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**BROCHURE**

# **MULTI-DISCIPLINARY TRAINING OF PROFESSIONALS TO PROTECT THE RIGHTS OF WOMEN-VICTIMS OF CRIME**

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## Foreword

Each year plenty of women become victims of crimes. Apart from violating public order, a crime violates the victim's physical and psychological integrity and may damage the person's self-esteem and trust in others.

Professional, empathetic communication, and full acknowledgment of the impact of trauma are crucial aspects that must be fully understood by specialists who come into direct contact with victims. Service providers that assist victims must have the appropriate knowledge and skills to protect a victim's rights, particularly in the criminal case against the offender.

In this publication information is presented about the relevance of multi-disciplinary training of specialists that have legal, social, and psychological professional background and what are the most relevant topics that should be addressed. At the end of the event, participants should be able to define various forms of violence against women, to understand their sensitivities and the sensitivities of the topic, and to broadly outline justice system responses to violence against women.

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# 1. The role of multi-disciplinary education and collaboration of professionals

A multi-disciplinary approach is a useful way to share best practices and lessons learned, to exchange experience regarding available assistance for women-victims of crime. It has a greater contribution in strengthening the capacity of relevant professionals that come into direct contact with victims, such as police officers, prosecutors, judges, lawyers, social workers, psychologists, doctors, nurses etc.

Multi-disciplinary collaboration encompasses the appropriate sharing of information and integrated thinking to enable comprehensive risk assessment and consideration of all matters pertaining to a victim's wellbeing. This can take the form of referrals, formal reporting mechanisms, case conferences, information sharing based on concrete cases.

In practice, it is necessary to have a better integrated response to ensure the full protection of women-victims' rights in the judicial proceedings and beyond. In order to achieve this, it is important to ensure access to an appropriate multi-disciplinary ongoing learning process concerning legal, social, and health professionals that are in fact key-players in a systemic response to protect and assist women-victims. Currently there is a pressing need, and a requirement at EU level, for specialists to be capable to fully understand a victim's needs, assess them individually, and treat her with empathy, avoiding re-victimization. Through ongoing training, they must be able to understand their roles and obligations in the process of supporting victims, as well as the ways, means, and mechanisms to co-operate with each other.

Moreover, multi-disciplinary events are aimed at overcoming phenomena like formalistic, over-professionalised attitudes among experts, failing to recognise the numerous ways in which a crime affects a victim and his/her surroundings. If each professional group treats victims only within the parameters of their sphere, victims' needs will be hardly understood and severely underserved. No assessment should be done on its own without taking into account the viewpoint of other professionals, who treat, have treated or should have treated the victim.



## 2. Curriculum Outline

A multi-disciplinary event for legal, social, and health professionals approaching topics such as empathic communication with victims in the criminal and civil procedures, trauma and its consequences for the victim's direct involvement as an injured party in the trial, the relevance of forensic and psychological reports in assessing the sufferings and the importance of these reports as evidences in the criminal trial, the optimal functioning of the referral procedures in order for victims to receive assistance in accordance with their needs, the burnout syndrome concerning professionals that work with victims. Lecturers should be accompanied by complex interactive debates on cases, on the challenges encountered in practice when assisting victims that have different cultural/educational/ethnic backgrounds.

Good practices from different countries should be given as examples and ways to adapt them to the specific country context may be discussed.

Selecting a proper team of trainers is an especially important component of the organisation of a session. A multidisciplinary team may be formed of trainers from all backgrounds from which participants come so that they may 'hear from' all professions involved in victim care and identify with their experiences. In a smaller trainers' team, or in case of a single trainer, proper coverage of all professional points of view should be ensured for a dynamic interaction among the trainees themselves and between the trainee group and the trainer.

