



JUST/2015/RDAP/AG/VICT/9318

Towards a victim-centered police response

Training Manual

Vasiliki Artinopoulou
Alexandra Koufouli
Iro Michael



Co-funded by the Rights, Equality
and Citizenship Programme
of the European Union

Towards a victim-centered police response

Training Manual

Vasiliki Artinopoulou

Alexandra Koufouli

Iro Michael

Published by the European Public Law Organization

Copyright © Vasiliki Artinopoulou, Alexandra Koufouli, and Iro Michael 2018

First Published September 2018

All rights reserved. No part of this publication may be reproduced, copied or transmitted in any form or by any means, electronic or mechanical, including photocopy, recording, or any information storage and retrieval system, without permission of the copyright owners. The contents of this publication may be used for educational and other non-commercial purposes, provided that any such usage is accompanied by acknowledgement of the source.

This publication has been produced within the framework of the project “Protasis - Police Training Skills” with the financial support of the Rights, Equality and Citizenship Programme of the European Union, under Grant Agreement Number JUST/2015/RDAP/AG/VICT/9318. The contents of this publication are the sole responsibility of the authors and can in no way be taken to reflect the views of the European Commission.

Printed in Athens, Greece

Preface

During the 21st century Europe faces new challenges which affect the integrity and the values of the European Union to a significant extent. In this context, the European Institutions have been implementing significant and continuous efforts towards strengthening the values of European integration, democracy, and rule of law, which have been transported into policy actions that promote peace and well-being, human dignity, freedom, equality, and respect for human rights. The EU Directives, as binding law, aim at regulating the new areas that call for action in different levels of the social reality and address the long standing and pending problems that EU citizens face.

In the field of justice, the strategy of the European Commission intends to ensure that the European Union protects, reassures, and facilitates the exercise of EU citizens' rights. On these grounds, criminal justice systems within EU should establish a 'common language' to ensure human rights in practice. The European Directive 2012/29/EU establishing minimum standards on the rights, support, and protection of victims of crime (hereinafter referred to as the Victims' Directive) reflects not only the voices and long-standing need of the victims to be heard and respected, but also the European willingness to establish new rights for crime victims and empower their position within the criminal justice system.

A victim-centered approach has been progressively developed across Europe as the Victims' Directive enters into force on Member State level. This approach incorporates the needs and rights, and in essence the well-being of crime victims, by prioritizing a personalized and trauma-informed perspective when supporting and protecting the victims. To that end, the emerging need for the training of professionals in victim-friendly practices, as well as increasing awareness and sensitivity-regarding the special needs of vulnerable victims, is of major importance. The PROTASIS project idea was conceived in an attempt to respond both to the requirements of the Victims' Directive but also to the vision of promoting a victim-centered approach during the victims' contact with law enforcement authorities. Taking into consideration that law enforcement authorities have regular communication with crime victims, we aimed at developing a training manual and curriculum based on and adhering to a victim-centered approach and the promotion of the rights of the victims.

Our aspiration is for this Manual to contribute to the ongoing efforts for a victim-centered approach in police training across Europe, share our experience and promote the more effective and sustainable implementation of the EU Victims' Directive. Transferring and adapting this manual to the needs of other criminal justice system professionals, such as judicial and prosecutorial authorities, lawyers and psycho-social professionals, would be the next step and challenge.

Living in an era of austerity, recession, and insecurity there are only a few non-negotiable values, such as human dignity, respect and social justice. And thus, safeguarding the rights of the victims, and especially of those belonging to more vulnerable social groups, constitutes an indicator of democracy and rule of law.

We are very proud of this publication, which is only a reflection of what has been achieved, what needs to be done, and what our expectations are for the near future. This manual is the result of team work and would not have been possible without the input and contribution by a range of colleagues and experts. Special thanks are due to the co-authors of this publication, researchers and colleagues, Ms. Alexandra Koufouli and Ms. Iro Michael, for their support in the implementation of the PROTASIS project and training delivery. Their rich academic background and research experience is second only to their social awareness and compassion for the vulnerability and the multiple effects of victimization on individuals and societies. This publication would not have been possible without the trust and support of Professor Dr. Spyridon Flogaitis, Director of the EPLO, who inspires us all with the values and the vision of the European Public Law Organization (EPLO) – absolutely identical to the values of democracy and rule of law. Credit is also due to Ms. Vicky Lykoura, Deputy Director for Management, and Mr. Andrea DeMaio, Assistant Director for Technical Cooperation, of the EPLO, for their trust and support and for the efficient and effective project implementation and monitoring.

We would like to gratefully acknowledge our project partners for their commitment to the PROTASIS project and their valuable contribution to the development of this publication: Dr. Silvia Ciotti, Mr. Filippo Balistreri, and Ms. Nicoletta Bazzoffi (EuroCrime – Research, Training and Consulting SrL, Italy); Mr. Joao Lazaro, Mr. Frederico Moyano Marques, Ms. Sonia Reis, and Ms. Rosa Saavedra (Associação Portuguesa de Apoio à Vítima, APAV, Portugal); Prof. Helena Morão, Prof. Inês Ferreira Leite, and Ms. Sónia Moreira Reis (Faculdade de Direito, Universidade de Lisboa, Portugal); Ms. Liuba Del Carlo and Ms. Francesca Muratori (Fondazione Scuola Interregionale di Polizia locale, SIPL, Italy); Ms. Alessandra Bagnara, (Local Police Deputy- Chief, Municipality of Ravenna, Italy) and Ms. Loredana Borinato (Local Police Chief Inspector, Municipality of Turin, Italy); and Dr. Theo Gavrielides, Dr. Simon Aulton, and Ms. Maija Linnala (The IARS International Institute, IARS, UK). Finally, we would also like to extend our gratitude to the Associate partners of the project for their continuous support: the Hellenic Ministry of Interior and the Hellenic Police Headquarters; the Portuguese Ministry of Internal Affairs; and the Police and the Crime Commissioner for Hertfordshire, Barpenden Police Station, UK.

Athens, June 2018

Dr. Vasiliki Artinopoulou

The Scientific Coordinator of the PROTASIS project
 Professor in Criminology – Panteion University of Social and Political Sciences,
 Athens Greece, and Head of Crime and Criminal Justice Unit,
 European Public Law Organization (EPLO)

Contents

Preface	2
Introduction	6
Information for Trainers	9
Structure and Content of the Manual	9
How to Use this Manual	10
Training Approach and Methodology	10
Tailored Training.....	10
Training Evaluation	11
Module 1 - The Content and Interpretation of the Victims’ Directive	13
1.1. European Policy on Crime Victims	14
1.2. Role and Obligations of the Police.....	20
Module 2 - Understanding Victimization	25
2.1. Why is Victimology Important?.....	26
2.2. Victims and Traumatic Events.....	28
2.3. What Being a ‘Victim’ Actually Means?	31
2.4. Victims and/in the Criminal Justice System.....	42
2.5. Victims as Witnesses.....	47
Module 3 - Gender and Child-specific Issues	53
3.1. Gender-specific issues: Domestic and Sexual violence.....	54
3.2. Psychological Responses to Violence and Health Needs.....	64
3.3. Vulnerabilities and Increased Risk Factors for DV and SV	68
3.4. Non-disclosure and Non-reporting of Domestic and Sexual Abuse.....	73
3.5. Child-specific Issues	79
3.6. Risk Factors and Indicators Related to Child Abuse and Neglect.....	83
3.7. Reasons for Non-reporting Child Abuse	87

Module 4 - Interaction with Victims and Communication Skills	89
4.1. Introductory Discussion	90
4.2. Basic Principles: Empathy, Neutrality, Objectivity, Rapport	94
4.3. Setting, Introduction and Opening.....	99
4.4. Asking Questions	103
4.5. Active Observation and Listening.....	113
4.6. Difficult Interactions	120
4.7. Closure.....	127
Module 5 - Individual Assessment of Victims' Needs	133
5.1. Individual Assessment	134
5.2. The EVVI Questionnaire.....	138
Module 6 - Signposting and Referral Pathways	145
6.1. Signposting and Available Support Services.....	146
6.2. Networking.....	148
Annex 1 Evaluation and Impact Assessment - Executive Summary	151
Annex 2 PROTASIS Flashcards	155
Annex 3 Practitioners' Checklist for Victim Referral	169

Introduction

*“Crime is a wrong against society as well as a violation of the individual rights of victims”*¹ and while millions of people across the world and the EU fall victim of crime every year, access to justice, support, and protection often remain theoretical. The Directive 2012/29/EU² of the European Parliament and of the Council of 25 October 2012 establishing minimum standards on the rights, support and protection of victims of crime, and replacing Council Framework Decision 2001/220/JHA (hereinafter referred to as the Victims’ Directive) was a pivotal moment and roadmap in developing a comprehensive framework for strengthening victims’ rights across EU.

The Victims’ Directive aspires for every victim to be treated in a respectful, sensitive, tailored to their needs, professional, and non-discriminatory manner, by establishing minimum standards for safeguarding the rights of the victims, ensuring that they receive appropriate information, support, and protection in all contacts with the authorities. However, the examination of the practical implementation of the Victims’ Directive on Member State level, reveals that significant challenges remain, and the idea of a victim-centered criminal justice system is often abstract in practice.

Several articles in the Victims’ Directive presuppose that, as Article 25 requires, appropriate training is available to all relevant professionals. Similarly, according to Article 4(1a), victims are entitled to information on available support, as well as facilitation of their referral to victim support services, from their first contact with a competent authority, as noted under Article 8(2). The latter being closely related to Article 22 of the Victims’ Directive, the performance of an individual assessment of victims’ needs for the identification of specific protection needs and subsequently tailored referral according to their specific needs. In turn, all the above assume the existence of referral pathways and the availability of support services; as well as the fact that the officials in contact with the victims acquire the relevant information; and they have the capacities to assess the individual needs of the victims and signpost them accordingly.

Thus, it could be suggested that the effective support and protection of victims, and par extension the sufficient implementation of the Victims’ Directive, appears to significantly depend upon two basic axons. Firstly, an effective training system for professionals coming in contact with victims and, secondly, an effective informational system, including referral to support services.

¹ Directive 2012/29/EU of the European Parliament and of the Council of 25 October 2012 establishing minimum standards on the rights, support and protection of victims of crime, and replacing Council Framework Decision 2001/220/JHA, OJ L 315, 14.11.2012. Retrieved from: <http://eur-lex.europa.eu/legal-content/en/TXT/?uri=CELEX:32012L0029> [Last Accessed: 12 March 2018].

² Ibid.

³ European Parliament - Committee on Civil Liberties, Justice and Home Affairs & Committee on Women’s Rights and Gender Equality (2018). Report on the implementation of Directive 2012/29/EU establishing minimum standards on the rights, support and protection of victims of crime (2016/2328(INI)). Retrieved from: <http://www.europarl.europa.eu/sides/getDoc.do?pubRef=-//EP//NONSGML+REPORT+A8-2018-0168+0ww+DOC+PDF+V0//EN> [Last Accessed: 25 May 2018].

Despite the undeniable progress in recent years, the European Parliament's 2018 report³ examining the coherence, relevance, effectiveness, and efficiency of the application of the Directive depicts a fragmented situation and reveals that significant challenges remain. Although procedures of individual assessment are being implemented in most of Member States, significant variation exists in the manner that the assessment is conducted, in some cases being simply a process of "ticking boxes". At the same time, even if individual assessment is performed, access to support services based on the victims' specific needs is often hindered by lack of relevant structures, coordination between stakeholders, and effective referral mechanisms. The need for gender- and child-sensitive training of all professionals dealing with victims, including police officers as victims' first point of contact with the criminal justice system, remains a principal recommendation. Given the increased vulnerabilities and specific needs that victims have, appropriate training of professionals is crucial for the victims to fully understand and exercise their rights, receive protection and support in a professional and non-discriminatory manner, as set out in the directive, preventing therefore, their secondary victimization.

The idea for this manual and for the 'Protasis - Police Training Skills' project originated in response to these needs and in an effort to contribute to the rising actions towards the effective, sufficient, and sustainable implementation of the Victims' Directive. The main objective of the project was to support the development of a victim - friendly environment during the victims' contact with the police, ensuring that victims are treated in a respectful and sensitive manner and have access to their rights to information, protection, and support.

The Protasis project, running from December 2016 until November 2018, was funded by the Rights, Equality and Citizenship Programme of the European Union. The project was implemented in four countries by a consortium of 6 organizations, led by the European Public Law Organization (EPLLO, Greece): the IARS International Institute (UK), EuroCrime (Italy), Portuguese Association for Victim Support - APAV (Portugal), Lisbon Law School, University of Lisbon (Portugal), and Inter-Area Local Police School Foundation - SIPL (Italy). In order to develop a multi-agency action, the project was also supported by Associate Partners, and more specifically the Ministry of Interior/ Hellenic Police Headquarters (Greece), the Ministry of Internal Affairs (Portugal), and the Police and the Crime Commissioner for Hertfordshire, Barpenden Police Station (UK).

The manual constitutes the final output of the project and is the result of a compilation of knowledge and research acquired from previous EU funded projects, interdisciplinary research and theories, the authors' academic and research expertise and their practical experience with the targeted population - victims of crimes with special needs - as well as the exchange of good practices acquired during a 2-day work visit in London. The insights on the benefits, challenges, obstacles, and the first-hand information and experience offered by the UK police officers during the study visit were used to inform the design and development of the materials and the pilot training for police officers.

