution’ and ‘quality sentencing’ should be informed by victims’ perspectives and attention to the process as well as the outcome of a case going to court. From a victim's perspective, ‘quality prosecution' would not decontextualise their experiences into 'bits of evidence' but rather provide an outlet where their experiences are heard and believed. Decontextualising the violence and taking away a victim's sense of control is disempowering. As Nils Christie commented thirty years ago, ‘conflicts have been taken away from the parties directly involved and thereby have either disappeared or become other people’s property’. 18 This results in victims becoming ‘double-loser': from the crime itself and from being denied the right to full participation in a case that involves their own conflict. To counteract this, he recommended a victim-oriented court that included a stage where ‘the victim’s situation was considered, where every detail regarding what had happened – legally relevant or not – was brought to the court’s attention’. 19 Data from this study and others has consistently shown that providing support, timely information, listening to victims and consulting them before key decisions can make victims feel empowered rather than disenfranchised by the process. 20 Therefore, in a practical sense, ‘quality prosecution’ would suggest that the victim is offered a pre-court visit, guidance about the legal process, and up-to-date information during case progression to counteract a sense of being ‘left out of her own case’.

‘Quality sentencing’ would require incorporating “what matters” to victims into the sentencing process. This would necessitate communicating to victims the likely outcomes of a criminal conviction and consulting with them before sentencing takes place. Victim personal statements must be taken consistently and be made available to courts before sentences are passed, so that a victim’s concerns and experiences are heard and part of the official court record. This is not to say that victim’s wishes should have a direct bearing on the sentence imposed (which should be determined by reference to the seriousness of the crime), but rather that their views and wishes are incorporated into the process so that the outcome does not feel out of their control. At the very least, victims should receive timely notice of the case result and sentence, a situation far from routine at the moment. In conclusion, since the victim data in this study clearly showed that mapping the contours of ‘success’ is a different exercise for each victim, the focus should instead be on providing a supportive, consistent and professional response that makes all victims feel heard and provides the support they crave before, during and after the court case. Consistency in process can be achieved even when outcomes are unknown or undesirable.

The notions of quality processes that take into account the individual concerns of victims and the outcomes that matter to them (namely, for the violence to stop) point to the utility of therapeutic jurisprudence. Therapeutic jurisprudence is a useful lens through which criminal justice practice can be evaluated, as it asserts that the law should promote the well-being – even the empowerment – of people with whom it comes into contact. Victim empowerment is a concept that could provide a more meaningful indication of the performance of institutions in contact with victims of domestic violence, as it brings attention to the victim’s own power and her own actions to improve her life and keep herself and any children safer. The law may be seen as victim power resource 21 or as a mechanism by which some of society’s most vulnerable are doubly victimised; 22 the key is for SDVCs to not only steer away from the latter, but also to measure and prioritise the former.

17 Robinson/ Stroshine
18 Christie, p. 1
19 Christie, p. 10
20 Cook; Cook et al.; Robinson 2003; Standing Together; Valley et al.
21 Ford
22 Mills 1999
It is clear that ‘success’ of a case can take many different forms. Most obviously in cases of domestic violence, we must remember that there is not one purpose to criminal justice intervention but a number of purposes. Furthermore, the importance of recognising the subjective nature of success can be a useful reminder that the law is only one element of a wider social response to domestic violence that must also include community-based and preventative strategies. It also has been suggested that ‘healing and restorative approaches may be an effective alternative’ to a criminal justice response to domestic violence, especially from the perspective of victims. Further research needs to be conducted about the potential impact of locating the primary government response to domestic violence within, rather than outside of, the criminal justice system (for example, in health or social services). Providing a truly holistic response to victims of domestic violence must include the criminal justice system and beyond.

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Holder, Robyn: The emperor’s new clothes: Court and justice initiatives to address family violence Journal of Judicial Administration Vol. 16, No.1, 2006, pp 30–47.


23 Holder
24 Lewis; Robinson 2007
25 Mills 2003, p. 103


Violence in close social relationships is the most widespread form of violence in our society, and it primarily affects women and children.1 According to a study in this field, e.g., three out of four cases in which police patrols were called in Stuttgart concerned offences committed in the domestic sphere.2 In the past, police interventions because of domestic violence were often only aimed at a mitigation of the acute dispute, and subsequent further measures such as organising counselling services for those affected or issuing immediate protection orders under civil law, were taken in rare cases only. Protection for the women affected, and their children, was actually provided by women’s and children’s shelters: according to estimates, around 45 000 women still turn to shelters every year.

After many years of activities by the women’s shelters the issue of violence against women and children has become a public topic also in Germany. As the taboo surrounding this theme was beginning to be removed, a wide network of support services for women and children experiencing violence has developed. Still, the extent of violence has not diminished. This can only be changed if the State’s monopoly on the legitimate use of force and society’s responsibility are taken seriously. For too long a time has violence been regarded as an individual problem of the women concerned, with women’s shelters taking over the burden of trying to find solutions.

It was not until the 1990s that a paradigm shift took place, with the consequence that domestic violence ceased to be considered a private affair and that the State was expected to take over general responsibility in this field. This development, for instance, is reflected in training programmes on violence against women which since 1995 have been organised for police officers; in the 1997 Act Amending Criminal Law on the Prosecution Status of Marital Rape3; in the 1999 National Plan of Action on Violence Against Women initiated by the Federal Government; and in particular in the Act on

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1 Schweikert; Leuze-Mohr
2 Sozialministerium Baden-Württemberg, pp. 11 ff.
3 Under the 33rd Amendment to the Act on Criminal Law of 1 July 1997, “non-marital” no longer is a constituting fact, thus the offence now regulated under Section 177 of the Criminal Code also relates to punishable rape and marital sexual coercion, which before were punishable only under Section 240. This has been the main objective of the modification of Sections 177 and 178 of the former version of the Criminal Code.
Protection Under Civil Law Against Violent Acts and Stalking (Act on Protection Against Violence), which entered into force in the beginning of 2002. Rigorous prosecution of domestic violence cannot be considered as an isolated factor, however, but has to be seen in conjunction with the other available support services. The Model Project on orders to leave the home comprises four elements:

- acute crisis intervention by the police (order to leave the home)
- counselling and assistance services
- rigorous criminal prosecution
- effective protection under civil law.

Freiburg’s initiatives to combat domestic violence

The Freiburg Intervention Project

On 30 January 1998, upon initiative of the Equality of Women Agency and Freiburg’s Women’s and Children’s Shelter Association, the FRIG Freiburg Intervention Project against domestic violence was initiated, under the slogan ‘No Violence’. It has been modelled after Berlin’s BIG Intervention Project against domestic violence existing since 1995, and thus, eventually, after the DAIP Domestic Abuse Intervention Programme, an American Project of Duluth, Minnesota, which was started in 1979. The goal of the Intervention Project is to reduce, and in future to prevent, violence against women and to denounce this form of violence. This comprehensive approach has been taken over by Freiburg and, after adapting it to specific regional structures, transferred to the local level. The Freiburg Intervention Project, just as the Berlin Intervention Project, is a cooperation project of women’s protection and counselling centres, local authorities of Freiburg, the police and courts as well as other projects and agencies whose work includes dealing with specific aspects of domestic violence.

The Freiburg Intervention Project pursues three central objectives:

- supporting and protecting women
- calling to account perpetrators
- denouncing domestic violence.

Representatives of the cooperating institutions regularly meet at the Round Table, the central cooperation and decision-making body of the Freiburg Intervention Project. Here, forces are joined to draw up effective strategies for the implementation of the project objectives, to coordinate procedures, improve guidelines and review the legal scope of action in order to enhance the effectiveness for those concerned of interventions in cases of domestic violence. A focus of activities has been placed on building better links between all agencies and local projects that work in this field, developing measures oriented towards implementation to be taken by the police, criminal and civil law authorities, and eventually, establishing social training programmes for perpetrators. The details of the individual themes are treated by specialised groups. While the Berlin Intervention Project had seven specialised groups, in the case of Freiburg, due to limited personnel capacities, the work had to be concentrated on three specialised groups: police/courts; men’s services/perpetrator programme; support services for women and children.