Each section of this chapter contains an overall summary of the content of the topics that should be approached. Speakers, trainers must find ways to encourage and support interactive learning and this can include strategies as posing questions to individuals or to larger groups, asking participants to relate to their experience, create role plays, ask participants to try to explain certain key concepts etc. Case studies should not be based on real examples in a way that may tend to identify specific persons, add to further victimization or embarrass any person involved (professions and/or victim). They should rather blend a number of real cases, as well as hypothetical elements, so that the main educational message is conveyed. Attention should also be paid, when constructing a case study, not to inadvertently suggest a discriminatory setting (e.g. a minority offender against a victim from the majority population).



## 2.1. Icebreaker / Opening exercises

If the people in the workshop do not know each other, the following is a suggested opening activity. A round of presentations should be encouraged to get everyone acquainted. The speaker/trainer should divide participants into groups of 3-4 people. Allow 15 minutes for people to exchange information such as name, profession, interest in the topics of the event and so on. Ask one group to volunteer to be the first and have each person introduce the other person. For example, A would introduce person B, person B would introduce person C and person C would introduce person A. Listen carefully to each introduction and look for opportunities to ask follow-up questions or make short comments on the introductions. It would depend on the group composition how the small groups will be structured, but a multidisciplinary structure, consisting of people from different professions and/or locations (not knowing each other) would be preferable.

Another dynamic proposal to facilitate relaxation and make introduce the participants:

Name of the dynamic: **"To start ... let's get to know each other a little"**

A piece of a sentence containing information or a reflection on gender- based violence is given to each participant. They should search among the other participants and find the person who has the other half of their sentence. When they meet, they introduce themselves and share the stories behind the names their parents gave them, where it comes from, who had chosen it, as they call it. This introduces the theme to be discussed, exposing the existence of different forms of gender- based violence and offering information about it that we will then work on. At the same time it makes it easier for the participants to get to know each other a little, in addition to the reflection that can be done with a gender perspective on the names and surnames (who chooses them, the origin, as in each country the last name is inherited: from the mother, father, if married women use their last name or surname, etc.).

### *Group norms*

The speaker/trainer will introduce the idea of group norms. Group norms are the rules by which the participants want to operate during the workshop. Give one example, such as that any stories told in the room are confidential or that when someone is talking the others

will not interrupt. Ask the group to brainstorm a set of norms. Post the norms and use them during the workshop to keep the group on task and on focus.



## 2. 2. Empathic communication with victims

When approaching this topic, participants will better understand the following issues. Not all victims have the same reactions and needs. Each victim is unique, and there is no reaction that is common to all victims. The response of a person after an abuse varies depending on a number of factors: the person's life before the event, the crime itself, the victim's perception of the institutions they come in contact with, the level of resilience, the level of support she receives from the family or from the circle of acquaintances, the result of investigations / process, etc.

There are certain main aspects that influence the impact on the victim:

- The person: the attributes, the personal characteristics, the personal history, special aspects of the victim's personality, the relationship between the victim and the person who committed the crime.
- The event: where, how, when the crime occurred, if it happened only once or repeatedly, the severity of the crime, if it happened in public or at home, etc.
- Environment: the community and the support system, including the institutions with which the victim interacts. The resources, response, and values of the community in which the victim lives.

The emotions displayed by a victim can signal personal identity (and self-image). The display of a negative emotion (for example - sadness) after being the victim of a crime shows that the traumatic event is inconsistent with that person's identity.

The institutions and the professionals involved should learn to support the victim through actions such as:

- Let the victim decide when and where she wants to talk.
- Listen to the victim's story with patience and respect.
- Actively listen and be aware of the victim's mental state and the messages behind the words she uses to describe situations.
- Express confidence in the victim's ability to tell her story.



- Provide references on trauma and mental health (brochures, contacts)
- Be prepared with basic explanations on how the justice system works and be aware that the victim may feel intimidated or confused by the system and procedures. Explanations should take into account the person's background as well as their educational level. The victim should be encouraged to ask questions and have them answered comprehensively and intelligibly.

- Provide as much information as possible on how an investigation will be conducted using a friendly language, avoiding complex terminology.