The training program and material was piloted to more than 200 police officers in Italy, Portugal, and Greece, who followed 20 hours of training seminars and workshops. After the completion of the pilot trainings, a training evaluation and impact assessment was conducted by the IARS International Institute, an independent to the training delivery

partner (see Annex 1 for a summary of the key findings and recommendations). The scientific evaluation assessed the training program and aimed to estimate its impact on the everyday working life of the police officers. The findings and conclusions assisted in the further enhancement of the training program and material.

This manual aspires to serve as a practical tool towards a victim-centered approach in the training of police officers, criminal justice authorities, and first-instance professionals by adopting a holistic perspective which combines theoretical knowledge and practical skills. Drawing on interdisciplinary research and theories, Modules 1, 2, and 3 of the manual introduce participants to the basic theoretical knowledge regarding the European framework for the protection and support of victims of crime and focus on the problems and needs of vulnerable victims, such as victims of gender-based violence and child victims. The sensitization of participants in such issues is expected in return to further enhance their capacities in treating and effectively supporting vulnerable victims.

The next modules 4 and 5 invite participants to put in practice the acquired knowledge. Module 4 focuses on basic communication and interaction skills that will allow the participants to effectively communicate with and support victims with respect and sensitivity, preventing secondary victimization. Module 5 provides the participants with practical instruments and skills for conducting the individual assessment of victims' needs. Finally, Module 6 aims to enhance the capacity of the participants in effectively signposting victims to appropriate support services, while also promoting cross-sector networking and cooperation towards the development of referral pathways.

Information for Trainers

The manual consists of six modules developed in a sequence that links each issue to the next, progressively building the knowledge and capacity of the participants through a smooth transition from one topic to the next, from general knowledge to specific skills. In addition, a set of Annexes with handouts for the training delivery can be found at the end of the manual.

Structure & Content of the Manual

Each module consists of sections and for each section the following are provided:

- the suggested duration of each section
- the objectives of each section
- the steps for the development of each topic
- the suggested outline for trainers under each step.

Module 1

The content and interpretation of the Victims' Directive – This module introduces participants to the European framework on the protection and support of crime victims, focuses on the roles and obligations of the police as described in the Victims' Directive, and highlights the relevant benefits for both victims and police officers.

Module 2

Understanding victimization – Key concepts of victim psychology and victimology constitute the main focus of this module. The costs and the impact of victimization are presented, stressing the issues, problems, and needs that victims face during their interaction with the criminal justice system. It further looks into the link between secondary victimization and the different perspectives that victims and law enforcement authorities often have, as well as the framework of the victim-witness interviewing.

Module 3

Gender- and child-specific issues – This module examines gender specific and child specific issues in relation to victims of crimes. With an emphasis on domestic and sexual violence affecting women and children, the module seeks to untangle the topic's complex dynamic involving the psychological responses to violence, the victims' needs, vulnerabilities in victimization, increased risk factors, and reasons for non-disclosing and non-reporting victimization.

Module 4

Interaction with victims and communication skills⁴ – Drawing interdisciplinary information from various disciplines and good practices, the central elements of this module include basic principles, practical techniques and tools for effective communication and interaction with vulnerable victims. The setting of an initial contact with a victim, building rapport, posing questions, and active observation and listening to the victims' narrative of events, are some of the topics covered using practical examples and experiential exercises.

⁴ Important note:

It should be highlighted that this module does not intend to serve as a training guide in interviewing vulnerable victims or witness, as this would require more extensive and specialized training. It attempts, however, to provide the basic background on the main aspects involved in police interactions with victims of crime.

Module 5

Individual assessment of victims' needs – The content of this module covers the application of Victims' Directive article on individual assessment (Article 22), by providing the participants with practical tools and skills for effectively assessing the victims' needs during their first contact with the victim.

Module 6

Signposting and Referral Pathways – During this module participants are presented with information on available support services and effective techniques for safe referral. With the view of encouraging the development of referral pathways, networking and cross-sectoral cooperation with representatives from victim support organizations is an integral part of this module.

How to Use this Manual

Training Approach & Methodology

A participatory training approach is recommended, founded on a collaborative methodology through the contribution of all the actors (trainees and trainers) involved. The knowledge, skills, and professional experience of the participants and the trainers should be equally valued throughout the process and the training should be based on the mutual sharing of information, knowledge, and experience.

Interactive delivery techniques should be sought, and the use of visual aids, case studies, examples, and open dialogue are strongly suggested, while the theoretical lecture parts are recommended to be kept to a minimum. The strengthening and enhancement of specific practical knowledge and skills with direct application into the daily working practice of the participants, should constitute the main goal of the training. Therefore, small working group sessions, such as workshops with a maximum of 20 participants, are recommended, especially for modules 4, 5, and 6, to ensure the active participation of all trainees.

Tailored Training

The sequence, content, and methodology of the training program were piloted during the implementation of PROTASIS project activities, however, trainers are encouraged to adapt the materials to the specific needs of each group of participants and the national circumstances. The performance of training needs' assessment is also recommended before finalizing the training program and structure, to customize the training based on previous knowledge and experience of the intended participants.

Adaptations:

- The content of the training modules consists of key elements of the respective topics. Supplementing the material with other sources is recommended for more in-depth training on particular issues.
- The six modules and the suggested activities within each module can be delivered in their entirety or a selection can be made according to the specific aspects and objectives of the training. Similarly, the sequence of sections and steps within each module can also be modified.

- A selection of the available information under each step can also be made, placing the emphasis on specific issues, or customizing the training to a more basic or advanced level based on the previous knowledge and experience of the participants. Relevant suggestions are provided through the material.
- The number, nature, configuration, and instructions (e.g. working in groups or in pairs) of the exercises suggested can also be modified for each individual group of participants. For example, with groups of participants that acquire a more advanced knowledge of the topics covered, the emphasis could be placed on the performance of role-playing exercises to further advance and strengthen practical skills.
- Similarly, the suggested duration for each section is indicative. Modifications of the timeframe, appropriately shortening or extending the allocated time, should be made based on the specific training needs of the participants, the training objectives, and the duration of the training.
- Although the training modules were designed for and piloted with police officers of various rankings, such as frontline police officers (first respondents) and officers with experience in investigation, it is suggested that the modules could also serve the basis for the training of cross-sector groups, or for professionals from other sectors of the criminal justice system who interact with vulnerable victims.

National Context:

- The case studies and scenarios provided for the exercises are indicative, and trainers are urged to adapt them to or select cases which might be more representative of the national situation. The use of real case examples or police archive material, whenever possible and ensuring the protection of personal data, is also encouraged.
- Adaptation of the training delivery to each specific country context is highly recommended, particularly in the sections that involve legislative or national frameworks (e.g. transposition of the Victims' Directive to national law, national individual assessment framework; available victim support services; police regulations).
- In addition, it is suggested that trainers incorporate country specific information regarding the current situation on the protection and support of victims, for the training to better correspond to the daily working practice of the participants.

Training Evaluation

The performance of a training evaluation following the delivery of the training using, for example, questionnaires or other methods of assessment, is highly recommended. Regardless of the decision to perform a written evaluation, it is advised to conclude the training with a closing feedback round, by opening the floor to the participants to provide feedback, pose any questions they might still have, or raise any other topic they would like to discuss before completing the training.

Module 1

The Content and Interpretation of the Victims' Directive

1.1. European Policy on Crime Victims

SUGGESTED DURATION

30-60 MINUTES

OBJECTIVES

- ENGAGE PARTICIPANTS TO THE TRAINING
- INFORM PARTICIPANTS REGARDING THE EUROPEAN POLICY ON CRIME VICTIMS
- RAISE AWARENESS ON THE SIGNIFICANCE OF SHARED KNOWLEDGE ON EUROPEAN LEVEL

Outline

STEP 1 - Introduction National situation

- Ask participants to briefly share information regarding their daily work, especially in terms of their contacts with victims.
- Briefly present the national situation on the protection and support of crime victims.
- Ask the participants if they have attended other trainings on victims' issues.
- End the brief discussion by noting the importance of this training.

STEP 2 - European Policy on crime victims

- Briefly introduce the broader framework of the European policy on crime victims.
- Some basic information is provided below.

The European Commission has set the support of victims of crime as a priority of strategic importance by adopting and applying legislative and practical measures, which aim at providing an adequate level of protection of victims' rights throughout the European Union (EU).

The victims' rights have been a subject of discussion on an EU level for a long time through the contribution of Victimology and victimological surveys, which have highlighted the need to develop victim-led policies.

- The 'Budapest Roadmap'⁵: A horizontal set of measures was launched by the European Commission in May 2011 through the 'Budapest Roadmap', placing the victims of crime on a high priority in the European agenda. These measures intend to strengthen the rights of victims of crime and to create an integrated and coordinated approach for the treatment of victims, ensuring that their needs are met regardless of their personal or other characteristics, and anywhere in the EU where a crime takes place.
- Other measures: various European Directives and Decisions have been adopted by

⁵ Council of the European Union (2011). Resolution of the Council on a roadmap for strengthening the rights and protection of victims, in particular in criminal proceedings. 3096th Justice and Home Affairs Council meeting, Luxembourg, 9 and 10 June 2011. Retrieved from: <https://victimsupport.eu/activeapp/wp-content/uploads/2012/09/Resolution-of-the-Council-on-a-roadmap-for-strengthening-the-rights-and-protection-of-victims-in-particular-in-criminal-proceedings11.pdf> [Last accessed: 25 May 2018].

the EU to protect all or vulnerable/special groups of victims, for example the Council Framework Decision 2001/220/JHA on the standing of victims in criminal proceedings⁶, the Directive 2011/36/EU on preventing and combating trafficking in human beings⁷, the Directive 2011/92/EU on combating sexual abuse, sexual exploitation of children and child pornography⁸, and the Council Framework Decision 2008/919/JHA on combating terrorism⁹.

STEP 3 - Directive 2012/29/EU

- Present the Victims' Directive, and/or the national framework transposing the Directive into national law.
- Close the presentation/discussion by concluding that:
 - a. The EU has set the support of victims of crime as a priority.
 - b. Directive 2012/29/EU is an essential part of the European policy for victims developed in recent years.
 - c. The Directive grants new and strengthens existing rights and obligations that ensure the respectful treatment, recognition, protection, support, access to justice, compensation, and restoration of victims.
 - d. The ultimate goal is to prevent secondary and repeat victimization, retaliation, and intimidation of victims during the criminal justice proceedings.

Notes for trainers:

- “Secondary and repeat victimization, retaliation or intimidation of victims”:
 - Secondary victimization: further victimization of the victims by the criminal justice procedures or the justice system personnel. E.g. behaviors and attitudes of justice system officers that are “victim-blaming” and insensitive, disrespectful, or unnecessarily hostile.
 - Repeat victimization: repeated victimization of a person by the same and/or different and/or multiple offenders. E.g. incidents family violence, victim of repeated burglaries.
 - Retaliation: acts of revenge, reprisal, or vengeance by the offender.
 - Intimidation: putting pressure upon the victim, directly or indirectly, by the offender and/or other people for the benefit of the offender.
- According to the DG Justice Guidance Document¹⁰, the six thematic chapters of

⁶ Council Framework Decision of 15 March 2001 on the standing of victims in criminal proceedings (2001/220/JHA), OJ L 082, 22/03/2001. Retrieved from: <http://eur-lex.europa.eu/legal-content/GA/TXT/?uri=CELEX:32001F0220> [Last accessed: 25 May 2018].

⁷ Directive 2011/36/EU of the European Parliament and of the Council of 5 April 2011 on preventing and combating trafficking in human beings and protecting its victims, and replacing Council Framework Decision 2002/629/JHA, OJ L 101, 15.4.2011, p. 1–11. Retrieved from: <http://eur-lex.europa.eu/legal-content/en/TXT/?uri=CELEX%3A32011L0036> [Last accessed: 25 May 2018].

⁸ Directive 2011/92/EU of the European Parliament and of the Council of 13 December 2011 on combating the sexual abuse and sexual exploitation of children and child pornography, and replacing Council Framework Decision 2004/68/JHA, OJ L 335, 17.12.2011, p. 1–14. Retrieved from: <http://eur-lex.europa.eu/legal-content/EN/TXT/?uri=celex%3A32011L0093> [Last accessed: 25 May 2018].

⁹ Council Framework Decision 2008/919/JHA of 28 November 2008 amending Framework Decision 2002/475/JHA on combating terrorism, OJ L 330, 9.12.2008, p. 21–23. Retrieved from: http://eur-lex.europa.eu/eli/dec_framw/2008/919/oj [Last accessed: 25 May 2018].

¹⁰ European Commission, DG Justice (2013), DG Justice Guidance document related to the transposition and implementation of Directive 2012/29/EU of the European Parliament and of the Council of 25 October 2012 establishing minimum standards on the rights, support and protection of victims of crime, and replacing Council Framework Decision 2001/220/JHA, Ares (2013)3763804, Brussels, 19 December 2013. Retrieved from: <https://e-justice.europa.eu/fileDownload.do?id=05758a3a-9e2e-49a5-a7ec-3737c3ad6876> [Last accessed: 25 May 2018].

the Victims' Directive require different methodological approaches depending on their thematic content, in order to ensure their effective implementation, and that all the rights and services mentioned will be sufficiently available for victims and meet their needs.