Since November 2000 the project has been headed and coordinated by a management body under the responsibility of Freiburg’s Women’s and Children’s Shelter.

4 Schweikert, Baer
5 Weiß, pp. 225 ff.
6 For the options under the new Protection Against Violence Act see Schweikert/Baer, Voßkuhle
7 Winterer 2005; Weiß
8 Pence/ McMahon
The contribution of Freiburg's Public Prosecutor's Office: Practical work and goals
As the representative of the Public Prosecutor's Office of Freiburg, I have been involved in the project from the very beginning: as a member of both the Round Table and in particular of the specialised group focusing on police/court matters.

Since 1 November 2000, special structures for dealing with violence in the context of close social relationships have existed in the Public Prosecutor's Office of Freiburg: Departments II and III, which are primarily competent for general crime and sexual offences, have been connected with the already existing Special Department of Sexual Offences, with the specific goal to ensure uniform procedures and a resolute prosecution of domestic violence which underlines that domestic violence is not a petty offence.

The tasks of the Public Prosecutor's Office in detail

Rigorous criminal prosecution
- signalling function: denouncing domestic violence by prosecuting related offences
- uniform procedures (establishing special departments)
- correct assessment of proceedings: preventing an escalation of violence
- making full use of existing investigation approaches and options under the Code of Criminal Procedure (e.g., examination by the judge)
- coordinated cooperation with the police.

Taking into account the specific character of domestic violence cases
- close relationship between perpetrator and victim: ambivalence of victim
- the right to refuse statements
- negative effects of punishment on the victim (e.g., in the case of fines).

Sanctions and prevention
In the field of domestic violence it is essential that a woman suffering violence who finally decides to report the case to the police will get a realistic idea of what she will have to face and which course the proceedings will take. Therefore, one of the first demands made by the specialised group on police and court matters of the Freiburg Intervention Project was to establish special structures for this field also in Freiburg's Prosecutor's Office in order to ensure that the prosecutors in charge of the corresponding cases are familiar with the special characteristics of domestic violence proceedings and in addition, are ready to show the commitment required in such cases. In recent years, much has been achieved in this regard: after initial scepticism, also the competent criminal courts have meanwhile accepted that domestic violence proceedings have to be taken seriously and that perpetrators must be convicted if the evidence is sufficient. These convictions make it clear that offences in the field of domestic violence have ceased to remain unpunished and that perpetrators must now expect to be charged and convicted.9

For the Public Prosecutor's Office, apart from rigorous prosecution, the aspect of prevention is of relevance as well: each new case must carefully be examined with regard to its potential for a further escalation of violence, and if this is probable, adequate steps must be taken to prevent this.

Since special structures came into existence, the number of proceedings in cases of domestic violence has risen annually: in 2001, the first year after the introduction of the special department in

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9 Winterer 2004
urban Freiburg, ‘only’ 290 proceedings were instituted, compared to 517 in 2005 and 530 in 2006. In the first 10 months of 2007, as many as 522 proceedings were registered already.\textsuperscript{10}

**The definition of domestic violence**

The Prosecutor’s Office of Freiburg defines violence in close social relationships as acts of violence within families (e.g., between parents and children), in relationships of a character similar to marriage and in same-sex relationships, independent of whether the persons concerned (continue to) live in the same household.

The offences that have to be considered include, but are not limited to:

- bodily injury, Sections 223 ff. of the Criminal Code
- coercion, Section 240 of the Criminal Code
- threat, Section 241 of the Criminal Code
- violation of Section 4 of the Protection Against Violence Act.

as well as

- offences against sexual self-determination, Sections 177 ff. of the Criminal Code

and also

- deprivation of liberty, Section 239 of the Criminal Code
- robbery, Sections 249 ff. of the Criminal Code
- extortion, Section 253 ff. of the Criminal Code.

The offences that are typical of the field of domestic violence, such as insult, damage to property, trespass, data espionage (Sections 202a, 303a,b of the Criminal Code), violation of privacy by means of image recordings (Section 201a, the ‘Voyeur Section’ of the Criminal Code), may also be relevant with regard to typical developments in the context of stalking.\textsuperscript{11}

It is of specific significance that, in order to meet the goal of rigorous criminal prosecution that has been set, it can no longer be regarded as appropriate to transfer cases to the field of private prosecution (Section 374 of the Code of Criminal Procedure) but that public interest in criminal prosecution is affirmed. In fact, this only means that in cases where the injured party files an application for criminal prosecution, the public prosecutor no longer uses the option to refer the party concerned to their right to bring private prosecution themselves. However, this does not solve the main problems of criminal prosecution in cases of domestic violence.

**Central problems of criminal prosecution**

A specific difficulty in criminal prosecution is that the injured person often is not ready to report the case to the police or to give a statement, or that an application for criminal prosecution is filed but withdrawn subsequently\textsuperscript{12} and as no other evidence is available in many cases, this often means that proceedings are terminated. In these situations, the only option is to make it clear to the accused that the case can immediately be reopened until the limitation period expires, if the injured party decides to make a statement at a later point in time.

What has to be taken into consideration here is that the victim and the perpetrator have a close relationship, which usually does not end because of the offence that has been committed, and that therefore the person experiencing violence tends to be ambivalent as far as reports to the police are

\textsuperscript{10} For comparison: Department 552 (rural Freiburg, Breisgau-Hochschwarzwald region) initiated 448 proceedings in 2006, and during the first 10 months of 2007, 369 proceedings.

\textsuperscript{11} Weiß/ Wintener

\textsuperscript{12} For patterns regarding reports to the police by abused women see: Leuze-Mohr, pp. 255 ff.
concerned. Most survivors of violence are afraid of the perpetrator, and not least of his reaction to a report to the police. They fear that further violence will follow, or the abuser may threaten them. At the same time, what many victims want to achieve primarily is not to end the relationship: they want the violence to stop. If the woman experiencing violence and the perpetrator still live in the same home, the woman has to cope with massive tension in the period between reporting the violence to the police and the end of court proceedings. In many cases, this stress is the reason why reports to the police or applications for criminal prosecution are withdrawn. Often, the injured party only decides to report the violence after she has experienced repeated acts of violence and/or it will take her several attempts to keep to her prior application for criminal prosecution and hold out until the end of proceedings. During this time, many perpetrators try to talk the matter over with the victim and to make it up with her; they promise to change in order to make the injured party continue the relationship and withdraw the report to the police or the application for criminal prosecution. Finally, one should not underrate the pressure on immigrant survivors of violence that is exerted by the (extended) family to prevent her from making public any domestic problems.

If a report is withdrawn, the police authorities first have to check whether this only means that the victim will no longer be the one who initiates criminal action but is still ready to give evidence, or whether she will make use of a possible right to refuse to testify and thus will not make statements. In either case, as long as the matter in question is an offence requiring application in relative terms¹³, the prosecuting authorities may affirm public interest. However, proceedings will often have to be terminated according to Section 170(2) of the Code of Criminal Procedure if the only available evidence would be the statement by the injured party, which cannot be used in such a case. Here the essential question is whether the police officers who were called to the scene have made full use of their possibilities of evidence conservation, i.e., whether they:

- have documented exactly (if possible also taken photographs of) the situation that presented itself, the state of the flat and persons on the scene, and in particular, injuries;
- have ascertained on the spot whether there are any other witnesses (e.g., neighbours who might have noticed previous incidents, noises, remarks, frequency of and what was said during fights, etc.);
- have interviewed separately the parties involved, and have exactly documented any spontaneous remarks by the injured party.

Such spontaneous remarks and observations on the spot may be used by police officers who give evidence in court, independent of whether the victim is ready to testify herself.

Another important aspect is that the injured party, if she has not been interrogated already in the context of the police intervention, makes a statement to the police as soon as possible – and that she is questioned alone, i.e., in the absence of the perpetrator. If the injured party does not appear at the police office in spite of being asked to come, it might be considered to issue a summons to appear before the public prosecutor for the purpose of questioning because in this case, different to police interrogations, she is obliged to appear. In the same way, the accused has to be summoned in person to appear for questioning, which also documents that the matter is not a petty offence.