- Providing victims with the right information so that we can help them make decisions (making decisions is a very important aspect in regaining control over their lives).

- Provide professionals with knowledge about the "cycle of violence", as well as the manipulation strategies used by aggressors on women. This knowledge explains the psychological damages that aggressors exert in violence and how these damages are the causes of the survivors' difficulties in abandoning the abusive relationship. Participants must acquire the necessary knowledge to be able to explain to women the cycle of violence, as well as to take it into account when accompanying them and understanding their actions, so as not to blame them and not break the rapport they can establish with them.

Objectives of effective communication with victims:

- Identifying the needs of the victims and trying to meet them.
- Explaining the process and the role of the professionals involved.
- Offering support to victims to understand and exercise their rights.
- Protecting the safety of victims.
- Providing information.
- Obtaining information.
- Sensitivity to the needs and particular concerns of the victims.
- Allowing the victim to be accompanied by a person of trust of her choice.

*Key recommendations shall be discussed with participants, such as:*

- Treat all victims with equal respect regardless of their race, nationality, religion, gender, sexual orientation, social status, cultural, educational or other differences.

- The way professionals see the victim; professional roles create conceptions, beliefs and ideas.
- Speak in a language that the victim understands or find an interpreter specialized in such cases.
- Listen carefully and show the victim that she is being heard.
- Ask open-ended questions
- As far as possible, take into account the wishes and needs of the victim.
- Collect feedback (find out whether the wording of questions and the provided information are clear).

To experience empathic communication in the first person and be able to put oneself in the place of survivors of violence in the course of an accompaniment process, we propose some dynamics that can facilitate the emotional connection in an experiential way:

#### Exercise: "Resistances and accompaniment":

The trainer will separate the participants in two groups, one stays inside the classroom and the other group leaves the classroom. Give them separate and secret instructions. Group 1, who stays in the room will be instructed not to move, they want to be there. They will be located at one end of the room. Group 2 will be instructed to do everything possible so that their counterparts in group 1 go to the other end of the room.

The objective of this exercise is to empathize with women's personal processes, as well as invite the self-analysis of our accompaniments as professionals. Do we place women at the centre of their process, or do we re-victimize them? Do we respect the times and diversity? Do we transfer fears and needs that are ours or theirs?

#### "Dynamics of intersectionality"

Taking intersectionality into account is vital when it comes to empathizing with the surviving women. Taking intersectionality into account allows us to broaden the frame of reference and be more aware of the real experiences of women, beyond a mere sum of violent acts: migrant women, women belonging to ethnic minorities, elderly women migrants or minorities, physically or mentally disabled women, young or underage women migrants, or women belonging to ethnic minorities, transsexual women, etc.

## Dynamics of “the privileges”

The participants are placed in a circle in the middle of the room. The prompt is that if the phrase uttered had never happened to them, they take a step forward, and if it had happened on a regular basis, they take a step back.

Here are some examples of phrases for this exercise, but more can be added depending on each context:

1. The police have never stopped me on the street.
2. I have never had a problem renting an apartment.
3. I have never been hung up on when calling to rent an apartment.
4. I have never been asked three times where I am from.
5. They never turn to look at me.
6. I have never been asked if I am a woman.
7. I have never been told to take off my scarves.
8. I have never been told to change my clothes.
9. I have never been insulted by the partner I have.
10. I have never been called by a name that was not mine.
11. I never had to leave a place because I was a woman.
12. I've never had to leave a site because of the colour of my skin.
13. -I've never had big money problems.
14. They never treat me like I don't know anything.
15. I've never had trouble travelling.

## REFLECTION

What impacts the participants the most about how they are now? In which point of the initial circle are they? Why? In the middle will be people who are more "normal" and have been subjected to fewer forms of oppression. The more oppression-related experiences we have, the farther away we will be from what society deems to be „normal". A variation that can be made on this exercise is to give each participant a card of people with different situations and move according to the card they have.