The Victims' Directive was adopted by the EU Council of Ministers on 4 October 2012, and it was expected to be harmonized in national laws within three years after its publication in the Official Journal of the EU, i.e. up to November 2015. The Directive is an essential part of the European policy for victims developed in recent years. To this end, the European Commission published a Guidance Document¹¹ in order to assist EU Member States to implement the Directive sufficiently, effectively, and timely into national legislation, and to create a common framework of understanding of the provisions of the Directive.

Objective of the 'Victims' Directive':

Establish the minimum requirements and safeguards to be applied to protect the victims of crime and their family members. According to Article 1, «the purpose of this Directive is to ensure that victims of crime receive appropriate information, support and protection and are able to participate in criminal proceedings».

Definition of the victim (Article 2):

- (i) "a natural person who has suffered harm, including physical, mental or emotional harm or economic loss which was directly caused by a criminal offence;
- (ii) family members of a person whose death was directly caused by a criminal offence and who have suffered harm as a result of that person's death".
- (iii) "A person should be considered to be a victim regardless of whether an offender is identified, apprehended, prosecuted or convicted and regardless of the familial relationship between them." (recital 19).

Main points of the Victims' Directive:

- New and enhanced rights of crime victims, and obligations of the state towards the victims.
- Places the treatment and care of victims on a tailored, professional, and non-discriminatory approach with respect and sensitivity towards the victims.
- Applies to all victims without discrimination, regardless of their residence status, and for each contact of the victims with the competent authorities, victim support services and Restorative Justice services, as part of the criminal proceedings.
- The ultimate goal is to prevent secondary and repeat victimization, retaliation or intimidation of victims during the criminal justice proceedings, which is a key factor for its success and for the victims' satisfaction. "Special attention is given to special support and protection for victims of certain crimes, including victims of gender-based violence, predominantly women, due in particular to the high risk of secondary and repeat victimization, of intimidation and of retaliation. The Directive also insists on

¹¹ Ibid.

¹² Ibid, p. 4.

a child-sensitive approach, whereby the best interests of a child victim must be the primary consideration throughout their involvement in criminal proceedings”¹².

- Training of practitioners: Member States should ensure that officials who come in contact with victims, receive general and specialist training with sensitivity to the victim (victim-led training), depending on the contact they have with crime victims (Article 25), and to take measures facilitating the transnational cooperation to better safeguard the rights of victims (Article 26).

Content of the ‘Victims’ Directive – six thematic Chapters:

- General Provisions
- Provision of Information and Support
- Participation in Criminal Proceedings
- Protection of Victims and Recognition of Victims with Specific Protection Needs
- Other Provisions
- Final Provisions

Victims’ Rights:

With regard to the risks of secondary and repeat victimization, retaliation or intimidation of victims, the Directive ensures that all victims have the right to:

- **Accessible and understandable information:** to understand and to be understood (Article 3) and receive information about their case (Article 6), taking into account the personal characteristics of the victim and of the case (e.g. age, gender, cognitive ability, disability, relationship with the offender) that may affect the quality of communication and the nature of the information provided. For example, the adoption of a child-friendly approach based on their developmental age guides the communication with children in order to obtain reliable information.
- **Information rights:** to receive adequate information from the first contact with the competent authorities in a simple and understandable language, orally or in writing (Article 4) and written acknowledgement of their formal complaint made by them to the competent authority (Article 5). In this context, victims may submit the complaint in a language that they understand or by receiving the necessary linguistic assistance and receive free translation of the written acknowledgement of their complaint in a language that they understand. Furthermore, victims have the right to interpretation and translation during criminal proceedings (Article 7).
- **Access to victim support:** to have access to victim support services (Article 8) and to receive support from general and specific victim support services (Article 9), as soon as possible, irrespective of the report or not of the crime, according to their needs and the nature of the crime (e.g. family or sexual violence, human trafficking, terrorism). Under this, Member States should ensure that victims receive the necessary information about available victim support services and the competent authorities should make referrals of victims to such services.
- **Participation in criminal proceedings:** to have access and participate at every stage of the criminal justice procedures, from the beginning of the police investigation, to the extent permitted by national law (Articles 10, 13 & 14). In this context, the victims can provide information and evidence during the criminal proceedings (Article 10) and receive assistance (expenses’ reimbursement) for their involvement in criminal proceedings (Article 14), especially in regard to their attendance at the trial.
- **Protection measures:** to receive protection measures (Article 18) during all

procedures, and during criminal investigations (Article 20). To this end, the Directive contains a specific article regarding the individual assessment of victims (Article 22) to determine their vulnerability and to identify the victim's specific protection needs during criminal proceedings (Article 23). Particular attention is given in safeguarding the privacy of victims (Article 21), and the protection of child victims (Article 24).

The examination of the practical implementation of the Victims' Directive on Member State level reveals that the most significant challenge remains the obligation to safeguard that all victims have access to victim support based on their specific needs. Victim support is perceived as the key element in both ensuring the respect of victims' rights and their access to justice, as their rights and protection against secondary victimization will "often remain theoretical and illusory as long as the victim is not advised and supported in a professional manner"¹³.

Despite the undeniable progress in recent years, the European Parliament's 2018 report¹⁴ examining the coherence, relevance, effectiveness, and efficiency of the application of the Directive depicts a fragmented situation and reveals that significant challenges remain. Although procedures of individual assessment are being implemented in most of Member States, significant variation exists in the manner that the assessment is conducted, in some cases being simply a process of "ticking boxes". At the same time, even if individual assessment is performed, access to support services based on the victims' specific needs is often hindered by lack of relevant structures, coordination between stakeholders, and effective referral mechanisms. The need for gender- and child-sensitive training of all professionals dealing with victims, including police officers as victims' first point of contact with the criminal justice system, remains a principal recommendation. Given the increased vulnerabilities and specific needs that victims have, appropriate training of professionals is crucial for the victims to fully understand and exercise their rights, receive protection and support in a professional and non-discriminatory manner, as set out in the directive, preventing therefore, their secondary victimization.

Resources:

Council Framework Decision 2008/919/JHA of 28 November 2008 amending Framework Decision 2002/475/JHA on combating terrorism, OJ L 330, 9.12.2008, p. 21–23. Retrieved from: http://eur-lex.europa.eu/eli/dec_framw/2008/919/oj [Last accessed: 25 May 2018].

Council Framework Decision of 15 March 2001 on the standing of victims in criminal proceedings (2001/220/JHA), OJ L 082, 22/03/2001. Retrieved from: <http://eur-lex.europa.eu/legal-content/GA/TXT/?uri=CELEX:32001F0220> [Last accessed: 25 May 2018].

Council of the European Union (2011). Resolution of the Council on a roadmap for strengthening the rights and protection of victims, in particular in criminal proceedings. *3096th Justice and Home Affairs*

¹³European Union Agency for Fundamental Rights (FRA) (2014). *Victims of crime in the EU: the extent and nature of support for victims*. Luxembourg: Publications Office of the European Union, p. 103.

¹⁴European Parliament - Committee on Civil Liberties, Justice and Home Affairs & Committee on Women's Rights and Gender Equality (2018). Report on the implementation of Directive 2012/29/EU establishing minimum standards on the rights, support and protection of victims of crime (2016/2328(INI)). Retrieved from: <http://www.europarl.europa.eu/sides/getDoc.do?pubRef=-//EP//NONSGML+REPORT+A8-2018-0168+0+DOC+PDF+V0/EN> [Last Accessed: 25 May 2018].

Council meeting, Luxembourg, 9 and 10 June 2011. Retrieved from: <https://victimsupport.eu/activeapp/wp-content/uploads/2012/09/Resolution-of-the-Council-on-a-roadmap-for-strengthening-the-rights-and-protection-of-victims-in-particular-in-criminal-proceedings11.pdf> [Last accessed: 25 May 2018].

Directive 2011/36/EU of the European Parliament and of the Council of 5 April 2011 on preventing and combating trafficking in human beings and protecting its victims, and replacing Council Framework Decision 2002/629/JHA, OJ L 101, 15.4.2011, p. 1–11. Retrieved from: <http://eur-lex.europa.eu/legal-content/en/TXT/?uri=CELEX%3A32011L0036> [Last accessed: 25 May 2018].

Directive 2011/92/EU of the European Parliament and of the Council of 13 December 2011 on combating the sexual abuse and sexual exploitation of children and child pornography, and replacing Council Framework Decision 2004/68/JHA, OJ L 335, 17.12.2011, p. 1–14. Retrieved from: <http://eur-lex.europa.eu/legal-content/EN/TXT/?uri=celex%3A32011L0093> [Last accessed: 25 May 2018].

Directive 2012/29/EU of the European Parliament and of the Council of 25 October 2012 establishing minimum standards on the rights, support and protection of victims of crime, and replacing Council Framework Decision 2001/220/JHA, OJ L 315, 14.11.2012, p. 57–73. Retrieved from: <http://eur-lex.europa.eu/legal-content/en/TXT/?uri=CELEX:32012L0029> [Last accessed: 25 May 2018].

European Commission, DG Justice (2013), DG Justice Guidance document related to the transposition and implementation of Directive 2012/29/EU of the European Parliament and of the Council of 25 October 2012 establishing minimum standards on the rights, support and protection of victims of crime, and replacing Council Framework Decision 2001/220/ JHA, Ares (2013)3763804, Brussels, 19 December 2013. Retrieved from: <https://e-justice.europa.eu/fileDownload.do?id=05758a3a-9e2e-49a5-a7ec-3737c3ad6876> [Last accessed: 25 May 2018].

European Parliament - Committee on Civil Liberties, Justice and Home Affairs & Committee on Women's Rights and Gender Equality (2018). Report on the implementation of Directive 2012/29/EU establishing minimum standards on the rights, support and protection of victims of crime (2016/2328(INI)). Retrieved from: <http://www.europarl.europa.eu/sides/getDoc.do?pubRef=-//EP//NONSGML+REPORT+A8-2018-0168+0+DOC+PDF+V0//EN> [Last Accessed: 25 May 2018].

European Union Agency for Fundamental Rights (FRA) (2014). *Victims of crime in the EU: the extent and nature of support for victims*. Luxembourg: Publications Office of the European Union.

1.2. Role and Obligations of the Police

SUGGESTED DURATION

30-60 MINUTES

OBJECTIVES

- RAISE AWARENESS AND INFORM THE PARTICIPANTS ABOUT THE ROLE AND OBLIGATION OF THE POLICE REGARDING THE TREATMENT OF VICTIMS ACCORDING TO THE VICTIMS' DIRECTIVE

Outline

STEP 1 – Role and obligations of the Police

- Discuss with the participants the duties/ role of the police in relation to the implementation of the Victims' Directive, using the information provided below. For example, you may ask them whether they already implement these duties. If yes, do they face any challenges? If not, what challenges they might face upon their application?
- The Victims' Directive and the European Commission DJ Justice Guidance Document might also provide additional information.
- Alternatively, you may also focus on the role and obligations of the police according to national legislation which has already incorporated the Victims' Directive.

Police officers are most often the first point of contact that a victim has with the authorities; placing them, therefore, into a key position for enhancing the effective support and protection of victims. As the first officials that victims encounter, police officers may be tasked with the individual assessment of the victim's specific needs, the provision of information and the referral to support services. Therefore, a well established police referral mechanism consists an essential part for the foundation of any effective support system.

Several articles in the Victims' Directive affect directly the daily work of police officers and set their obligations during their contact with victims of crime. More specifically:

ARTICLE 3 – RIGHT TO UNDERSTAND AND TO BE UNDERSTOOD

ARTICLE 4 – RIGHT TO RECEIVE INFORMATION FROM THE FIRST CONTACT WITH A COMPETENT AUTHORITY

ARTICLE 5 – RIGHT OF VICTIMS WHEN MAKING A COMPLAINT

ARTICLE 8 – RIGHT TO ACCESS VICTIM SUPPORT SERVICES

ARTICLE 17 – RIGHTS OF VICTIMS RESIDENT IN ANOTHER MEMBER STATE

ARTICLE 18 – RIGHT TO PROTECTION

ARTICLE 20 – RIGHT TO PROTECTION OF VICTIMS DURING CRIMINAL INVESTIGATIONS

ARTICLE 22 – INDIVIDUAL ASSESSMENT OF VICTIMS TO IDENTIFY SPECIFIC PROTECTION NEEDS

ARTICLE 23 – RIGHT TO PROTECTION OF VICTIMS WITH SPECIFIC PROTECTION NEEDS DURING CRIMINAL PROCEEDINGS

ARTICLE 25 – TRAINING OF PRACTITIONERS

According to the above mentioned articles:

- Police officers are expected to treat victims in a sensitive and professional manner in order to prevent secondary victimization during the victims' contact with the police.
- Police officers are expected to treat victims in a tailored, respectful and professional manner in order to meet the needs of each victim.
- Police officers are expected to assist victims to understand and be understood during their interaction, by communicating in simple and accessible language, orally and in writing.
- Police officers shall provide victims with a written acknowledgement of their formal complaint, which should state the basic elements of the criminal offence. The written acknowledgement should be in a language that the victims understand. Otherwise, police officers shall ensure that the victims receive the necessary linguistic assistance or translation.
- In the case that a victim resides in another Member State, police officers should assist victims to make the complaint by informing them regarding their rights according to the provisions of the Victims' Directive (especially Art. 17) and/or as specified in the national legislation and criminal proceedings which have adapted the Directive.
- Police officers are expected to assist victims by providing all necessary information that will help victims to cope with the harms caused by a crime and with the criminal proceedings; as well as by asking victims if they wish to contact or be contacted by support services. To this end, they should facilitate the referrals to victim support services.