In serious cases, if the victim is ready to testify, examination by a judge should be organised at an early stage. The effect of such an examination is that, even if she later makes use of her right to

¹³ Under Germany’s Criminal Code, a distinction is made between offences requiring application in absolute terms (e.g., Sections 123 and 185 of the Criminal Code), which means that no proceedings can be instituted in the absence of an application by the injured party; and offences requiring application in relative terms (e.g., Sections 224, 229 and 303 of the Criminal Code), in which an application for criminal prosecution on the part of the injured party can be replaced by an affirmation of public interest on the part of the prosecuting authorities; and finally, offences liable to public prosecution (e.g., Sections 177, 224 and 226 of the Criminal Code), i.e., prosecution is always initiated by the public authorities, and no application by the injured party is required.
refuse to testify, contrary to the provisions of Section 252 of the Code of Criminal Procedure, her previous statement may be introduced in the trial by hearing as a witness the judge who has conducted this examination. Still, one has to bear in mind that, due to capacity problems, it is not possible to proceed in this way in every case, and previous coordination with the competent judge is an absolute must to ensure that the examination takes place soon. Another problem is that under the new rules of administration of justice, witness statements on the basis of an examination by the judge may be used without restrictions only if a counsel for the defence has been appointed by the court to represent the accused and if this counsel can be present during the examination.\textsuperscript{14}

**Making full use of existing sanctioning options**

If satisfactory proof of the offence can be furnished in court, the prosecutor has to decide in which way the trial will be concluded.

In particular the following options are relevant:
- termination according to Section 153 of the Code of Criminal Procedure
- provisional termination according to Section 153a of the Code of Criminal Procedure, with conditions imposed (e.g., participation in a perpetrator programme)
- warning with punishment reserved, with or without probationary conditions (e.g., participation in a perpetrator programme)
- fine
- imprisonment:
  - on probation (possibly with probationary conditions)
  - without probation.

**Cooperation with the Court Assistance Agency**

As a rule, the Court Assistance Agency is involved in order to ascertain in which way the domestic situation has developed after the incident in question and whether it may be justifiable, in view of the behaviour after the offence of the persons concerned and with regard to the consequences of the offence, to terminate proceedings (Sections 153, 153a of the Code of Criminal Procedure, or Section 170(2), respectively, in the absence of an application for criminal prosecution), or whether sanctions by means of requesting penal orders or bringing criminal charges are imperative. In Freiburg, the Court Assistance Agency has been involved since the establishment of the special structures, with very good results.

According to Section 160(3) of the Code of Criminal Procedure, the task of the Court Assistance Agency is to assist the prosecuting authorities to investigate the circumstances which are important for the determination of the legal consequences of the offence. In more than 40% of cases of domestic violence, I ask the Agency to draw up a report, which is based on factors such as talks to the persons concerned when Court Assistance Agents visit the family in question at home. Experience has shown that on such an occasion, the aggrieved parties tend to be very outspoken about their situation. Here, an important factor with regard to handling the case is whether the partners have separated in the meantime or whether they have already considered or taken private steps to solve the problem (e.g., relationship therapy or alcoholism treatment), or whether new conflicts or offences have occurred. The work of the Court Assistance Agency is sensible also because when they are involved several months have passed since the offence, so that a cautious prognosis of future developments may be given.

**Criteria for handling of proceedings if an offence is suspected**

Also in cases where there is sufficient evidence for a charge, Section 170 (2) of the Code of Crimi-

\footnote{14 Collection of Federal Criminal Court Rulings/ BGHSt Nos 46, 93 (97 ff.), Federal Court of Justice/BGH, Neue Juristische Wochenschrift Journal 2003, 3142 (3144).}
nal Procedure may be applied. However, this is only admissible if no previous incidents of violence are known and if the offence has not caused serious injury on the part of the victim. Proceedings may be terminated under Section 153 of the Code of Criminal Procedure if the perpetrator has not been judicially noticed so far and if the offence has had no, or very small, consequences, so that further criminal prosecution is deemed to be disproportionate.

A termination of proceedings under Section 153 of the Code of Criminal Procedure is sensible if the accused is willing of his own accord to accept conditions that are imposed with the aim to solve the existing problem, e.g., participation in a perpetrator programme (anti-violence training) or alcohol treatment.

In all other cases, charges are brought or penal orders are issued. If the parties concerned meanwhile have separated, and unless it is deemed necessary in view of the massive consequences of the offence or previous criminal convictions of the accused to impose a prison sentence and thus to bring charges, a penal order imposing a fine may be requested: this means that written proceedings and not a trial in the strict sense of the word will take place.

If the parties concerned live in the same household in spite of the violence committed, which is normally the case, it is possible in specific situations, i.e., in particular when the offender has no prior convictions, by way of a penal order to request a warning with punishment reserved under Section 59 of the Criminal Code. The accused is obliged to take part in social training programmes in order to learn new, non-violent patterns of behaviour.

In the case of massive consequences of the offence or in the case of prior convictions in this field, charges are brought. Here punishment may also be reserved on probation, with appropriate instructions under Section 59 of the Criminal Code issued.

The following criteria may be considered in decisions on a termination of proceedings without further consequences according to Sections 153 or 170 (2), respectively, of the Code of Criminal Procedure, and in the absence of an application of criminal prosecution:

- no, or very small, consequences of the offence
- no previous incidents are known
- no record of previous convictions
- start of alcohol treatment
- start of relationship therapy
- separation of the partners.

The criteria for bringing charges or issuing a penal order include:

- massive consequences of the offence
- previous incidents known
- record of previous convictions exists (in particular regarding offences in this field)
- lack of problem awareness on the part of the offender.

If it seems appropriate to request orders imposing a fine one has to bear in mind that if the partners are living together this will inevitably have negative effects also on the victim: a fine is a financial burden for the entire family as it usually reduces the housekeeping money, which may give rise to new conflicts.

**Perpetrator programmes**

In cases in which a separation of the parties concerned is out of the question (for the time being), it may be useful to have influence on the perpetrator through a warning with punishment reserved according to Section 59 of the Criminal Code or a provisional termination of proceedings according to Section 153a of the Code of Criminal Procedure, because in either case it is possible to oblige the accused to take part in an outpatient alcohol treatment programme or an anti-violence training scheme (perpetrator programme).
After lengthy preparations a training programme for perpetrators was drawn up in the context of the activities of the specialised group on men’s services/perpetrator programme: Learning to Solve Conflicts Differently and Without Violence. Since December 2002, it has been possible in the context of conditions imposed under Section 153a of the Code of Criminal Procedure or in the case of warnings with punishment reserved or suspension of sentence on probation after a probationary decision, to refer candidates to such a training programme (several preparatory talks, 12 weekly two-hour sessions, follow-up talks at larger intervals) and it is also possible at least to hold individual sessions for taking the case history combined with an ‘emergency programme’ so that concise services extending over a limited time and at limited cost may be provided in the context of conditions imposed for less serious offences, in particular cases according to Art. 153a of the Code of Criminal Procedure. The cost of therapy has to be borne by the candidate, at least in part, depending on his financial situation; and so far, sufficient funding could be obtained through both the State Foundation of Baden-Württemberg and the allocation of fines earned. The training programme takes place in closed groups; in the meantime, 11 small groups have concluded the programme. The response by the participants has been good, and drop-out rates have been small. In general, it has shown that participation in a perpetrator programme is applicable in a maximum of five to ten percent of all proceedings dealing with domestic violence. The main reason for this is that perpetrators often have inadequate German language skills, and in addition, it is not sensible to refer offenders to a programme as long as they refuse to accept at all that what they did was wrong.

Orders to leave the home
The general goal of the Model Project on orders to leave the home was to offer more effective protection than in the past to people suffering domestic violence, by means of State interventions oriented towards the principle that those who cause conflicts should be held responsible.

The Model Project of Baden-Württemberg is based on the principle of ordering perpetrators away from home, an approach initiated by Austria: in cases of domestic violence, the perpetrator is ordered to leave for a certain period the household where he has lived with the victim. If necessary, his keys to the house may be seized as well.