### 2.3. Trauma and its consequences

The speaker/trainer will provide information about what is trauma, frequent traumatic reactions that appear in the case of persons involved in the criminal trial, avoiding re-traumatisation. Psychic trauma consists in a series of consequences of traumatic events and situations. It is necessary to differentiate between the outside – the event and the traumatic situation – and the inside - the trauma, the mind and the mental injury.

Participants will learn about the most frequent traumatic reactions that appear in the case of persons involved in the criminal trial, such as:

- Physiological manifestations: sweating, tremors, facial and / or bodily prickling, modification of voice, hearing, speech, non-expressive gaze, decreasing self-esteem
- Emotional manifestations: fear (terror), helplessness, vulnerability without protection, shame, humiliation, physical and / or emotional pain.
- Cognitive manifestations: confusions, intrusive memories, blocking memories, impaired sensations and perceptions, difficulties in analysing information, errors of judgment, obsessive ideas, incoherent or blocked speech on certain ideas, lies, self-protection thinking strategies.
- Behavioural manifestations: tics, avoidance of stereotypical responses, attachment to certain objects (amulet type), avoidance of places, elements, persons reminiscent of the traumatic situation, rituals, (self-) aggression, inconsistent explanations with regards to bruises/other signs of violence etc.

It is important that participants know how to name and identify the consequences of traumatic reactions, distinguishing between an acute traumatic reaction, which includes the reactions described in the previous section as physiological, referring to the short-term consequences of aggression. Long-term reactions among survivors are disparate; we can never invalidate a victim's testimony because their reactions do not match the typical reactions. The scientific literature includes PTSD (posttraumatic stress disorder) as one of the main diagnoses that include the discomforts generated by violence among surviving women, to which the categories described above would be referred to as cognitive and behavioural manifestations.

Another important aspect that participants must know to be able to make a correct diagnosis of the woman's circumstance, and to be able to perform an effective action, has to do with the need to differentiate between an emergency situation and an urgency situation. All situations of violence against women are urgent, that is, they all pose a serious risk to health, and all situations of violence involve the professional and moral obligation of professionals who are knowledgeable or suspect they may be happening, to act. The way to act will depend on how the violence has been detected, and the women's needs depending on their circumstances, as well as the level of severity.

In this sense it can be distinguished between:

**Emergency:** We understand an emergency situation in which there is a serious physical or psychological injury, and / or a life-threatening situation, either because of such injuries or because of the existence of death threats or any other circumstance (that the aggressor has weapons or has a serious substance abuse or mental health problem, etc.). In this situation, it is paramount to act immediately.

**Urgency:** In general, in order to distinguish between emergency and urgency situations, one criterion is that urgency situations allow the action to be extended beyond a period of 24 hours.

Re-victimization is one of the most commonly considered elements that must be fully understood by professionals that are concerned with improving post-traumatic effects and stopping trauma.

The speaker/trainer will present information about the ways in which one can act in order to limit the aggressive factors and provide support:

- recognize the aggression, especially the one that we can cause ourselves.
- eliminate as much as possible the aggressive traumatic factors - this factor is the most important! It is important for a person to leave the traumatic environment or relationship and reach an environment in which non-violent relationships exist.
- Pay attention to our own aggressive mechanisms (intentional or not). No one is immune to aggression.
- recognize trauma (rupture) and compensatory mechanisms.

- Allow emotions to manifest, accept the emotions until consumed. No emotion lasts forever, there is a beginning and a process of expression until it is complete
- provide fair, appropriate, adequate information.
- Clarify the reality and differentiate between reality and opinion, need desire.
- Develop empathy (and self-empathy) towards emotional pain, even if it is not obvious.
- Pay attention to our own relational mechanisms, when we can become verbally aggressive or unfair, judgmental or physically aggressive - even unintentionally.
- Eliminate toxic or inappropriate relationships from the lives of the people who depend on us and, of course, from our lives.
- Help to redefine, to reconstruct the reality of the victim after the traumatic experience.