Necessary information provided to victims:

- State of police investigations and judicial procedures.
- Right to legal aid.
- Time and place of the trial and the nature of the charges against the offender.
- Any decision on the status of the case (e.g. decision not to prosecute, final judgement) and the reasons for these decisions.
- Available protection measures.
- Referrals to support services.
- Release or escape of the offender.

Practical implications:

- Police officers should stay informed about:
 - all available services to victims;
 - all available protection measures to safeguard the victims and their families from physical, emotional and psychological harm;
 - any criminal or other procedure that the victim may be involved.
- Police officers should be trained to:
 - recognize and evaluate the extent, type or detail of information that they should provide to the victims "depending on the specific needs and personal circumstances of the victim and the type or nature of the crime";
 - acknowledge the impact of the crime on victims, to identify the risks of re-victimization, and to apply coping strategies which protect victims;
 - communicate with and apply appropriate interviewing methods depending on the victims' needs;
 - recognize the cases where the victims' choice is limited in regard to the

- accompanying persons;
- conduct individual assessment to identify victims' needs.
- This also implies that police officers should be familiar with individual assessment tools.
- Police officers are expected to receive training on the victims' rights and needs, the impact of crime on victims, on the risks of re-victimization and secondary victimization, the individual assessment of victims' needs, etc.

STEP 2 – Benefits for police and victims

- Following the short discussion, sum up the (new) role of the police according to the Victims' Directive.
- End this training module by explaining how these duties will actually benefit both the police and the victims using the information below.

The effective implementation of the Directive can result to number of benefits for both the police officers and the victims:

Benefits for the police

- Creation of a framework of cooperation among the police and the victims.
- Enhanced and effective communication with the victims.
- Development and enhancement of cross-sector cooperation with victim support services.
- Caseload management: effective referral pathways for signposting to victim support services.
- Positive impact on the investigation process.
- Police officers obtain unbiased information and reliable evidence.
- The police provide enhanced level of protection and quality of services to victims.
- Advanced skills and knowledge of police officers.
- Police officers gain the capacity to assess the individual needs of the victims and signpost victims accordingly.

Benefits for victims

- Treated in a tailored, respectful, and professional manner.
- Receive useful information that will help them to cope with the harms caused by a crime and with the criminal proceedings.
- Victims' satisfaction from the criminal proceedings is improved.
- Encouragement and facilitation of reporting of crimes, allowing victims to break the cycle of repeated victimization.
- Victims make informed decisions.
- The safety and dignity of victims and their family members is protected.
- Limited risk of secondary and repeat victimization, intimidation, and retaliation.
- Public's trust in the criminal justice system is enhanced.

Resources:

Directive 2012/29/EU of the European Parliament and of the Council of 25 October 2012 establishing minimum standards on the rights, support and protection of victims of crime, and replacing Council Framework Decision 2001/220/JHA, OJ L 315, 14.11.2012, p. 57–73. Retrieved from: <http://eur-lex.europa.eu/legal-content/en/TXT/?uri=CELEX:32012L0029> [Last accessed: 25 May 2018].

European Union Agency for Fundamental Rights (FRA) (2014). *Victims of crime in the EU: the extent and nature of support for victims*. Luxembourg: Publications Office of the European Union.

European Commission, DG Justice (2013), DG Justice Guidance document related to the transposition and implementation of Directive 2012/29/EU of the European Parliament and of the Council of 25 October 2012 establishing minimum standards on the rights, support and protection of victims of crime, and replacing Council Framework Decision 2001/220/ JHA, Ares (2013)3763804, Brussels, 19 December 2013. Retrieved from: <https://e-justice.europa.eu/fileDownload.do?id=05758a3a-9e2e-49a5-a7ec-3737c3ad6876> [Last accessed: 25 May 2018].

Module 2

Understanding Victimization

2.1. Why is Victimology Important?

SUGGESTED DURATION

30-40 MINUTES

OBJECTIVES

- ENGAGE PARTICIPANTS IN THE TRAINING
- RAISE AWARENESS ON THE SIGNIFICANCE OF VICTIMOLOGY
- STRESS HOW AND WHY THIS TRAINING COULD CONTRIBUTE TO THEIR DAILY PROFESSIONAL PRACTICE

Outline

STEP 1 – Discussion

- Ask the participants to briefly share a normal day at work: what are their tasks?
- Ask how often they come in contact or communicate with victims of crime.
- Ask if they consider these encounters and communication with victims important for their work. Note: avoid spending much time to hear everyone's routine. There will be time to share more experiences throughout the training.
- End the exercise concluding that:
 - > Police officers' daily work may include encounters with victims of crime.
 - > Police officers communicate with victims when a crime has taken place.
 - > This communication might be important for their work.

STEP 2 – Why is victimology important?

- Following the discussion on police work, explain why victimology is important after all.
- Use the information below to introduce the significance of victimology as part of the police work, and thus engage the participants in the training.

A crime can have a great impact and varied effects on victims who, at the same time, are considered key-witnesses in every criminal trial, since they experience the criminal incident directly and perhaps suffer more harms than other witnesses.

Thus, the better understanding of the victim, the appropriate interpretation of the context in which the crime occurred, and the proper interaction and communication with the victim can have a potentially positive effect on two – interrelated and interactive – levels:

- For law enforcement: investigative value
 - > victims of crime constitute a rather valuable source of information – and thus, evidence – perhaps only second to the physical evidence. And 'like all types of evidence, victim information is of much more use if it is developed and interpreted in a consistent and scientific fashion'¹⁵.
- For victims: prevention of secondary victimization

> victims being victimized twice, first by the offender and then by the criminal justice system, due to the impersonal interpersonal treatment they often receive.

From an investigate perspective, information regarding the victim, their behaviors, habits, strengths, and vulnerabilities, can prove useful by providing significant insight into the nature of the crime and the facts of the case; who the perpetrator is, their motives, plans and actions. Investigations without the cooperation of the victim are significantly more difficult.

Form the victims' perspective, law enforcement will have a better understanding of the harm and costs that the victims have suffered and the difficulties they experience; preventing therefore, secondary victimization, misconceptions, and maltreatment. Such as uncooperative victims being perceived as dishonest, and very cooperative victims as unaffected and overstating the facts.

Resources:

Alexiades, S., (2006). *Ανακριτική [Interrogation]*. Athens-Thessaloniki: Sakkoulas publications.

Karmen, A. (2010). *Crime victims: An introduction to victimology* (7th ed.). Belmont, CA: Wadsworth Cengage Learning.

McGrath, M. (2014). Psychological Aspects of Victimology. In B. E. Turvey (Ed.), *Forensic Victimology: Examining Violent Crime Victims in Investigative and Legal Contexts* (2nd ed.) (pp. 207-251). San Diego: Academic Press.

Laxminarayan, M. (2013). Interactional justice, coping and the legal system: Needs of vulnerable victims. *International Review of Victimology*, 19(2), pp. 145-158.

Turvey, B. E. (2014). Victimology: A Brief History with an Introduction to Forensic Victimology. In B. E. Turvey (Ed.), *Forensic Victimology: Examining Violent Crime Victims in Investigative and Legal Contexts* (2nd edition) (pp. 1-30). San Diego: Academic Press

¹⁵ Turvey, B. E. (2014b). Victimology: A Brief History with an Introduction to Forensic Victimology. In B. E. Turvey (Ed.), *Forensic Victimology: Examining Violent Crime Victims in Investigative and Legal Contexts* (2nd edition) (pp. 1-30). San Diego: Academic Press, p. 28.

2.2. Victims and Traumatic Events

SUGGESTED DURATION

20-30 MINUTES

OBJECTIVES

- PRESENT TO THE PARTICIPANTS KEY CONCEPTS OF PSYCHOLOGY AND VICTIMOLOGY IN RELATION TO VICTIMS OF CRIME
- RAISE THEIR AWARENESS ON THE SIGNIFICANCE EFFECTS OF EXPERIENCING TRAUMATIC EVENTS

Outline

STEP 1 – Who is consider a victim of crime?

- Use the information provided below to make a short introduction on who is consider a victim of crime. Stress the difference between who is considered a victim according to the law, and who according to victimology.
- At this point, it will be important to note that there are two main categories of victims: the direct victims who suffer direct harms as a result of a crime; and the indirect victims (e.g. family, close others) who experience indirect victimization.
- End the introduction by explaining that both categories of victims may experience a criminal incident as a traumatic event and move on to the next step for more details.

Victim is ‘any person who has experienced loss, injury, or hardship due to the illegal actions of another individual, group, or organization’¹⁶. However, often, and especially in serious or violent crimes, the individual involved directly in the event is not the only one affected. The family (e.g. spouses, children, and other family members) and friends of the victim are *collateral victims*, as they also experience harms and the impact of the crime. To this end, it seems that besides the victims’ reactions, close relatives, family, friends, and neighbors of the victim may be psychologically affected, experiencing indirect victimization and/or the fear of victimization, while sometimes bear the financial and psychological support for the direct victims.

According to Article 2 of the Victims’ Directive, the term ‘victim’ refers to:

- (i) a natural person who has suffered harm, including physical, mental, or emotional harm or economic loss which was directly caused by a criminal offence,
- (ii) family members of a person whose death was directly caused by a criminal offence and who have suffered harm as a result of that person’s death.

STEP 2 – Trauma and traumatic events

- Use some of the information below to describe the general concept and types of traumatic events.

¹⁶Turvey, B. E. (2014). Victimology: A Brief History with an Introduction to Forensic Victimology. In B. E. Turvey (Ed.), *Forensic Victimology: Examining Violent Crime Victims in Investigative and Legal Contexts* (2nd edition) (pp. 1-30). San Diego: Academic Press, p. 1.

- Conclude that there are many ways to be exposed to a traumatic event, and that this has great impact both on direct and indirect victims as we will see next.
- Stress the difference between the legal and the psychological perspective of trauma (e.g. witnesses might be traumatized as well) and the importance of this difference in the daily practice of police officers (e.g. there may be more victims than those defined by the law).

The terms ‘trauma’ and ‘traumatic event’ encompass any experience that can cause intense fear or a sense of helplessness to an individual. Most of the times, although not always, such an event involves an imminent threat to one’s life or serious physical injuries, such as exposure to actual or threatened death, serious injury, or sexual violence.

An individual can be exposed to a traumatic event in one the following ways:

1. directly;
2. as a witness of the event occurring to another person;
3. by learning that the event happened to a close family member or a close friend;
4. by being exposed to repeated or extreme aversive details of a traumatic event (e.g. first responders; police officers).

Traumatic events that a person can experience include, but are not limited to¹⁷:

- threatened or actual physical assault (e.g., physical attack, robbery, mugging, childhood physical abuse)
- threatened or actual sexual violence (e.g., forced sexual penetration, alcohol/drug-facilitated sexual penetration, abusive sexual contact, noncontact sexual abuse, sexual trafficking)
- especially for children, sexually violent events may include developmentally inappropriate sexual experiences without physical violence or injury
- severe motor vehicle accidents
- being kidnapped, or being taken hostage
- torture
- incarceration as a prisoner of war
- exposure to war as a combatant or civilian
- natural or human-made disasters
- a life-threatening illness or debilitating medical condition is not necessarily considered a traumatic event
- medical incidents that involve sudden, catastrophic events (e.g., waking during surgery, anaphylactic shock)

Witnessed events include, but are not limited to¹⁸:

- observing threatened or serious injury
- unnatural death

¹⁷American Psychiatric Association. (2013). *The Diagnostic and Statistical Manual of Mental Disorders: DSM 5*. Arlington, VA: American Psychiatric Publishing, p. 274.

¹⁸American Psychiatric Association. (2013). *The Diagnostic and Statistical Manual of Mental Disorders: DSM 5*. Arlington, VA: American Psychiatric Publishing, p. 274-275; Turvey, B. E. (2014). Victimhood: Entering the Criminal Justice System. In B. E. Turvey (Ed.), *Forensic Victimology: Examining Violent Crime Victims in Investigative and Legal Contexts* (2nd ed.) (pp. 31-65). San Diego: Academic Press.

- physical or sexual abuse of another person due to violent assault
- domestic violence
- accident
- war or disaster
- or a medical catastrophe in one's child (e.g., a life-threatening hemorrhage).

Indirect exposure through learning are limited to¹⁹:

- experiences affecting close relatives or friends
- experiences that are violent or accidental (e.g., violent personal assault, suicide, serious accident, serious injury)

Resources:

Adshead, G. (2014). The Impact of Trauma. In S. Bewley & J. Welch (Eds), *ABC of Domestic and Sexual violence* (pp. 17-20). London, UK: BJM Books.

American Psychiatric Association. (2013). *The Diagnostic and Statistical Manual of Mental Disorders: DSM 5*. Arlington, VA: American Psychiatric Publishing.