Such a measure is a state interference with the freedom of the individual and requires a statutory basis, which can be provided only under the general police provisions of Arts. 1 and 3 of the Police Act of Baden Württemberg. Although bills for an amendment have been drafted by now, it still cannot be foreseen at present when they will actually enter into force.

The Model Project on orders to leave the home was started on 1 June 2000 in Baden-Württemberg. At first, 42 towns participated, and later, up to 86. Because of the positive experience of this one-year test period, the possibility of issuing orders to leave the home has been introduced in the whole state. After an intensive discussion of the problem, the Freiburg Intervention Project Against Domestic Violence decided only to take part in the orders to leave the home project if it was ensured that simultaneously, comprehensive counselling services were available for the women concerned. In Freiburg, this counselling is provided by the Women’s and Children’s Shelter Association. In our view, providing adequate counselling has been a fundamental prerequisite for the success of the Model Project: women experiencing violence need counselling and professional support in order to be able to deal with their present and future situation. It is not enough to issue orders to leave the home without delivering professional support services. In practice, the counselling centres pursue an outreach approach and proactively contact the woman in question. If she refuses these services, this has to be accepted (data protection!), but in such cases she will get information leaflets on available counselling services.

15 Arnold; Baden-Württembergische Landesstiftung; Zimmermann et al.
16 Drumm; Kury/ Gartner/ Oberfell-Fuchs
17 Sozialministerium Baden-Württemberg
On 1 October 2001, the possibility to issue orders to leave the home was introduced in Freiburg, which has been practiced effectively since then.

In the context of a police intervention, the officers assess whether there is the danger of further violence being committed. If this is regarded to be likely, an order to leave the home may be issued. This is a very serious measure: the perpetrator is ordered to stay away from the house, he has to hand over his keys and is not allowed to return for the period in which the order is valid.\textsuperscript{18} It is important in such cases to assess carefully whether the act of issuing an order to leave the home is actually enough to remove the danger for the victim. Even though in the great majority of cases the offenders do not violate the order, one has to bear in mind that the police, for lack of staff, is not in a position to check regularly whether the order is actually observed: if there is reason to assume that an aggressive offender will return to the flat although an order to leave the home has been issued, the woman, as in the past, has to turn to a women’s shelter in order to avoid danger.

After the police officers in charge have issued an order to leave the home, the Office of Public Order of the town or city in question has to assess whether the order should be extended (for 14 days as a rule) or not. If possible, both the injured party and the perpetrator are heard before a decision is taken. In Freiburg the normal procedure is that the intervening police officers issue an order to leave the home that is valid until the next working day, while the police authority (i.e., the Office of Public Order) confirms the order for the following 14 days, and decides on the basis of hearings of both the perpetrator and the victim whether public security is impaired to such an extent that it is justifiable according to restrict the fundamental rights of the offender for a period of two weeks. In some cases, the responses are too restrictive, for fear of legal steps that the person affected by the order to leave the home might take, which is to the disadvantage of the women concerned. The order to leave the home is a measure taken in the context of police power, which is based on police law but does not include the right to take penal measures. Taking sanctions comes under the competence of criminal law.

**Developments in the police authorities**

Already in autumn 2001 the police authorities of Freiburg North and South organised half-day training courses for all patrol officers working in Freiburg. In addition, a further training event for trainers in the field of domestic violence interventions was held at the State Police Directorate. In the last few years, also further training events focusing on stalking took place, in particular after Section 238 of the Criminal Code entered into force on 31 March 2007.

Now, several areas have special agents whose work focuses on cases of domestic violence and/or stalking.

With regard to the problem of a (possible) escalation of violence, it should be pointed out that the special agents in the field of domestic violence give a prognosis of danger, which takes into account all relevant data on the perpetrator and the overall situation, so that it is possible to attempt a fairly precise assessment of the further development of the situation, and if necessary, deescalating steps are attempted by approaching the (potential) offender and addressing the subject.\textsuperscript{19}

\textsuperscript{18} According to the Freiburg Police Directorate, in 2006 a total of 1,348 interventions because of domestic violence were registered: 379 (28%) in the rural district of Breisgau-Hochschwarzwald, and 969 (72%) in urban Freiburg. In 160 cases (=12%) orders to leave the home were issued but only a part of them were extended by the Office of Public Order.

\textsuperscript{19} Amann, Stürmer
Generally speaking, the cooperation with the police has definitely become easier since the special agents have been employed, because now a regular exchange routine about pending proceedings has been established. As a rule, several times a week the public prosecutors and the police exchange information by phone.

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Developments and Trends: The Example of the Freiburg Public Prosecutor’s Office


10 years of anti-violence legislation in Austria is not only a reason for joy; one does not just celebrate an anniversary but also considers what could be improved and what shortcomings exist. Different to the danger-averting function of the security police, the criminal prosecution system has obviously been at the centre of public criticism increasingly often, and a variety of proposals and measures have been suggested in order to increase its effectiveness.

I agree with my colleague from Germany1 in many respects, and several points she has raised apply to Austria as well, but there are also a number of differences to the situation in Germany. In my opinion, it is important to bear in mind that the judicial system is based on other principles than the work of the police, which is aimed at quick interventions. Public prosecutors and courts have to take into consideration also other aspects than those of averting danger and focusing on the protection of the victim of an offence. In Austria, the judicial system has to observe strict objectivity rules, therefore both the public prosecutors and the courts generally are reluctant to show too much sympathy with one of the two parties in a lawsuit.

I regard it as essential to recognise that criminal prosecution plays a key role in the field of protection from violence: the point is to ensure that offences are prosecuted effectively and reliably, always taking into consideration the rights of victims. However, it is also a fact that situations such as investigating the reasons for the behaviour of victims, which may in part be inconsistent, cannot be influenced by criminal justice, or to a small extent only.

Why do witnesses refuse to give evidence in the course of proceedings? This might be because of pressure by partners, the pressure of financial difficulties, a certain background of immigration that may have consequences regarding aliens’ police measures – and makes it difficult to obtain convictions, or clear results.

Therefore, the focus of our endeavours has been to clearly define the different roles in criminal proceedings and to ensure that victims are adequately supported so that they do not only know their rights but may also assert them. In this regard it has been a great step forward that as of 1 January 2006, victims have been granted the statutory right to psychosocial and legal court assistance. Under the Act on the Reform of Criminal Proceedings, since 1 January 2008 this type of legal counselling and representation by lawyers during criminal proceedings has been based on an entire package of victim’s rights, which most of all underlines the fact that not only the defendant is in the focus

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1 Public Prosecutor Heidi Winterer
of criminal proceedings but that also the person, the woman, who has suffered because of a criminal act, has a defined status and plays a key role as a party to the lawsuit.

This also includes special information rights and rights to file applications, and in particular, that she may submit motions for the admission of evidence with the prosecuting authorities during pretrial investigations. In order to be able to use these rights in practice, victims are granted special rights regarding appeals and complaints, including the right to apply to have judgement set aside if motions for the admission of evidence have been denied and the perpetrator has been acquitted.

What do we aim at when granting such rights?

One aim is to achieve that an essential principle of proceedings, i.e., taking victims’ concerns seriously, also has effects on the actual results of proceedings. In addition, it should be ensured that victims do not have to turn to the authorities in order to obtain information but that on the contrary, the police, public prosecutors and courts are obliged to contact the victim proactively, to inform her about her rights in the context of proceedings as well as about the progress of proceedings and to take care that the corresponding counselling and assistance services are made available so that all aspects of the victim’s situation may be considered in a more detailed way than this had been possible for public prosecutors and courts in the past.

On the one hand, this function is performed by court assistants, and on the other, victims who have no right to court assistance, as of next year may also get a lawyer through the system of legal aid.

Another recurrent problem in the field of criminal prosecution, which has repeatedly been a subject of public discussion, is the application of diversion. This means that the public prosecutors or courts, instead of carrying on a prosecution, apply the alternative instrument of diversion, provided the defendant is not only ready to admit his guilt but also to contribute his share to the indemnification of the consequences of his deed.