It is important that the participants understand the emotional ambivalence of the surviving woman in relation to the aggressor(s), as a habitual behaviour that must be understood as part of the process of overcoming a violent relationship, and that should never be judged in an accompaniment. The strategies of the aggressors are responsible for the emotional ambivalence and the difficulty of women to get out of violent relationships, for example, to understand that survivors can return to the aggressors several times before leaving the relationship as a way to survive violence.

#### 2.4. The relevance of forensic and psychological reports

The trainer will present information about the report contents, in accordance with the specifics of each country's system, and why they are relevant in the criminal trial and in requesting financial compensation for the sufferings endured by the victim.

Legal stakeholders, such as judges and prosecutors, need to be explained, in clear and unambiguous terms, how the injury was produced. The narrative, recounted by the victim, is and *must* remain an important chapter of the report. Any system of justice that remains blind to the subjective horror and helplessness of the victim, how the crime is seen through *her* eyes, will not have achieved its purpose. Medical examiners, on the other hand, have to be instructed to carefully note and document the narrative of the examined person

with minimum interference. It is, furthermore, a standard of consistency in reporting, to match injuries to narrative (and not the other way around), for a higher degree of consistency.

The judiciary need to stay aware of the double nature of violent crimes, in general. On one hand, the physical injury results in suffering, temporary or permanent disability, and the need for medical care and rehabilitation. On the other hand, violent acts, by violent means, with a violent motivation, massively impact the victim's psychology and emotional well-being. Medical reports should include or should be accompanied by a psychological assessment of the victim, as part of a systematic body of evidence in order to help lawyers, prosecutors and judges serve justice in a court of law.

A systematic documentation of the psychological consequences experienced by victims of violence and violent crime should be the standard in the instrumentation of legal cases. Ethical evaluation and reporting guidelines are similar to the general principles of forensic evaluation. What is unique to psychiatric and psychological forensic reports is that, more often than not they rely on repeated observations and evaluations.

In the assessment of such reports, legal stakeholders should be guided by various indicators of severity and intensity. The *de novo* onset of any psychiatric disorder in the aftermath of trauma is an indicator of its severity. Proper documentation and treatment of any such condition should be plainly stated and explained in the report. Legal stakeholders have to be aware that it is often difficult to ascertain the victim's mental health state before the examined events. That being said, this may be extrapolated from lack of prior psychiatric diagnoses in medical records, the level of psycho-social functioning, professional and personal biography. After surviving a violent assault, any such change in the victim's behaviour is an indicator of temporal succession between adverse event, and onset of a psychiatric illness.



## 2.5. Referral procedures

The speaker/trainer will present information about the relevant phases that should be undergone in practice when authorities and organizations are involved in the referral procedure concerning the victims' assistance. Information should be provided and jointly debated with participants on each phase of the referral process.

- Identification of the victims' needs through a complex screening that should be made based on a set of questions and indicators. A process that should be performed from the very-first contact with relevant stakeholders. The different points through which the victim may 'enter' the criminal justice and victim support system may be discussed – medical, social, criminal justice authorities, NGOs – as well as the functions and responsibilities of each entity. Formal, in accordance with the country's legal system, and informal/practical identification may be differentiated.

- Comprehensive information about the available assistance and who should provide it / through which means. Each entity should be very much aware of its role and responsibilities to ensure that the victim is not 'bounced' between different entities, thus contributing to her further victimisation.

- Stakeholders exchanging information on the case, respecting confidentiality rules. Regulation of digital and non-digital means of exchanging information.

- The elaboration of the individual long-term assistance plan, terms for its amendment and stages/timelines for its update.

- Monitoring and evaluation of the assistance provided by the initial entity and by the one to which the victim was referred (who has the competence, and through which means).