Directive 2012/29/EU of the European Parliament and of the Council of 25 October 2012 establishing minimum standards on the rights, support and protection of victims of crime, and replacing Council Framework Decision 2001/220/JHA, OJ L 315, 14.11.2012, p. 57-73. Retrieved from: <http://eur-lex.europa.eu/legal-content/en/TXT/?uri=CELEX:32012L0029> [Last accessed: 25 May 2018].

King, M. (2014). Sexual Assault of Men and Boys. In S. Bewley and J. Welch (Eds.), *ABC of Domestic and Sexual Violence* (pp. 27-29). London, UK: BJM Books

McGrath, M. (2014). Psychological Aspects of Victimology. In B. E. Turvey (Ed.), *Forensic Victimology: Examining Violent Crime Victims in Investigative and Legal Contexts* (2nd ed.) (pp. 207-251). San Diego: Academic Press.

Turvey, B. E. (2014). Victimology: A Brief History with an Introduction to Forensic Victimology. In B. E. Turvey (Ed.), *Forensic Victimology: Examining Violent Crime Victims in Investigative and Legal Contexts* (2nd edition) (pp. 1-30). San Diego: Academic Press.

¹⁹Ibid

2.3. What Being a 'Victim' Actually Means?

SUGGESTED DURATION

40-60 MINUTES

OBJECTIVES

- PRESENT TO THE PARTICIPANTS THE KEY POINTS REGARDING THE COSTS AND IMPACT OF CRIME ON THE VICTIMS
- RAISE THEIR AWARENESS ON THE SIGNIFICANCE AND IMPACT OF VICTIMIZATION, AND THE COSTS AND EFFECTS OF CRIME ON THE VICTIMS
- RAISE THEIR AWARENESS ESPECIALLY ON THE SIGNIFICANCE OF SECONDARY VICTIMIZATION

Outline

STEP 1 – Impact and cost of crime

- Use the information provided below to present the cost and impact of crime on victims.

Direct and Indirect costs:

The impact of victimization results in a range of direct and indirect costs not only for the victim, but also for the victim's family, the community, and the criminal justice system.

These costs of crime occur on two levels:

- a. the harm from the criminal victimization: Firstly, the victim and his/her family suffer harms from the criminal victimization, i.e. the acts of the offender.
- b. the consequences of participating in the criminal proceedings: Secondly, the victim is confronted with the consequences of participation in the criminal proceedings.

Range of impact of crime:

- Victims experience short-term and long-term consequences.
- To some extent, the consequences are common to all types of victims: research on victimization has shown that reactions or consequences of victimization are to some extent common to all types of victims, both among the various forms of crime, and between crime and other traumatic events.
- Results in emotional and behavioral reactions: The victims often react not only emotionally, but also behaviorally. For example, a study by Wirtz and Harrell²⁰ showed that all victims had common reactions, mainly related to a psychological concern, but the coping strategy methods varied depending on the type of the crime.

²⁰Wirtz, P. W. & Harrell, A.V. (1987). Victim and Crime Characteristics, Coping Responses, and Short- and Long-Term Recovery from Victimization, *Journal of Consulting and Clinical Psychology*, 55(6), 866-871.

Range of costs of victimization:

- I. Physical, e.g. physical injury (from less to more serious), even permanent damage, e.g. disability, distortion.
- II. Emotional – Psychological, e.g. emotional anguish, PTSD, stress, self-blame.
- III. Financial, e.g. property loss or damage, medical expenses, insurance policy.
- IV. Social, e.g. losing time from work and normal routines, impact on interpersonal relationships (family, friends), social stigma and perceptions on victimization.

As suggested by Janoff-Bulman²¹, victimization challenges the three ‘theories of reality’:

- I) the belief of a personal invulnerability (i.e. this will not happen to me),
- II) the idea that the world is meaningful (e.g. it has efficient social rules and to this end, bad things won’t happen to good people), and
- III) the positive self-worth of a person.

In sum, regardless of the form of crime, the victims experience a variety of physical, emotional and social costs, such as fear, anger, anxiety, and even depression, post-traumatic stress disorder or dissociative amnesia, which affect their daily functioning; while it is also relatively common for victims to develop self-blame.

STEP 2 – Victims’ psychological responses to crimes

- Use the information below to describe and sensitize police officers on the psychological responses to crime based on the Three-phase Crisis Reaction Model, and the diverse consequences of victimization.
- You may use practical examples (e.g. the reaction of a victim after a sexual assault, or a robbery, or a DV incident, etc.) to explain this information.
- Through questions to the participants, give special attention on how these consequences might affect the interactions that the police officers have with victims, and the officers’ perceptions of victims (e.g. how the symptoms of PTSD affect the victims’ statements to the police).
- Discuss with the participants if they have observed the abovementioned during their interaction with victims.
- End the discussion by concluding that police officers should be aware that the victims may experience a range of consequences which may affect their interaction with them.

Notes for trainers:

- The duration of this step should vary according to the participants’ previous knowledge and level of experience. For example, if the participants have already attend a training on the psychology of victimization, the information should only be briefly presented to recapitulate and reframe the existing knowledge.

The Three-phase Crisis Reaction Model

Although individual reactions to crime vary considerably, victims’ reactions, especially to serious crimes, can be systemized into a what is known as the Three-phase Crisis

²¹Janoff-Bulman, R. (1985). The aftermath of victimization: Rebuilding shattered assumptions. In C.R. Figley (Ed.), *Trauma and Its Wake. Volume I: The Study and Treatment of Post-Traumatic Stress Disorder* (pp. 15-35). NY: Brunner/Mazel.

Reaction Model by Bard and Sangrey²². A predictable sequence of three stages or phases, corresponding to those that occur immediately after the fact, the short-term and the long-term responses:

1. **impact-disorganization**: the initial response hours and days after the crime, during which the victim is in an overwhelming emotional stage;
2. **recoil**: the short-term period that the individual starts to deal with the impact of the crime;
3. **reorganization**: the final stage when the victim is coping with the event and tries to move forward.

This process appears to be common to all victims despite the specific type of crime. The duration and intensity of each stage varies according to three parameters:

- the perceived threat to the person's life,
- the help, support, and intervention that the person receives after the fact,
- the personal abilities to cope and deal with the fact.

Some people will go through the stages quickly, whereas others will never be able to move to the final stage, or they will keep relapsing between the impact and recoil stages. However, even those that manage to finish the reorganization phase and move forward with their lives, does not mean that they have been 'cured', as they will always remember it, remain affected, and bear the scars, emotional or otherwise.

²²Bard, M., & Sangrey, D. (1986). *The crime victim's book* (2nd ed.). New York: Brunner/Mazel.

Three-phase Crisis Reaction Model²³

Impact-disorganization phase	Recoil phase	Reorganization phase
<p>Immediate reactions after the fact. Lasts from hours to days.</p> <ul style="list-style-type: none"> - Falling apart inside - Intactness and integrity lost - Loss of control - Disorganized - In shock - Numbness - Disorientation - Inability to eat or sleep - Disbelief – denial - Feeling of violation - Vulnerability - Helplessness - Depression - Shame and guilt - Loneliness - Feeling isolated - Fear - Self-doubt - Confusion - Indecisiveness - Dependence to others - Difficulties recalling details of the crime - Difficulties to think clearly or to talk coherently 	<p>Short-term reactions, few hours or days later. Typically lasts from 3 to 8 months</p> <ul style="list-style-type: none"> - Struggle to adapt to the event - Struggle to reintegrate the fragmented self - Loss of identity and self-respect - Loss, rejection by others, and humiliation - Erosion of trust and autonomy - Dealing with many distressing emotions (fear, anger, sadness, self-pity, guilt) - Alterations between facing and avoiding their emotions: sometimes they feel and work on the painful emotions other times they deny them - Emotional detachment - Unable to feel anything - ‘Why me’? - Want to talk constantly about the event or refuse completely to do so - Fear, anger, rage, revenge - Mood swings as normal part of recovery: overcoming/overwhelming 	<p>Long-term reactions. Time varies according to the severity of the crime</p> <ul style="list-style-type: none"> - Coping with the crime - Resolving the trauma - Placing the event into perspective - Reorganization of the violated self - Fear and rage appease - Emotional investment in other experiences - Emotional and intellectual energy of activities other than the event - Increased level of activity - Thinking and talking less about the crime - Denial is reduced - Not so emotionally upset by triggers
<p>May diminish over time, but in lack of treatment or support, or in cases of adverse reactions from others, they can become long-term.</p>	<p>Most will eventually get through this stage, while others experience chronic responses that will require professional help. Support is crucial in this stage.</p>	<p>Duration and success highly depend upon the seriousness of the crime and the support received. Victims may never forget what happened and continue to be affected by reminders. Some may never complete this phase.</p>

Consequences of victimization

As with the reactions of victims, the psychological consequences of serious crimes also tend to be constant across the different types of severe criminality and can be broadly categorized according to the aspect of functioning that they affect²⁴.

²³ Ibid.

²⁴Ruback, R. B., & Thompson, M. P. (2001). *Social and psychological consequences of violent victimization*. Thousand Oaks, CA: Sage Publications.

Consequences of victimization²⁵

Affective consequences: emotional suffering

Posttraumatic stress disorder (PTSD)

- Often developed by adults, adolescents, and children after exposure to a traumatic event
- One third to one half of rape victims develop the disorder.
- Causes significant distress to the individual.
- Can result to substantial impairment in all important aspects of their everyday functioning, such as social, occupational, interpersonal, educational, physical health.
- Symptoms include:
 - **Intrusive symptoms:** Individuals that suffer from PTSD tend to reexperience the traumatic event, repeatedly, involuntary and in an intrusive manner. For example, they have
 - distressing memories and recollections of the event;
 - distressing dreams that replay the event itself, represent it or are related to it;
 - dissociative reactions such as flashbacks in which the individual relives the event, feels, or behaves as if the event is happening;
 - intense or prolonged psychological distress when they remember or are remembered of traumatic event;
 - significant physiological reactions to cues, both internal or external, that symbolize or resemble to the event.
 - **Avoidance symptoms:** They also almost always avoid or try to avoid any upsetting memories, thoughts, or feelings; or external reminders (such as people, places, conversations, activities, objects, situations) about the event or closely associated to it.
 - **Mood and cognitive alterations:** Their cognitive state and mood are negatively affected in association to the traumatic event, for example:
 - they cannot remember an important aspect of the event;
 - almost always they have persistent and exaggerated negative beliefs or expectations about oneself, others, or the world (e.g., “I am bad,” “No one can be trusted,” “The world is completely dangerous,” “My whole nervous system is permanently ruined” “I have always had bad judgment”; “People in authority can’t be trusted”; “I can’t trust anyone ever again”);
 - they tend to blame themselves or other about the cause or consequences of the traumatic event, due to persistent, distorted cognitions (“It’s all my fault”);
 - they exhibit a persistent negative emotional state (e.g., fear, horror, anger, guilt, shame);
 - they have diminished interest or participation in significant activities that they previously enjoyed;
 - they feel detached or estranged from others;

²⁵Ibid.

- they are unable to experience positive emotions (e.g., happiness, satisfaction, joy, intimacy, tenderness, or loving feelings).
- **Arousal and reactivity alterations:** their state of arousal and reactivity is significantly changed in association to the traumatic event, for example they develop:
- easily irritable behavior and angry outbursts, with little or no provocation, such as verbal or physical aggression toward people or objects (e.g., yelling at people, getting into fights, destroying things);
 - reckless or self-destructive behavior, such as dangerous driving, excessive alcohol or drug use, self-injuries, suicidal behavior;
 - hypervigilance, a high sensitivity to potential threats, related or not to the event;
 - exaggerated startle response, such as extreme reactivity to unexpected stimuli, jumpiness, or intense startle response to loud noises and sudden movements;
 - problems with concentration, such as difficulty remembering daily events (e.g. forgetting one's telephone number) or staying focused to tasks (e.g. following a long conversation);
 - difficulties falling or staying asleep, or restless sleep, due to nightmares and safety concerns, or their general elevated arousal.
- **Dissociative symptoms:** such as depersonalization – detachment from their bodies or selves (e.g., seeing oneself from the other side of the room, from above), – or derealization – detachment from the world around them, having a distorted view of the surroundings (e.g., things are moving in slow motion, seeing things in a daze).
- **Other symptoms:** in severe cases, they may present auditory pseudo-hallucinations and paranoid ideation.
- **Children:** repetitive play, re-enacting the event while playing; frightening dreams; developmental regression, e.g. loss of language; significant separation anxiety, e.g. excessive needs for attention from caregivers.

Why it is important:

Sometimes the victims' responses are expected consequences of the trauma

Acute stress disorder

- Acute stress disorder (ASD) presents with a symptomatology similar to PTSD, with the difference that it is restricted to a duration of 3 days to 1 month after the exposure to a traumatic event.
- Approximately 19% of assault victims, and 20% - 50% of victims of interpersonal assault and rape, will develop the disorder.
- It has been estimated that half of the individuals that develop PTSD initially meet the criteria for ASD.
- Associated features:
 - Catastrophic or very negative thoughts about their part and response into the traumatic event and the likelihood of future harm, e.g. excessive guilt for not preventing it or responding better to it.