In the context of this debate, in particular the option of out-of-court resolution has been in the focus of criticism, and it has been indicated that alternative instruments are not used to an adequate degree, for instance, provisional termination of proceedings with conditions imposed, e.g., taking part in a perpetrator programme to the extent that has already been described by my colleague from Germany.

Here, one has to take into account that it is indeed desirable to take decisions within a short time and not to prolong matters through all stages of trial, because experience has shown that a longer duration of proceedings also increases the chance that the right to refuse to give statements is used more often. On the other hand, attempts have repeatedly been made to exert influence on the defendant through diversion measures, especially in cases where it was obvious that the relationship between the victim and the perpetrator was not likely to have ended.

Moreover, we always regard the victims’ autonomy as an essential aspect in this field. As a matter of fact, we cannot, and do not, decide on behalf of the victim, i.e., the woman concerned, whether she wants to separate from her partner and whether she actually wants to bear all consequences that will result from a conviction. If we take this question seriously there must be the option that the problem is tackled by means of talking and that the prevention aspects of protection from violence may indeed be pursued also in this way.

Of course, there also is the point of criticism that no specialisation is found in the public prosecution and court structures regarding domestic offences. On the whole, our experience with specialisation has not been very good in the field of public prosecution. Particularly regarding specialisation in sex-
Violent offences, high staff turnover has very often been registered as this specific area also means high levels of stress for the public prosecutors in charge. In Austria, we have a fairly great number of small public prosecutor’s offices where only between five and ten public prosecutors are working. In these cases, a specialisation would be hard to carry out simply because of the small number of actors.\(^2\)

As my colleague from Germany has correctly pointed out, our goal should be to obtain realistic risk assessments by the police officers who have intervened directly on the spot, which are communicated by phone in some cases but are not included in the written reports. We have to endeavour to make it clear that from the view of criminal justice, eviction and barring orders should not be regarded as more lenient measures compared to arrest but that they may in fact be used as additional instruments. What we should aim at is that these different functions are acknowledged and taken seriously also by the actors in the criminal justice system.

Generally speaking, we should seize the opportunity that there are institutions and victims’ protection organisations whose explicit role is to represent the interests of victims, i.e., in a partial way in the positive sense of the word, just as we accept the fact that the defendant has a defending counsel. From the point of view of the judiciary, we should use the services provided by victims’ protection organisations by communicating more information from our field, for instance, why certain cases were concluded by diversion, why proceedings were dismissed or why they resulted in convictions. We should also make better use of the information provided by the intervention centres and other victims’ protection organisations. I think that in particular we should continue the approach to organise contact talks in the individual regions at regular intervals where all stakeholders meet for a direct exchange regarding difficulties and problems that have arisen in individual cases.

As a response to the decision under international law against Austria that was taken by the Committee on the Elimination of Discrimination against Women (CEDAW)\(^3\) a new working group was established that will start to work in December and will make intensive efforts to improve the channels of mutual information and the range of responses by the judicial system.

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\(^2\) However, the Decree on Implementation of the Public Prosecution Act as amended and published in Federal Collection of Statutes BGBI. II No. 396/2007, provides that in public prosecutor’s offices with at least ten planned permanent public prosecutor’s positions, the head of the public prosecutor’s office shall assign to one or several specially trained public prosecutors those proceedings that are initiated because of violence in close social relationships (domestic violence, violence against children).

Effective work with violent men cannot be carried out in the form of isolated programmes but has to be implemented across various levels of the social system. Only in this way may a consequent and consistent response to violence be ensured. The integration of training programmes for violent men in an intervention system may be a decisive factor in the process of change.¹ The cooperation between the Men’s Counselling Service of Vienna, the Domestic Abuse Intervention Centre Vienna and the referring institutions is a good example of such an intervention system. Taking coordinated legal, social education and therapeutic measures in order to provide support to victims and work with perpetrators with the aim to prevent future violence has become an international standard that ensures protection and safety for victims of violence.

The Vienna training programme covers three fields:
- training (Men’s Counselling Service)
- support for partners of violent men (Intervention Centre)
- coordination and links between agencies involved.

The training programme for men is based on Scotland’s CHANGE programme for violent men.² It corresponds to international programme standards and has been adapted to meet specific needs regarding the situation in Vienna. Its aim is to stop immediately and sustainably violent patterns of behaviour on the part of men and also to improve their social competence towards equality in relationships and responsible parenthood. Violence is regarded as behaviour acquired in order to exercise power and control. The corresponding patterns of behaviour are challenged and other competencies are communicated to the men concerned so that they will no longer need to resort to this traditional patriarchal resource, because they have learned numerous forms of alternative behaviour that are oriented towards deescalation in situations of conflict. Violent behaviour, as we define it, includes not only those forms of behaviour that constitute criminal acts, such as physical violence and dangerous threats, but also the patterns of behaviour that Pence and Paymar have summarised in their Wheel of Power and Control.³ Our concept of violence also includes intimidation, emotional, sexual and economy abuse as well as isolation, use of children and use of male privilege. These individual forms of violence may be found in different combinations and they are interrelated.

The support programme for partners is based on the social education approach of the Duluth Model⁴ and provides consultancy and assistance to partners of violent men. The history of the violence committed is documented and a safety plan is drawn up. In addition, the partners receive information on the training programme for perpetrators as well as consultancy and support in legal and social welfare matters and also counselling in situations of crisis. The Intervention Centre will continue the services it

¹ Gondolf
² Morran/Wilson
³ Pence/Paymar
⁴ Pence/Paymar
provides to partners also if the violent man ceases to attend the training programme or if he is excluded from the programme because of massive violations of the rules that have been agreed upon.

Apart from interventions targeting perpetrators and support for victims, another central task of the training programme is to coordinate measures to prevent violence. In cooperation with other institutions, in particular the police, the Youth and Family Offices, public prosecutors and courts, measures aimed at preventing further violence are coordinated. It has shown that obligations imposed by courts enhance the motivation of violent men to analyse their violent behaviour.

Below I will describe the cooperation between the Men’s Counselling Service of Vienna and the Domestic Abuse Intervention Centre Vienna by outlining the procedure of the training programme to stop violent behaviour in relationships.

If a violent man makes a phone call to the Men’s Counselling Service, they will ask him for the reason for his call, and in the case of violence in his partnership an appointment for an initial session with the counsellors in charge is made.

First session

The first session focuses on three aspects:
- getting into contact and building rapport with the violent man;
- obtaining information on the referring institution. According to first-session information by clients, approximately 35% turns to the counselling service voluntarily, another 35% is referred to counselling by the Youth and Family Offices and 30% by a court. However, these percentages are not absolutely correct because the share of men referred to counselling by courts is higher eventually. The reason for this is that the status of men may change during the training. Many violent men come while criminal proceedings are pending. In these cases the Intervention Centre and the Men’s Counselling Service attempt to arrange a subsequent court referral to the training because experience has shown that this increases the motivation of men to take part in the training and reduces the drop-out rate;
- providing information on the contents, procedures, setting and duration of the training and answering questions.

If the client accepts the conditions of the programme (e.g., no resort to any violence, regular attendance at sessions) he has to sign a written consent statement. This is a requirement for the next stage.

The clearing stage

The clearing stage, which takes approximately one month, primarily serves the purpose to obtain information:
- data regarding the background and personal situation of the man
- information by the referring agency
- police documentation of eviction orders if issued
- information about pending proceedings where applicable.

The completed case file is e-mailed to the Intervention Centre. The referring agency is informed about the current state of affairs. The referring institutions of the court system include:
- district courts
Regarding public prosecutors, two types of referral exist:
- direct referral to the Men’s Counselling Service of violent offenders
- indirect referral via agencies in charge of out-of-court settlement or on the basis of probation measures.

Direct referrals by public prosecutors in the context of diversion have not turned out to be feasible, because the prosecutors usually do not see the man in person and therefore cannot form an opinion on whether he is actually eligible for and motivated to attend the training programme. The following referral procedure has proven its practical worth: the Public Prosecutor informs the Men’s Counselling Service that they intend to take diversion measures in a specific case. Then the Men’s Counselling Service invites the man to make an appointment for legal counselling and examination of the situation. Eventually, the counsellors inform the Public Prosecutor whether the man has been admitted to the training programme or not.