- The multiple forms and stages which a referral may have: from an institution to an NGO and vice versa, multiple referrals to different services for different needs; the feasibility and importance of having a 'one stop shop' type of victim service.

- It is important that the participants be aware that, whenever a woman needs support, her consent is necessary, unless she is in a risk situation and we must act to protect her against her will.

At the end of debating this topic, participants will be able to identify resources in the local community to assist victims, understand the role of their institution in relation to other agencies and organizations, expand the resources they use to assist women-victims of crime.





## 2.6. Burnout syndrome, vicarious trauma

Violence against women is a very emotional and sensitive issue. When professionals are working with such cases, thinking and talking about violence, may find that their emotions and energy use up very quickly. It is easy to feel disillusioned when such cases are complex and seemingly impossible to resolve.

Vicarious trauma is the emotional impact of daily work with people suffering from trauma, pain and a significant degree of vulnerability and that involves wear, causing secondary traumatic stress in professionals.

It is important to know how trauma dynamics affect the relationship between the survivor and the professional who attends her. The professional, due to the intense and unpleasant emotions that the trauma can cause in a vicarious way (it is not lived in the first person, but as a witness), can avoid emotional contact with the person, thus fleeing the horror implied by the traumatic situation, distancing him/herself from and abandoning the survivor or taking decisions on her behalf. Our reactions as professionals when faced with someone who has traumatic symptomatology, and more so when we are faced with a Complex Post-Traumatic Stress Disorder, can be rejection, denial, overprotection, etc., and reproduce a power relationship that involves re-traumatization for the victim.

In addition, as professionals who are in constant contact with people with a high level of damage and fragility, we can get Burnout Syndrome.

It is important to exercise self-care and be equipped with care strategies, to avoid burnout syndrome.

Approaching this topic, participants will better understand what it is the burnout syndrome (BOS), how this syndrome manifests, what can be done to overcome it. The speaker will explain the magnitude of the syndrome, how to detect it, what are the individual and organizational risks factors that increase the likelihood of developing BOS.

The burnout syndrome is a work-related constellation of symptoms that usually occur in individuals without any prior history of psychological or psychiatric disorders. BOS is triggered by a discrepancy between the expectations and ideals of the employee and the actual requirements of their position. In the initial stages of BOS, individuals feel emotional stress and increasing job-related disillusionment. Three classic BOS symptoms can be developed: exhaustion, depersonalization, and reduced personal accomplishment. Individuals with BOS may also develop non-specific symptoms including feeling frustrated, angry, fearful, or anxious. They may also express an inability to feel happiness, joy, pleasure,

or contentment. BOS can be associated with physical symptoms including insomnia, muscle tension, headaches, and gastrointestinal problems.

*Participants will learn about the strategies to protect themselves from burnout syndrome, such as:*

- How to reduce stressors in their personal and professional life.
- Reinforce the effort.
- Build self-awareness with regular reviews.
- Prioritize self-care over the work and relationships that are contribute to burn-out.
- Put certain limits to priorities.
- Find support networks.
- Self-care strategies: team supervision, internal promotion in the organizations, specialized and continuous training.



## **2.7. End-of-workshop evaluation**

The purpose of the evaluation is to obtain participants' feedback, which will help the trainers to better meet the needs of future professionals in similar events.

The participants could be asked to assess how relevant was the workshop for their work, if the content of the event met their expectations, how much of the content of the workshop was new for them, if the written materials were sufficient for them to understand the presentations and to take an active part in the discussions, if the teaching methods were sufficient for the learning process, if sufficient time was allocated to lectures, discussions, experience-sharing. In this form, feedback can be anonymous.

Depending on the composition of the audience and the trainers' team, participants may also be asked for legal and policy recommendations on what would improve and facilitate their everyday work. A policy brief may be an important outcome from a training event, to be distributed among legislators and policy makers.

In addition to an anonymous questionnaire, it would be interesting to add a qualitative evaluation through a round of questions at the end of the session.