- Catastrophic interpretation of the symptoms, e.g. flashbacks or numbness are perceived as diminished mental capacity
- Panic attacks are also common within the first month of the traumatic event
- They may also exhibit chaotic or impulsive behavior, such as reckless driving, irrational decisions, gambling

Anxiety based symptoms

Anxiety is also rather common after violent victimization, it can take the form of:

1. Pain Attacks
2. Agoraphobia
3. Generalized anxiety disorder
4. Specific phobia

Depression

- Comorbidity is rather high in individuals with PTSD, with approximately 80% of them to also exhibit symptoms of depression, bipolar disorder, anxiety, and substance use. Panic attacks are also quite prevalent in acute stress disorder.
- Crime victims are also at increased risk for developing depressive symptoms.
- Suicidal ideation.
- Traumatic events increase suicide risk. PTSD is associated with suicidal ideation and suicide attempts.
- Disorder may indicate which individuals eventually make a suicide plan or attempt.

Behavioral consequences: result into behavioral and lifestyle changes

Drug and alcohol abuse or dependence

- Victimization increases risk for drug or alcohol abuse.
- Drug or alcohol abuse increases risk for revictimization.

Avoidance

- Avoidance of places or persons due to fear of crime.
- Ranging from avoiding situations resembling to the event to constant fear.
 - > Life disruption

Reporting

- Reporting the crime has also psychological consequences.
- Reporting to the police results to better adjustment and coping, minimization of sense of injustice, increase of personal safety, compensation, trust in the system.

Medical use

- Increased medical use.
- Poorer health, injuries, negative health perceptions.

Cognitive consequences: affect the cognitions and assumptions of the individual about themselves, the world, and their relationship to the world

Fear of crime

- Fear of crime and increased sense of vulnerability (e.g. someone is out to get them; looking behind their backs while walking; getting frightened easily; changing locks).

Self-blame or attributions

- Victims blame their behavior for the crime (e.g. ‘I should not be walking alone in the night’)
- Or their character (‘I deserved it because I am bad person’).
- Trying to think what they should or could have done differently.
 - > negative psychological consequences; poor coping.

Self-esteem

- Low self-esteem.
- Seeing themselves as unworthy.
- Self-Stigmatization.
 - > Psychological distress.

Finding meaning

- Finding meaning in the event can take two forms:
 - a. finding significance: realizing the benefits, developing new goals, and a new wiser self;
 - b. understanding the event: making sense of the event by attributing it to god, to personal behavior or lifestyle, assuming personal responsibility.
 - > better or maladaptive adjustment

Trust of others

- Loss of trust to self and others/ the world (e.g. the world is uncontrollable, meaningless, incomprehensible)
- Anomie: world is untrustworthy, lack of attachment to society, feelings of isolation
 - > Psychological distress

STEP 3 – Secondary victimization

- Following step 2, mention again that victims are also confronted with the consequences of their participation in the criminal proceedings.
- Use the information below to describe and explain secondary victimization.
- Discuss with the participants the impact of secondary victimization.

Beside the direct impact of crime, victims face the reaction of the social environment (“secondary victimization”), as part of which they can be held responsible for what happened to them, be accused and stigmatized. The social stigma of victimization, as recognized in the context of “the victimology of social control”²⁶, is not positive, or socially desirable, since it indicates that the physical and/or mental space of a person was violated, resulting in the loss of control and domination on one’s rights and belongings.

Secondary victimization refers to “the lack of control and subsequent trauma that victims may experience when they are harmed by or dissatisfied with the criminal justice system”²⁷. It is a sense of further victimization that the victims feel when they interact with professionals of the criminal justice system, which is linked to a perceived lack of control.

Secondary victimization can also be linked with what Symonds has called as the “second injury” and refers to the “essentially a perceived rejection and lack of expected support from the community, agencies, treating personnel, society in general, as well as, family or friends to an individual who has been injured or victimized”²⁸. The idea of a ‘secondary victimization’ during criminal proceedings and the recall of the incident can be very stressful situations for the victim, while the absence of sufficient evidence, the lengthy procedures, and the lack of trust in the police discourage victims.

To sum up, secondary victimization can be related to:

- a. the attributions and attitudes of the social environment regarding what happened and whether to blame the victim (social stigma),
- b. the interaction with the criminal justice professionals and the consequences of participation in criminal proceedings, and
- c. the perceived rejection and lack of expected support by the community and other professionals. In this context, the term of ‘double victimization’ “refers to the harm and loss that a victim suffers first from the attacker, and second from a criminal justice system that either fails in its promise of assistance or protection or ignores the victim entirely”²⁹.

STEP 4 – Role playing

- Following step 3, ask for 2 volunteers to participate in a short role play exercise.
- Inform the participants that this is just role-playing and should not be considered as representative of the character or behavior of the actors.
- Provide the participant who act as the victim the scenario below or a similar scenario of your choice.
- Ask (privately) the participant who will act as the police officer to behave in a way that shows little respect to the victim (e.g. use ironic phrases, use stereotypes, ignore the victim’s words, and needs).
- At the end of the role-play, ask the participants to share their thoughts, observations, and comments, especially regarding the police officer’s behavior.
- Ask the ‘victim’ to share his/her view of the police officer’s behavior.
- End the exercise by asking the participants to identify the consequences and impact of the crime in this case. Explain that secondary victimization is linked with the

²⁶ Artinopoulou, V. (1996). *Θυματολογία – Σύγχρονες προσεγγίσεις* [Victimology – Current perspectives]. In V. Artinopoulou & A. Magganas (Eds.), *Θυματολογία και Όψεις Θυματοποίησης* [Victimology and Aspects of Victimization] (pp. 13-86). Athens: Nomiki Bibliothiki., pp. 30-33.

²⁷ Turvey, B. E. (2014). Victimhood: Entering the Criminal Justice System. In B. E. Turvey (Ed.), *Forensic Victimology: Examining Violent Crime Victims in Investigative and Legal Contexts* (2nd ed.) (pp. 31-65). San Diego: Academic Press, p. 31.

²⁸ Symonds, M. (1975). Victims of violence: Psychological effects and aftereffects. *American Journal of Psychoanalysis*, 35(1), 19–26, p. 37; Symonds, M. (1980). *The ‘second injury’ to victims. Evaluation and Change*, 7(1), 36-38.

²⁹ Turvey, B. E. (2014). Victimhood: Entering the Criminal Justice System. In B. E. Turvey (Ed.), *Forensic Victimology: Examining Violent Crime Victims in Investigative and Legal Contexts* (2nd ed.) (pp. 31-65). San Diego: Academic Press. p. 46.

different perspectives between the victims and law enforcement authorities and continue with the next section.

Scenario

You are 34 years old, married with two children. You work full-time at a company as an office administrator. You are well-dressed and fit. Your appearance is attractive. You have just been robbed by two strangers who threatened you with a knife and took you wallet, which included your identity card, two credit cards, an amount of 50 euro, and some photographs of your family. You are confused and in shock, but you managed to call your bank and cancel your credit cards. You arrive at the police station and ask to report the robbery. While you make your complaint, you keep thinking what would have happened to you and your family if the offenders had stabbed you. At the same time, you are wondering why you were not able to react.

Resources:

American Psychiatric Association. (2013). *The Diagnostic and Statistical Manual of Mental Disorders: DSM 5*. Arlington, VA: American Psychiatric Publishing.

Artinopoulou, V. (1996). Θυματολογία – Σύγχρονες προσεγγίσεις [Victimology – Current perspectives]. In V. Artinopoulou & A. Magganas (Eds.), *Θυματολογία και Όψεις Θυματοποίησης [Victimology and Aspects of Victimization]* (pp. 13-86). Athens: Nomiki Bibliothiki.

Bard, M., & Sangrey, D. (1986). *The crime victim's book* (2nd ed.). New York: Brunner/Mazel.

Ditton, J., Farrall, S., Bannister, J., Gilchrist, E., & Pease, K. (1999). Reactions to Victimization: Why has Anger been Ignored? *Crime Prevention and Community Safety: An International Journal*, 1(3), 37-54.

Doerner, W. G. & Lab, S. P. (2012). *Victimology* (6th ed.). Burlington, MA: Elsevier/Anderson Publishing Company.

Frieze, I. H., Hymer, S., & Greenberg, M. S. (1987). Describing the crime victim: Psychological reactions to victimization. *Professional Psychology: Research and Practice*, 18(4), 299.

Goodrum, S. (2007). Victims' Rights, Victims' Expectations, and Law Enforcement Workers' Constraints in Cases of Murder. *Law & Soc. Inquiry*, 32, 725-757.

Greenberg, M.S., Ruback, R. B. and Westcott, D. R., (1982). Decision Making by Crime Victims: A Multimethod Approach. *Law & Society Review*, 17(1), 47-84.

Janoff-Bulman, R. (1985). The aftermath of victimization: Rebuilding shattered assumptions. In C.R. Figley (Ed.), *Trauma and Its Wake. Volume I: The Study and Treatment of Post-Traumatic Stress Disorder* (pp. 15-35). NY: Brunner/Mazel.

Janoff-Bulman, R., (1982). Esteem and control bases of blame: "Adaptive" strategies for victims versus observers. *Journal of Personality*, 50(2), pp. 180-192.

Kenney, J. S., (2002). Victims of crime and labelling theory: a parallel process? *Deviant Behavior*, 23, 235-265.

McGrath, M. (2014). Psychological Aspects of Victimology. In B. E. Turvey (Ed.), *Forensic Victimology: Examining Violent Crime Victims in Investigative and Legal Contexts* (2nd ed.) (pp. 207-251). San Diego: Academic Press.

Norris, F. H. and Kaniasty, K., (1994). Psychological Distress Following Criminal Victimization in the General Population: Cross-Sectional, Longitudinal, and Prospective Analyses. *Journal of Consulting and Clinical Psychology*, 62(1), 111-123.

Orth, U. (2002) Secondary victimization of crime victims by criminal proceedings. *Social Justice Research*, 15(4), 313-325.

Ruback, R. B., & Thompson, M. P. (2001). *Social and psychological consequences of violent victimization*. Thousand Oaks, CA: Sage Publications.

Symonds, M. (1975). Victims of violence: Psychological effects and aftereffects. *American Journal of Psychoanalysis*, 35(1), 19-26.

Symonds, M. (1980). The 'second injury' to victims. *Evaluation and Change*, 7(1), 36-38.

Turvey, B. E. (2014). Vicinity: Entering the Criminal Justice System. In B. E. Turvey (Ed.), *Forensic Victimology: Examining Violent Crime Victims in Investigative and Legal Contexts* (2nd ed.) (pp. 31-65). San Diego: Academic Press.

Wirtz, P. W. & Harrell, A.V. (1987). Victim and Crime Characteristics, Coping Responses, and Short- and Long-Term Recovery from Victimization, *Journal of Consulting and Clinical Psychology*, 55(6), 866-871.

2.4. Victims and/in the Criminal Justice System

SUGGESTED DURATION

30-40 MINUTES

OBJECTIVES

- SENSITIZE THE PARTICIPANTS ON VICTIMS' EXPECTATIONS WHEN REPORTING A CRIME
- RAISE THEIR AWARENESS ON THE DIFFERENT PERSPECTIVES BETWEEN THE VICTIMS AND THE LAW ENFORCEMENT
- DISCUSS HOW POLICE CONTESTING VICTIMS' STATEMENTS MAY RESULT TO SECONDARY VICTIMIZATION

Outline

STEP 1 – Reporting a crime

- Use the information below to discuss with the participants the reasons for reporting a crime, as well as the victims' motives and expectations when they report a crime.
- Summarize the discussion by presenting the bullet points below.
- Note the conflict between the needs and expectations of the victims and those of the criminal justice system.

The most common reasons for reporting a crime are:

- the prevention of revictimization of themselves or others,
- the belief that offenders should get arrested and punished,
- the need for mental, medical, and psychological help or support,
- or the fact that the crime was witnessed or reported by someone else and was not therefore their own decision.

The motive behind a victim's decision to come forward is usually one, or a combination, of the following:

- punishment of the offender,
- rehabilitation of the offender,
- restitution for expenses (e.g. losses or medical costs).

What victims expect and desire when they report a crime is for the criminal justice system to:

- act immediately,
- apprehend the offender,
- and eventually sentence him/her.

What victims need and desire is to:

- be believed,

- be treated with empathy and respect,
- and not be neglected or forgotten.

They expect the authorities to appease these feelings, calm them down and offer them support, restore their sense of control and balance, and eventually relieve their feeling of helplessness.

In turn, what criminal justice authorities are seeking is for people to:

- report the crimes,
- identify the offenders,
- and testify in court.

In practice, however, it is often the case that the needs and expectations of the victims and those of the criminal justice system come in conflict. Karmen³⁰ classifies these areas of conflict into two main categories:

1. those stemming from the professional demeanor of police officers and
2. the challenging of victims' statements and account of events.

STEP 2 – Different Perspectives

- Following the conclusion in the previous step, use the information below to present the different perspectives between the victims and the law enforcement authorities.
- Draw the link with the secondary victimization: Conclude that this difference in the perspectives of the two is where the conflict rises and, the secondary victimization and 'power struggle' of the victims begin.

Law enforcement and police officers, as the first representatives of the criminal justice system that victims encounter, are tasked with enforcing the law and upholding the victims' rights. Their principal duty is to solve the crime, and not that of supporting the victim and its needs. An objective and unemotional approach toward the case, and thus the victim, and the maintenance of a professional behavior are significant for the work of police officers, prosecutors, and judges.