This two-step mode of referral is also practiced in cooperation with the Youth and Family Offices of Vienna. They inform us beforehand by sending a fax with the corresponding record and at the same time impose the requirement that the man concerned has to contact the Men’s Counselling Service, which in turn informs the Youth and Family Offices about the first session and the result of the clearing stage. Only then is the client admitted to the training programme.

A counsellor of the Intervention Centre contacts the partner of the violent man and asks her to make an appointment for a talk. In the ideal case, three persons are present on this occasion: the counsellor of the Intervention Centre, a representative of the Men’s Counselling Service and the woman concerned, who is informed about the following themes:
- contents and procedure of the training
- safety questions.

In addition she is asked to give a statement from her point of view on the violent behaviour of the man.

**Diagnostic assessment**

At the end of the first session an appointment is made with the man for the purpose of diagnostic assessment.

This takes about two hours and includes a structured interview and completion of a number of psychometric questionnaires covering different fields that are important for the training (personality, forms of violence, personal history of violence, attitude towards violence and readiness to assume responsibility, drinking problems, specific situation in life, motivation for the training, etc.). Many of the instruments used are applied again after the training programme, in the context of internal evaluation. The data gathered are confidential and form the basis of
- risk prognosis and danger assessment
- assessment of violent tendencies
- eligibility for groupwork
- internal research and evaluation of the programme.
At the team meetings, which take place every two weeks, representatives of the Intervention Centre and the Men’s Counselling Service exchange information and decide on admission to the training programme. This ends the clearing stage, and the man in question will start the regular training programme. The referring institutions are informed of this step.

The training stage

The training stage extends over a minimum period of eight months but may also last up to 10 months, because of holidays, illness or unforeseeable job-related reasons that prevent the client from attending the training sessions. For completing the training, a minimum of 30 sessions are obligatory. The preferred setting is groupwork. The sessions are headed by a woman and a man. If a client cannot attend group sessions, for instance, because he is a shift worker or because of insufficient knowledge of German, individual sessions are organised. As far as contents are concerned, we use an adapted form of the CHANGE curriculum. This is a pro-feminist, cognitive-behavioural curriculum in which psychodynamic techniques and a number of additional subject modules have been included. It comprises four large fields:

- taking responsibility for the violence committed
- strategies for dealing with irritation, anger and rage
- communication of knowhow on male socialisation and its consequences
- enhancing social competence.

Taking responsibility
Taking responsibility for the violence one has committed is a necessary prerequisite for changing one’s behaviour. The men attending the programme must realise that it was not their partners who provoked the violent acts they had committed but that they themselves had intentionally and deliberately used violence, and that there would have been alternative ways of acting in the situation in question that would have been more adequate. The entire training aims to make men take responsibility for their violent behaviour. This is pursued on the one hand by a critical discussion of the typical strategies of perpetrators (denial, downplaying the violence, blaming others, loss of control) and on the other, by building and enhancing empathy and understanding with regard to the consequences that violence has for the victims.

Dealing with irritation, anger and rage
It is explained to the participants that aggression develops along a continuum from mild irritation to massive rage. Physical, emotional and cognitive cues in the process of escalation are identified for each individual man. He should become aware of these early warning signals in real-life situations in order to be able to take deescalating steps in due time. In addition, together with the men a list is drawn up of situations and times in which they will most likely have difficulties controlling their emotions. The individual steps of time-out techniques are taught and trained.

Male socialisation
The development from child to man is discussed with regard to personal experience of the man in question, and male gender stereotypes are challenged. Looking at their own experience, the men are made aware of the key role that dominance, power and control have played in their own lives and what consequences this has had for their feelings and relationships. Control patterns of behaviour, as illustrated in the Wheel of Power and Control are assessed critically and compared to behaviour oriented towards equality.

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5 Morran/ Wilson
6 Pence/ Paymar
**Enhancing social competence**
Communication techniques are taught and practiced systematically. The men are encouraged to express their feelings in a non-threatening way and to use ‘I’ messages. Stages of conflict escalation are presented and individual ways of solutions are discussed.

Complementing modules:
- drinking and violence
- the family of origin
- children and violence
- enhanced conflict management
- sexuality and violence
- relapse prevention.

The weekly report to the Intervention Centre on the training progress of the man in question include the following aspects:
- attendance at sessions
- any violent behaviour
- any significant change in the man’s situation in life
- any threats or safety risks for the partner and/or her children
- themes of sessions
- dropping out of the programme
- announcement of completion of the programme in the near future.

Between reports, phone calls regarding case management are made. The partners of the men are invited to take part in monthly sessions at the Intervention Centre.

**Completion of training**

After 30 sessions, a final diagnosis is made for each participant who has taken part. At the same time a talk between the man’s partner and her counsellor at the Intervention Centre is scheduled. After analysing the man’s and the woman’s questionnaires a final talk between the couple and the counsellors of the Intervention Centre and the Men’s Counselling Service takes place in order to
- look at what has been achieved so far and discuss the present situation;
- analyse possible safety risks regarding actual or potential risk factors.

All institutions involved are informed of the completion of the programme. A continuation is possible for men who are interested in further sessions. In addition, it is ensured that further support services for the partner are provided by the Intervention Centre. After three and six months, respectively, the man is again contacted by phone for a check of the current situation in the relationship.

This type of case management requires much time and effort. When designing and implementing training programmes for men who have committed domestic violence, it has to be taken into account also what consequences the man’s participation in such a programme will have for the safety of the woman concerned. On the other hand, it is justified to spend this time and effort, if only for the fact that without an intervention, the strategies of violent men (denial, playing down, blaming others and justifying the violence), and thus violent patterns of behaviour, are likely to be continued.
Selected statistical data

In order to characterise the group of men (n= 250) who have taken part in the training programme, a number of statistical data are presented that were collected at the clearing stage.

The average age of men was 36 years, ranging from 19 years to retirement age.

42% of men tested with regard to eligibility for the training programme lived in the same household as their partners and children, and 21% lived with a partner but without children. Almost one out of four of men (23%) lived alone. The remaining 14% either lived with their parents, shared flats with others or were homeless.

Job situation

Half of the men interviewed had full-time jobs, six percent was undergoing education or training, was retired or did not specify their job situation. Seven percent had part-time jobs, and 36% were out of work. Compared to the general population, the share of unemployed people is very high, which indicates that a considerable share of violent men is living in an unstable financial situation.

Debts

Less than one out of three men (29%) had no debts, while 22% had debts up to 7 900 euros, and as many as 12% had debts amounting to more than 29 069 euros. In the case of 7% the debts were above 58 140 euros. Even under conditions of full-time work, debts to such an extent are a considerable problem.
Violence in the family of origin
More than half of the men participating in the programme (59%) had experienced violence by a close person during childhood. This violence ranged from an allegedly ‘healthy’ slap in the face to 15 fractures of the bridge of the nose by the father. These figures confirm that violence is passed on over generations and they underline the need to address this issue in the training programme.

Violence in public
More than half of the men participating in the programme are family offenders, i.e., they committed violence only in the domestic sphere. Still, a considerable percentage of men (44%) admits to have used violence also in public. The anti-social potential of many participants in the training is also reflected by previous convictions.

References


AWARENESS RAISING AND PREVENTION OF DOMESTIC VIOLENCE
Why is it critical that men and boys embrace the tasks of promoting gender equality and ending violence against women? And perhaps just as importantly, how can we work more effectively to ensure that men and boys do embrace this challenge? This short paper will focus on the first of these questions.

For the past two-and-a-half decades, a small but now rapidly-growing number of men and women around the world have been working to find answers to precisely these questions. In one sense, these seem to be obvious questions: if males comprise half the population and, what is more, still maintain unequal positions of social, economic and political power, then surely men must be mobilised if we are going to achieve our goals of equality and equity, including an end to all forms of violence against women.