Moreover, as all professionals in similar situations, police officers tend to detach emotionally from the cases, in an effort to protect themselves from the pain and suffering they deal with on an everyday basis. They try to put a distance between themselves and the victims and not to get too involved. They construct a 'working personality' so that they can remain objective and avoid burnout. They eventually become desensitized to such events. This difference in the perspective of the two is where the conflict rises, and the secondary victimization of the victims begins.

Although not all victims entering the criminal justice system have the same needs, the one constant that all the conflicts have in common during the investigative stage is the 'power struggle', that *'feeling of powerlessness that victims feel as a result of the unequal nature of the victim-criminal justice worker relationship'*³¹.

³⁰ Karmen, A. (2010). *Crime victims: An introduction to victimology* (7th ed.). Belmont, CA: Wadsworth Cengage Learning.

³¹ Goodrum, S. (2007). Victims' Rights, Victims' Expectations, and Law Enforcement Workers' Constraints in Cases of Murder. *Law & Soc. Inquiry*, 32, 725-757, p. 727.

Examples of different perspectives	
Law Enforcement	Victims
Self-protection	Perceive them as uninterested, unconcerned, apathetic, remote
Control the investigative process	Lack of control, frustration, powerlessness
Objective and professional context	Personal and emotional context
Objective, unemotional approach to the case	Perceive the police's approach as apathetic or dismissive
Desire to solve the case	Desire to satisfy needs
Organization/ bureaucracy/ standardization	Perceive them as impersonal
Provide promises and assurances to keep them informed and try their best	Which are soon forgotten
The case is one of many	The case is an extremely traumatic event
Police norms and subculture	Perceived as business-like
Desensitized	Hypersensitive
Not always at liberty to share all the information for a case	Victims need the information to make sense of the situation, find an explanation and restore the notion of justice
Inappropriate/ Unable/ Unauthorized/ Unqualified to provide assistance, comfort, counselling and support	The lack thereof results into feelings of rejection, betrayal, and disappointment

STEP 3 – Contesting a victim’s account of events

- Following the conclusion in the previous step, use the information below to discuss how the police may contest the victim’s statement due to various reasons.
- Conclude that contesting a victim’s account of events may further extend the secondary victimization of the victim.

Part of a police officer’s work is to examine the validity of victim’s statement, verify the facts and treat each complaint as ‘presumptive’, since false claims and allegations are often and unlawful. On the other hand, a victim that takes the difficult decision to report a crime, or even worse, is put into that position without their will, takes as given the fact that their version of events will be believed. As in fact the fear that the authorities won’t believe them, is one of the most important reasons for underreporting.

Empirical evidence suggests that the following cases are in fact quite often in police departments across the world:

- **downgrading or misclassification:** the case when a serious offence is classified into the system as a less serious one.
- **unfounding:** the process of rejecting a victim’s complaint as false or baseless, unable to be proven in court. Although a legitimate process in some cases, it should be the result of careful examination.

- **defounding:** the case when the police believes that the crime occurred but considers it to be less serious than stated by the victim.
- **victim discouragement:** deliberately dissuading a victim from filling an official report, by convincing them that reporting the incident might put them in a more difficult situation, that the case will not stand in court, that there will be a long and difficult process and so on.

Various reasons for why such practices are used could be suggested:

- inexperience
- lack of time or resources
- personal biases and beliefs
- laziness and avoidance of investigative or red-tape work
- pressure from supervisors
- improving clearance rates
- reducing the statistical crime rates
- pressure/polices/expedience

Resources:

Doerner, W. G. & Lab, S. P. (2012). *Victimology* (6th ed.). Burlington, MA: Elsevier/Anderson Publishing Company.

Erez, E. & Laster, K. (1999). Neutralizing victim reform: legal professionals' perspectives on victims and impact statements. *Crime and Delinquency*, 45, 530-553.

Erez, E., & Rogers, L. (1999). Victim Impact Statements and Sentencing Outcomes and Processes: The Perspectives of Legal Professionals. *British Journal of Criminology*, 39(2), 216-239.

Goodrum, S. (2007). Victims' Rights, Victims' Expectations, and Law Enforcement Workers' Constraints in Cases of Murder. *Law & Soc. Inquiry*, 32, 725-757.

Goodrum, S. & Stafford, M., (2003). The management of emotions in the criminal justice system. *Sociological Focus* 36 (3), 179-196.

Janoff-Bulman, R. (1985). The aftermath of victimization: Rebuilding shattered assumptions. In C.R. Figley (Ed.), *Trauma and Its Wake. Volume I: The Study and Treatment of Post-Traumatic Stress Disorder* (pp. 15-35). NY: Brunner/Mazel.

Janoff-Bulman, R., (1982). Esteem and control bases of blame: "Adaptive" strategies for victims versus observers. *Journal of Personality*, 50(2), pp. 180-192.

Karmen, A. (2010). *Crime victims: An introduction to victimology* (7th ed.). Belmont, CA: Wadsworth Cengage Learning.

Konradi, A. (1997). Too little, too late: prosecutors' precourt preparation of rape survivors. *Law and Social Inquiry* 22, 1-54.

Stenross, B. & Kleinman, S. (1989). The highs and lows of emotional labor: detectives' encounters with criminals and victims. *Journal of Contemporary Ethnography*, 17, 435-452.

Symonds, M. (1980). The 'second injury' to victims. *Evaluation and Change*, 7(1), 36-38.

Turvey, B. E. (2014). *Victimhood: Entering the Criminal Justice System*. In B. E. Turvey (Ed.), *Forensic Victimology: Examining Violent Crime Victims in Investigative and Legal Contexts* (2nd ed.) (pp. 31-65). San Diego: Academic Press.

Van Dijk, J.J.M., Manchin, R., Van Kesteren, J., Nevala, S., & Hideg, G. (2005). *The Burden of Crime in the EU. Research Report: A Comparative Analysis of the European Crime and Safety Survey (EU ICS) 2005*. Retrieved from: http://www.unicri.it/services/library_documentation/publications/icvs/publications/ [Last accessed: 25 May 2018].

Van Dijk, Jan, Van Kesteren, John, Smit, Paul, Tilburg University, UNICRI, UNODC, (2007) *'Criminal Victimization in International Perspective: Key Findings from the 2004-2005 ICVS and EU ICS*. The Hague: Ministry of Justice, WODC. Retrieved from: http://www.unicri.it/services/library_documentation/publications/icvs/publications/ [Last accessed: 25 May 2018].

2.5. Victims as Witnesses

SUGGESTED DURATION

30-40 MINUTES

OBJECTIVES

- PROVIDE BASIC KNOWLEDGE REGARDING VICTIMS' AS WITNESSES AND WITNESS INTERVIEWING
- SENSITIZE THE POLICE OFFICERS ON THE ROLE OF THE SYSTEM FACTORS IN AFFECTING THE WITNESS INTERVIEWING
- TO PRACTICE IN IDENTIFYING THE RISK FACTORS AND ACKNOWLEDGE REASONS FOR NOT-REPORTING A CRIME

Outline

STEP 1 – Victims as witnesses

- Use the information provided below to explain the victim's role as a witness and the factors affecting the victim's testimony.
- At the end, note the importance of the system factors during the witness interviewing. Police officers should be aware that their approach and behavior can affect the witness testimony.

A traumatic event, such as experiencing or witnessing a crime, has been defined by Christianson³² as "an event that is new, unexpected and potentially threatening". A crime can have a significant impact and varied effects on victims who, at the same time, are considered the most important witnesses in every criminal trial, since they experience the criminal incident directly and perhaps suffer more harms than other witnesses. A victim's statements to the police about domestic or sexual violence will be used both to charge the attacker with crimes and as evidence for the prosecution.

The recall of the criminal event concerns the subjective perspective of the witness for the incident. As reported in the literature, if the incident has not consequential impact, the memory of the witness will be rather poor and will be weakened in a short time. Instead, the memory will be more 'vivid', detailed and sustained if the event has an impact on the witness.

Witnesses, especially if they are actively involved in crime as victims, are confronted with social and personal attributions about themselves and the society. Therefore, their involvement in a criminal case is the reaffirmation and acceptance of their experiences. Victims are faced with the social reaction of the social environment ("secondary victimization") and can be held responsible for what happened to them, to receive rejections and accusations, and be stigmatized.

³² Christianson, S.-Å. (1992). Emotional stress and eyewitness memory: A critical review. *Psychological Bulletin*, 112(2), 284-309.

In a summary of the factors influencing witness interviews, Kebbell and Wagstaff³³ report that the factors that have been found to affect the quality of witness testimony concern:

- (a) the nature of the crime and the context in which it occurs,
- (b) the personal characteristics of the witness, and
- (c) how the information was recalled.

The main factors influencing witness interviewing can be classified into two main categories³⁴:

- “estimator variables”: these variables concern the characteristics of the crime (e.g. severity, violence, weapon), the characteristics of the offender (e.g. appearance, high, clothing) and the characteristics of the witness (e.g. age, cognitive ability, stress). These factors affect the accuracy of the witness but the criminal justice system cannot control them. Therefore their impact can only be estimated and subsequently used in the assessment of the reliability of the witness testimony.

For example, child witnesses (including victims) constitute one of the most studied target-groups of witnesses. This distrust to the witness statements of children and adolescents is based on research showing that children and adolescents are less able to correctly code, store and recall information because of limited cognitive levels which are gradually developed; are more prone and receptive to third parties’ submission; often confuse reality with fantasy and make wrong assumptions and judgments; and exhibit verbal/linguistic deficiencies; factors which make the accuracy of their statements uncertain.

- “system variables”: the second group of factors refers to variables that are under the control of and can be configured by the criminal justice system. These variables mainly concern the manner and conditions of the witnesses’ interviewing. Wells³⁵ concludes that the “system variables” have, in general, greater usefulness and significance for the justice system. Errors or false statements made by the witness during interviewing are affected not only by the limitations of their cognitive system, but also by the legal system that collects the witness evidence. And therefore the accuracy of the witness testimony can be significantly increased, throughout the criminal justice process and before the trial, by controlling the system variables.

The main system variables which affect the witnesses and their testimonies include:

- Retention interval.
- Interrogative suggestibility and post-event information (e.g. misinformation effect).
- Question structure and types of questions.
- Role prejudices and stereotypes of the interviewer.
- Context of the interview, investigator’s behavior, and interaction with the witness.

³³ Kebbell, M. R. and Wagstaff, G. F., (1999). Face Value? Evaluating the Accuracy of Eyewitness Information. *Police Research Series*, Paper 102. Home Office, Policing and Reducing Crime Unit, p. v.

³⁴ Wells, G. L., (1978). Applied Eyewitness-Testimony Research: System Variables and Estimator Variables. *Journal of Personality and Social Psychology*, 36(12), 1546-1557.

³⁵ Ibid

STEP 2 – Conclusion

- Use the information below as a conclusion of the module.

For both victims and criminal justice practitioners to achieve their respective goals and needs, a cooperative relationship is required that allows both parties to retain the feelings of equality through the respect of the position of the other.

If the victims encounter positive experiences during the criminal justice proceedings, their ability to cope will be improved, as the negative emotions and effects of their victimization will be controlled. For example, victims of sexual offences are most likely to receive specialized support after reporting the crime to the police.

Communicating with and interviewing victims, especially those who have special needs due to personal or situational characteristics, requires for the police staff to demonstrate certain skills. Such skills include the ability of appropriate decision making within appropriate time; specific knowledge of the psychology of victims; verbal and nonverbal communication skills and active listening; the ability to establish rapport; confidence and objectivity; appropriate use of questioning; as well as the ability to remain patient and professional while showing empathy when necessary.

Resources:

Alexiades, S., (2006). *Ανακριτική [Interrogation]*. Athens-Thessaloniki: Sakkoulas publications.

Christianson, S.-Å. (1992). Emotional stress and eyewitness memory: A critical review. *Psychological Bulletin*, 112(2), 284-309.

Kapardis, A. (2014). *Psychology and Law – A Critical Introduction*, (4th ed.). New York: Cambridge University Press.

Kebbell, M. R. and Wagstaff, G. F., (1999). Face Value? Evaluating the Accuracy of Eyewitness Information. *Police Research Series*, Paper 102. Home Office, Policing and Reducing Crime Unit.

Kenney, J. S., (2002). Victims of crime and labelling theory: a parallel process? *Deviant Behavior*, 23, 235-265.

Loftus, E. F., (1981). Reconstructive Memory Processes in Eyewitness Testimony. In B. D. Sales (Ed.), *The Trial Process*. New York and London: Premium Press.

Owen-Kostelnik, J., Reppucci, N. D. and Meyer, J. R., (2006). Testimony and Interrogation of Minors. Assumptions about Maturity and Morality. *American Psychologist*, 61(4), 286–304.

Pakes, F., and Pakes, S., (2009). *Criminal Psychology*. USA: Willan Publishing.

Quas, J. A., (2002). The Child Witness. In *Encyclopedia of Crime and Punishment*. SAGE Publications. Retrieved from: http://www.sage-ereference.com/crimepunishment/Article_n58.html [Last accessed: 15 June 2018].

Seelau, S. M., and Wells, G. L., (1995). Applied Eyewitness Research: The Other Mission (Comment). *Law and Human Behavior*, 19(3), 319-324.

Shepherd, E., Mortimer, A., Turner, V., and Watson, J., (1999). Spaced Cognitive Interviewing: Facilitating therapeutic and forensic narration of traumatic memories. *Psychology, Crime & Law*, 5(1),

117-143.