Yet, until the past few years, these issues have been largely absent from the discussions and strategies of women’s organisations, NGOs, the United Nations, and governments. This absence is both a reflection of the nature of the problem and a reflection of who has led these struggles. After all, part of the feminist project is to stop the monopoly that men have had over social discourse, culture, and decision-making: as a result, the project of a gender-equitable world has focused on developing women’s voices and has focused on meeting women’s needs. For another thing, far too many men either remained opposed or indifferent to these issues. Even those many men who have been sympathetic to women’s struggles have tended to see these issues as primarily about women and not a matter that they should be using their own energy, time, and resources to address. For many women, including those who were working in difficult environments for women or with women-survivors of violence, this hostility (among some men) or indifference (among others) seemed to confirm their worst suspicions about men and their capacity to change. Meanwhile, many women’s organisations and others were rightly worried that scarce resources devoted to these issues be deflected.

In a sense, all these roadblocks and issues actually answer the first question I posed above. The continued societal power of men (and, along with that, the tenacious structures of unequal gender relations and our assumptions about men and women) are the reasons why it is critical to engage men in a project of promoting equality. This is true whether we want to engage male lawmakers to enact more progressive legislation or engage police and judges to make sure the legislation is administered properly; this is true if we want opinion-makers in communities, such as religious officials, to advocate more just and equal relations; this is true if we want men to engage in safer sexual practices to help reduce the spread of HIV/AIDS; this is true if we want men taking on much more responsibilities in the home – a task which is not only important for the liberation of women but important for the lives of our children; this is true if we want those with disproportionate control of wealth, including government budgets, to devote more resources to meet the needs of women and girls. And those are but a few examples.
It is for reasons such as these that, increasingly, NGOs, national governments, women’s organisations, and UN agencies – which, as noted above, previously either discounted or ignored the importance of engaging men and boys to promote gender equality – have come to the conclusion that such engagement is critical if we are to achieve gender equality and to reduce violence against women in an effective way. Our ability to meet these goals resides not only in a continuation and extension of existing strategies, but the addition of new strategies to address and involve men and boys. They have come to this conclusion based neither on wishful thinking nor ideology, but by observing that however important existing strategies have been, they have not been sufficient.

This conclusion represents a very important development. In some ways it represents a logical growth out of forty years of women’s struggles; in other ways, it represents a new direction, one that for many years seemed counter-intuitive and met much resistance.

Such a conclusion is consistent with arguments that I and others have advanced over the years. We have suggested that there are serious consequences in not addressing and involving men and boys in our efforts:

- It fails to acknowledge men’s roles as gatekeepers of the gender status quo and their capacity to thwart, ignore, or merely pay lip service to the efforts of women. We must ensure that goals of gender equality and ending violence against women become part of the political, cultural, legal, and economic mainstream.
- By thinking we can ignore men, we de facto perpetuate the assumption that gender issues are only about women and women’s experiences; this effectively marginalises women and women’s struggles.
- Leaving out men limits us from getting to some of the underlying structures and dynamics involved in the oppression of women. This is because gender power is a dynamic relation between the sexes and among each sex. Programmes to empower women and girls are indeed critical, but face limits if we are not also reshaping the world of men’s power and men’s experiences of that power.

On the other hand, by addressing and involving men and boys to challenge gender inequality and work to end violence against women, we potentially accomplish a number of things:

- We can develop a wide-scale social consensus on these issues. By doing so we can potentially mobilise much greater resources to meet the needs of women and girls. In other words, the concern that engaging men in these issues will take resources away from meeting the needs of women and girls is a serious concern but also based on an incomplete argument. Money spent on a programme to raise awareness among men and boys about the problem of violence against women or the dangers of unsafe sex might be money spent on men and boys but it is money that is being spent to meet the needs of women and girls.
- It helps us isolate those men who are working to preserve men’s power.
- It helps us raise the next generation of boys and girls in a gender-equitable framework.
- By changing attitudes and behaviours among men and boys, it immediately improves the lives of women and girls in the home, workplace, school, and community.
- We may gain new insights into the complex workings of gender systems.

New directions require the development of analytical frameworks that allows us to understand a series of new challenges. Including men within a gender discourse and hoping to find ways to enlist men and boys in supporting struggles for gender equality and ending gender-based violence (in all its forms) requires an understanding of complex and often contradictory forces. The most obvious of such contradictory forces are those which might explain why men, that is, members of the half of humanity with relative power and privilege, might support changes that will actually undermine that power. Over the years, I have suggested that a possible basis for an understanding of these complex forces shaping the lives of men and boys is what I have referred to as ‘men’s contradictory experiences of power.’
Whatever this new and emergent framework may be, its origins lie in the accumulated wisdom, impact and transformative power of the women’s movement and women’s NGOs throughout the world.

We now have an increasingly rich body of literature that explores these new conceptual frameworks. We also have a range of programmes all over the world, a number of which have undergone independent evaluations, that show that we can effectively work with men and boys.

Whether it is the White Ribbon Campaign, (a decentralised effort which has spread from Canada to 57 countries and represents the most extensive effort in the world to challenge men and boys to examine their own attitudes and behaviour and to speak out against violence against women), or whether it is the rich array of local, national, or regional organisations focused on engaging men in the prevention of the spread of HIV/AIDS, or efforts to transform the role of fathers, or whether it is new partnerships with women’s organisations, or emerging international networks, such as Men Engage, the development of these programmes represents a major and long-awaited step towards the creation of greater gender justice and greatly reducing levels of gender-based violence.

References


The Zero Tolerance Charitable Trust is an independent national organisation that campaigns for the prevention of male violence against women and children. The Trust has a particular focus on primary prevention initiatives including public awareness-raising campaigns. We work in partnership with a range of organisations to promote innovative policy and practice that tackle the root causes of male violence and aim to prevent violence in the first place.

The first Zero Tolerance campaign was launched in 1992 by the Edinburgh City Council and this was a major step forward, placing responsibility for influencing public attitudes and behaviour with major social and political institutions.

The Zero Tolerance campaign was prompted by a local survey which showed that violence against women was a priority issue for women in the city. This led to a small local research study in three secondary schools with young people aged 12 to 16 years. The research looked at young people’s knowledge and attitudes to violence against women and found that:

- boys, some as young as 12 years old, found violence against women more acceptable than the girls did;
- both boys and girls found violence more acceptable if the perpetrator was married to the victim;
- the majority of young people interviewed expressed some likelihood of using violence in their future relationships.

Following the research, the local municipality decided to run a high-profile campaign to raise public awareness and challenge attitudes on the issue.

All Zero Tolerance campaigns and initiatives adhere to a set of guiding principles.

- Highlight the links between the different forms of violence.
- Target everybody, not just perpetrators.
- Do not use images of ‘victims’ e.g. women bruised or cowering.
- Adopt a gender-specific perspective, recognising that women and children are usually the victims and that men and boys are usually the perpetrators.
- Aim to dispel myths and challenge attitudes.
- Stress the importance of long-term public awareness as key to any strategy which aims to prevent male violence.

In the main we have used the same format – bold black and white format, the Z logo, attractive and comforting photographs with challenging text and strap line.
Consultation with relevant organisations and particularly front-line NGOs has been an important part of campaign strategies. A range of organisations are involved in the consultation process through local multi-agency groups. These usually include the police, trade unions, NGOs, social services, health, education and youth services. Campaigns use outdoor advertising, mass poster distribution and partnership initiatives to give the issues as high a profile and as much impact as possible.

We have also launched national and regional campaigns and produced tailored materials for specific initiatives and local campaigns. As campaigns take place locally, implementation and activities vary depending on local circumstances and knowledge.

To date there have been five different campaigns:
- Prevalence: aimed at the general public. Materials questioned public knowledge about different forms of abuse and explicitly named and connected these as male violence against women and children.
- Excuses: aimed at the general public. Materials debunked some of the myths and stereotypes regularly promoted in the public domain.
- Justice: aimed at the general public and those involved in the criminal justice system. This campaign specifically called for reform of the criminal justice system particularly in relation to rape and sexual assault with a postcard initiative presented to the Government.
- Respect – consent in sexual relationships: designed for use with young people aged from 12 to 18 years.
- Respect: aimed at young people and dealing with a range of issues such as sexism, racism, homophobia, citizenship. This campaign was located in the public domain, and particularly visible in local communities where schools were addressing the issues.

The initial Prevalence campaign comprised four posters, which showed the nature and extent of male violence. The posters addressed the different forms of violence but used the unifying slogan, ‘Male abuse of power is a crime’.

The first poster deals with domestic violence and challenges the widely accepted myth that violence only occurs in working-class, poor households. The poster shows a woman sitting comfortably and relaxed in front of a fireplace in a very attractive sitting room. The text reads, ‘She lives with a successful businessman, loving father and respected member of the community. Last week he hospitalised her’. The poster also identifies emotional and sexual abuse as forms of domestic abuse.

The final execution links the different messages in the powerful statement, ‘No man has the right’. It is still highly contentious even after 15 years. This challenging message about rights and responsibilities created huge debate in workplaces, public and social spaces and in the media.

Partnerships with the local and national media were a key component in the success of the first campaign and have been used in all subsequent campaigning. Feature articles provide further information about these complex issues and campaign messages including helpline numbers and support services. Posters are useful for communicating simple ideas that require to be expanded through newspapers, magazines, public debates, discussions etc. Posters were distributed widely and a lively exchange of views resulted in letters pages of the press. Zero Tolerance has sustained a high media profile for the last 15 years – helping to keep the issues on the political and public agenda.

It is clear that public education is not enough to tackle male violence and the campaign has adopted a three-pronged approach to highlight the key areas for any strategy: 3Ps, which have now been used by the Scottish government, and further afield.
Prevention: active prevention of crimes of male violence
Provision: adequate provision of a range of quality support services
Protection: appropriate legal protection.

The initial prevalence campaign was taken up by about half of the municipalities in Scotland – which means exposure to about three million people living in central and eastern Scotland. Just two years ago we launched the first campaign in the Highland region of north-west Scotland, which addressed the key issues in a rural environment. The first poster dealt with the hidden nature of domestic violence and the common reluctance to interfere with what is still viewed as a domestic and private matter. The poster featured a window with closed curtains and the text ‘Unseen Unheard Unspoken’.

Following the initial success of the prevalence campaign we launched the Excuses campaign. It directly challenged the excuses used by men to avoid responsibility for their actions – love, alcohol, weather, social expectation. The final slogan ‘There is never an excuse’ again provided an unequivocal statement about the issue and questioned the common myths.

The ZT publicity campaigns have acted as catalysts for community participation around the issues. Young people in particular request information for school projects, college and university dissertations. Theatre projects and youth conferences have been run in schools and community settings. Local NGOs have been formed in a number of areas to respond to the demands for support and action. These groups have lobbied local politicians for better services and continued work on the subject as well as assisting in distributing campaign materials.

Local football, rugby and basketball teams pledged their support for local campaigns and in some cases provided free advertising at games. Radio campaigns have been used very successfully in local areas, usually in partnership with radio stations that will champion the cause for a period of time and give free airplay for discussion and phone-ins.

ZT clearly caught the public imagination and engendered a sense of ownership and pride in talking about what had been a very hidden and private issue. We saw young people wearing T-shirts and caps with the Z logo or slogans, politicians and broadcasters wore the Z pins, local people organised information stalls, venues had events and exhibitions and these all created public debate and discussion. The ZT brand became huge, and public recognition, like that for the red AIDS ribbon and the more recent white ribbon campaign, assisted not only in changing general attitudes but also influenced professionals to see violence against women as an area of their responsibility. We then had doctors, nurses, police officers, teachers and employers asking how they should be responding to the issue and this opened the way for the development of protocols, guidance and training.

At an informal level ZT campaigns have received widespread interest and support from all sectors of the community. Campaigns also generally result in an increase in women seeking advice and assistance. The campaign therefore has helped to argue for, and justify, the growth in services for women and children experiencing abuse.

Many local campaigns have been formally evaluated using street surveys and focus groups. In particular, people like the fact that the campaign challenges everyone rather than solely targeting those who are victims of perpetrators, and welcome the lead role taken by public agencies. In most evaluations those expressing negative statements are about 6% and these in the main are men over 50 years.

The Justice campaign aimed to raise awareness about the failure to deliver equality and justice and set a framework within which local organisations and campaign groups could bring forward specific demands.
The first poster focused on the issue of rape and sexual violence. It featured a very attractive, assertive looking young woman with the text ‘Her boss raped her at knifepoint. In court she was asked if she found him attractive’, and a slogan that reflects the reality for 90% of men prosecuted for rape in Scotland, ‘Too many rape cases end with the same sentence: you’re free to go’.

The final poster, featuring a Scottish judge, sums up the net result of the way crimes of violence are viewed and dealt with, and calls for action, ‘End the male protection racket’.

It is clear that a change of the criminal justice system will not be brought about in the short run but the Justice campaign has begun to raise awareness around some of the underlying issues and attitudes that require to be addressed to begin the process of change. The Trust is committed to continue lobbying in this area.

In 1998 the Trust, in partnership with three UK local authorities, commissioned a major study of the views of 2,039 children and young people, 14–21 years of age, living in Glasgow, Fife and Manchester. The study comprised both quantitative and qualitative elements and found that:

- 1 in 2 boys and 1 in 3 girls thought that there were circumstances when it would be acceptable to hit a woman. The circumstances included if she were his wife or if they had been going out for a long time;
- more than 1 in 2 young people thought that women provoked violence in a range of contexts e.g., by the way they dress;
- over half of all respondents knew someone who had been hit by their male partner and exactly half knew someone who had been sexually abused.

Our first campaign targeting young people tackled the issue of respect and consent in relationships. This limited campaign saw the placement of thought-provoking and challenging posters in toilets in venues used by young people. More general information contained in postcards, bookmarks and mouse pads was also distributed through music shops, sports clubs, cinemas and libraries. A DVD with information and a quiz were also made available to youth workers, teachers etc., to back up the campaign materials. The primary aim was to highlight the need for young people to be considerate and respectful in relationships and to highlight the nature and reality of rape and sexual assaults.

Following this an educational intervention programme which gives young people the opportunity to discuss the issues of respect was planned, designed and piloted in schools in Glasgow and Edinburgh. The Scottish government backed the programme, which allows young people to discuss sensitive issues in a safe and structured environment with trained staff. The Respect curriculum is developed for use with primary school pupils aged 10–12 years, secondary pupils of 12–16 years and for use in informal settings with marginalised and socially excluded young people.

A series of posters to reinforce the message of the programme were designed, which are for use within a school and/or a community. The programme is now mainstreamed within many schools across Scotland. This work continues with training being provided for teaching and other staff in order to support their use of the materials.

We are under no illusions here. Zero Tolerance primary prevention entails serious long-term work on a number of different fronts. In particular myths and stereotypes continue to be entrenched, highlighting the need for education work. However in the past 15 years, ZT has succeeded in achieving many of its stated aims, namely:

- to raise public awareness and generate debate;
- to begin to dispel myths and stereotypes;
- to challenge men and empower women;
- to give a clear message that no level of violence is acceptable;
- to influence policy and practice at local and national levels;
- to succeed in breaking the silence and stigma surrounding the issues of domestic violence, rape and sexual assault as well as child sexual abuse.

I hope that I have shown the role that the Zero Tolerance campaigns have played in addressing the global issue of violence against women within a Scottish context. I particularly want to underline the need for a comprehensive and integrated strategy to be in place and one which:
- recognises that national and local governments can and should take leading roles in the elimination of male violence;
- acknowledges that male violence is a ‘social problem’ which is linked to social structures, values and attitudes;
- recognises that all forms of violence against women are connected, have the same underlying causes and are implicated in the continuation of women’s inequality;
- argues that these are not simply individual experiences of victimisation;
- makes clear that victims must not be blamed for the violence they suffer;
- ensures that perpetrators must be held accountable for the violence which they inflict.

A key challenge for us now is to address the issue of commercial sexual exploitation and the impact which a burgeoning sex industry has on women’s equality. There is a major contradiction in tackling some forms of male violence and abuse which continue to impact on gender equality whilst tolerating an exploitative sex industry which is predicated on men’s entitlement to sex at the expense of women’s health, dignity and safety.
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