Stockdale, J. E., (1993). 'Management and Supervision of Police Interviews'. Police Research Series: Paper No. 5. London: Home Office Police Department.

Van Dijk, Jan, Van Kesteren, John, Smit, Paul, Tilburg University, UNICRI, UNODC, (2007) '*Criminal Victimization in International Perspective: Key Findings from the 2004-2005 ICVS and EU ICS*'. The Hague: Ministry of Justice, WODC. Retrieved from: http://www.unicri.it/services/library_documentation/publications/icvs/publications/ [Last accessed: 25 May 2018].

Wells, G. L., (1978). Applied Eyewitness-Testimony Research: System Variables and Estimator Variables. *Journal of Personality and Social Psychology*, 36(12), 1546-1557.

Yuille, J. C., Marxsen, D., and Cooper, B., (1999). Training Investigative Interviewers: Adherence to the Spirit, As Well As the Letter. *International Journal of Law and Psychiatry*, 22(3-4), 323-336.

Module 3

Gender and Child-Specific Issues

3.1.

Gender-specific issues: Domestic and Sexual Violence

SUGGESTED DURATION

70-90 MINUTES

OBJECTIVES

- ENGAGE THE PARTICIPANTS IN THE TRAINING
- INCREASE THE PROFESSIONALS' AWARENESS ON GENDER-SPECIFIC ISSUES DURING THEIR COMMUNICATION WITH WOMEN VICTIMS OF CRIME
- PROVIDE BASIC KNOWLEDGE REGARDING GENDER-BASED VIOLENCE, DOMESTIC VIOLENCE, AND SEXUAL ABUSE
- PROVIDE BASIC KNOWLEDGE REGARDING THE DIFFERENT FORMS AND THE RANGE OF OFFENSIVE BEHAVIORS AND ACTIONS WITHIN DOMESTIC VIOLENCE
- IDENTIFY THE DIFFERENT FORMS OF ABUSIVE BEHAVIORS
- ADDRESS COMMON MYTHS SURROUNDING DOMESTIC AND SEXUAL VIOLENCE
- CHALLENGE STEREOTYPICAL PERCEPTIONS ABOUT THE VICTIMS AND THE PERPETRATORS, ESPECIALLY RELATED TO GENDER-INEQUALITY
- ENCOURAGE PARTICIPANTS TO OBTAIN MORE ACCURATE INFORMATION ABOUT DOMESTIC VIOLENCE AND SEXUAL VIOLENCE AND STRENGTHEN THEIR MOTIVATION TO HELP THE VICTIMS

Outline

STEP 1 – Gender-based violence (GBV)

- Use the information provided below as an introduction to the gender-specific issues, and especially gender-based violence.
- It might be useful to use and present facts and figures reflecting the international aspect of the issue (e.g. research data by the World Health Organization: <http://www.who.int/news-room/fact-sheets/detail/violence-against-women>), as well as national data on the phenomenon in your country, aiming to pass the message that gender-based violence still exists and affect us all as a society. It should also be highlighted that such research data are usually based only on crimes reported to the authorities and, thus, do not necessarily reflect the actual prevalence of gender-based victimization.
- Ask the participants which forms of GBV are aware of. Then present the main forms of GBV. You may use practical examples to help participants understand the different forms of GBV.
- Inform the participants that the training will focus on domestic and sexual violence, since these two forms of GBV are broad enough to cover the main points of the other forms of GBV as well.

“Gender-based violence” (GBV) is rooted in gender inequality, a form of discrimination. The Victims’ Directive acknowledges that GBV refers to the “violence that is directed against a person because of that person’s gender, gender identity or gender expression or that affects persons of a particular gender disproportionately”³⁶.

The term is often used interchangeably with “violence against women”, since international evidence shows that women and girls are most at-risk and affected by GBV (e.g. research data by the WHO published in 2013 suggest that about 1 in 3 women worldwide have experienced either physical and/or sexual intimate partner violence or non-partner sexual violence in their lifetime).

According to the Council of Europe Convention on preventing and combating violence against women and domestic violence (known as and hereinafter referred to as the Istanbul Convention), “gender-based violence against women” shall mean violence that is directed against a woman because she is a woman or that affects women disproportionately”³⁷.

Forms of GBV include:

- violence in close relationships, and domestic violence,
- sexual violence (including rape, sexual assault and harassment),
- human trafficking,
- slavery,
- harmful practices, e.g. female genital mutilation, forced marriages,
- femicide, e.g. honor- and dowry- related killings,
- violence against women in humanitarian and conflict settings (e.g. sexual harassment and violence in refugee camps).

STEP 2 – Definition of Domestic Violence (DV)

- Use the information below as an introduction to domestic violence.
- Ask the participants how often they interact with victims of DV.

Domestic Violence (DV) is a general term that describes any form of physical aggression between family members, as well as household members, or intimates. According to the Istanbul Convention, domestic violence is defined as “all acts of physical, sexual, psychological or economic violence that occur within the family or domestic unit or between former or current spouses or partners, whether or not the perpetrator shares or has shared the same residence with the victim”³⁸.

Victims of DV may be:

- Dating and Intimate partners
- Spouses

³⁶ Directive 2012/29/EU of the European Parliament and of the Council of 25 October 2012 establishing minimum standards on the rights, support and protection of victims of crime, and replacing Council Framework Decision 2001/220/JHA, OJ L 315, 14.11.2012, p. 57–73. Retrieved from: <http://eur-lex.europa.eu/legal-content/en/TXT/?uri=CELEX:32012L0029> [Last accessed: 25 May 2018], rec. 17.

³⁷ Council of Europe (2011). Convention on preventing and combating violence against women and domestic violence. Council of Europe Treaty Series - No. 210, Istanbul, art. 3(d).

³⁸ Ibid, art. 3(b).

- Children
- Family members
- Other cohabitants.

STEP 3 – Forms and Types of DV

- Use the information below to inform the participants about the forms and types of DV.
- Stress the fact that forms of DV can also be manifested by using the new technologies, e.g. in the internet/social media.
- You may use practical examples or ask the plenary to share examples from their work experience.

Domestic violence can occur in many forms of abuse:

- **Physical Abuse:** the most recognizable form of DV. It includes the use of force against a person or acts that cause physical harm to the victim, e.g. hitting, punching, slapping, biting, battering, shoving, pulling hair, burning, stabbing, cutting, pinching, shooting, choking, denying medical treatment, forcing drug/alcohol use, etc. Note: the features of an injury can vary, be less or more serious, but all consist evidence of a DV incident or history and should not be ignored.
- **Psychological abuse:** involves acts of the abuser that invoke fear with the use of intimidation; threats to cause physical harms (e.g. hit, injure, use of a weapon) to the victim, children, other family members, him-/herself, or even friends or pets; or threats to destroy property; or by isolating the victim from his/her social environment, e.g. obstruct or prohibit the victim from going to work or school or other social activities.
- **Emotional abuse:** involves acts that aim to invalidate or destruct the victims' self-esteem or sense of self-worth, such as constant criticism, insult, or humiliation (e.g. name-calling, interfering with or degrade the victims' abilities), cause damage in the victims' relationship with his/her children, or using the male privilege.
- **Sexual abuse:** refers to coercive acts, or attempts of assault, or harassment by the abuser towards the victim into having sexual contact or sexual behavior without the victim's consent. This form of violence may take the form of marital rape, attack, or causing harm to sexual body parts, physical abuse that is followed by forced sexual intercourse, sexually demeaning the victim, or telling sexual jokes at the victim's expense.
- **Economic abuse:** refers to cases when the abuser makes or tries to make the victim financially dependent to him/her, e.g. by maintaining total control over or withholding the victim's access to financial resources (e.g. going to the bank, or use credit card), obstructing or prohibiting the victim from going to work or school.
- **Stalking:** refers to continuously/repeatedly threatening or harassing behaviors and/or acts that make the victim fear for his/her safety, which can include following or shadowing, or spying the victim, showing up at the victim's home or workplace, making phone calls or leaving written messages, sending gifts, vandalizing property.
- **Spiritual abuse:** includes actions such as using the partner's religious or spiritual beliefs to manipulate them, preventing him/her from practicing their religious or spiritual beliefs, criticizing, or insulting the other person's religious or spiritual beliefs, forcing the children to support or reared in a religion or spiritual beliefs that the partner has not agreed to.

These forms of DV can also be manifested by using the new technologies, e.g. in the internet/social media, in the form of online violence. Examples of online violence include:

- **Cyberstalking:** involves acts of repeated and/or threatening behaviors (e.g. emailing, sending messages, following/spying the victim's profiles in social media) that cause emotional distress in the recipient – victim.
 - > The abuser sends threatening and/or insulting messages via mobile phone or the internet.
 - > The abuser writes or posts something offensive and/or humiliating about the victim on the internet (e.g. text with sexual content, or nude pictures or video of the victim).
 - > The abuser controls the victim's activity and/or accounts on social media and demands to take actions against the victim's will (e.g. has the password and access on the account, checks any personal messages or sends messages to friends, "unfriend" or "block" some friends, monitors the Wall and the "likes", checks where the victim "checked in")
 - > The abuser steals the victim's identity on social media, pretending to be that person (the victim).
- **Sexting:** the abuser writes or posts sexual content about the victim on the internet (e.g. text with sexual content, sexual comments or messages, or nude pictures or video of the victim, sexual messages, or images with other partners). He/she may also force the victim to send sexual content (e.g. text, images, videos) to friends or post them in public. Such content is posted deliberately and may take the form of online sexual harassment; it is offensive, embarrassing, and humiliating for the victims (and for their families) and may be used in an effort to intimidate or retaliate the victim.

Important Notes:

- Same-Sex Domestic Violence experienced by LGBTIQ people includes the same types of DV as those experienced by heterosexuals. However, same-sex DV can also take the form of threats or acts of revealing their sexual orientation.
- Following the Johnson Typology of Intimate Personal Violence³⁹, it is worth mentioning some types of DV and intimate personal violence (IPV):
 - > **Intimate violence** is a particular type of domestic violence that occurs when a current or former intimate relationship partner becomes physically violent toward the other. It does not necessarily involve people who live together, but those involved must be or have been involved in a deep personal relationship of some kind. Often it is a sexual or romantic relationship (sometimes referred as dating violence), although it can involve non-sexual relationships. In cases of intimate violence, barring mental disorder or defect, the motivation is almost exclusively about power, anger/revenge, profit, or some combination.
 - > **Intimate terrorism** is a type of IPV "in which violence is one tactic in a larger pattern of power and control. It involves more frequent per-couple incidents, more severe

³⁹Johnson, M. (2006). Conflict and control: gender symmetry and asymmetry in domestic violence. *Violence Against Women*, 12 (11), 1003–1018, pp. 1009-1010.

violence, and results in more serious injury”⁴⁰. In this type of IPV, the perpetrator is violent and controlling, but the victim is not.

- > **Situational couple violence** refers to violent incidents that were caused as isolated reactions to specific disagreements or conflicts. This type of IPV does not constitute part of a larger pattern of power and control, since none party of the relationship is violent and controlling, but the perpetrator acts violently during the incident.
- > **Mutual violent control** is the type of IPV when both parties of the relationship are violent and controlling.
- > **Violent resistance** occurs when a female victim defends herself against her aggressive male partner. In this case, the victim is only violent, not controlling.

STEP 4 – Power and control in intimate violence (power imbalances)

- Ask the participants to share examples from their experience, which show how abusive behaviors are manifested (both in person and online). E.g. what kind of acts/phrases/behaviors does the abuser may use to intimidate the victim? Or to coerce the victim? Or use the male privilege? Or use the children?
- Avoid being limited to common examples. Draw their attention to types of abusive behaviors which may be hidden, e.g. behaviors which use the male privilege, or use the children, or result in economic abuse, or minimizing the significance of the abusive incident and blaming the victim.
- You may find useful to present the ‘Power and Control Wheel’: <https://www.theduluthmodel.org/wheels/>
- Using the examples of abusive behaviors, explain the perplexing dynamic of power and control in DV and IPV.
- Conclude that:
 - > DV can extent from a single act to a pattern of abusive behaviors.
 - > DV cases may include a range of abusive behaviors that the abuser uses to control the victim and destruct the victim’s self-esteem.
 - > DV frequently escalates.
 - > The significance of a DV case can be determine not only by the law, but most importantly by the victim’s attributions regarding his/her victimization.
 - > To this end, police officers should not ignore ‘less significant’ abusive behaviors.

DV cases frequently escalate. This means that DV can begin with occasional violence or aggressive incidents which escalate into more serious and repeated abuse, and even murder. Domestic homicide (sometimes referred as crimes of passion) occurs when one family or household member, or intimate partner kills another. It can be the culmination of long-term abuse and may occur in association with drug and alcohol abuse.

A perplexing dynamic is developed as the DV evolves. This dynamic is characterized by a pattern of abusive behaviors used by the perpetrator to intentionally dominate and control the victim.

⁴⁰Turvey, B. E. (2014). Victimity: Entering the Criminal Justice System. In B. E. Turvey (Ed.), *Forensic Victimology: Examining Violent Crime Victims in Investigative and Legal Contexts* (2nd ed.) (pp. 31-65). San Diego: Academic Press, p. 319.

STEP 5– Sexual violence: Definition and Types

- Use the information provided below as an introduction to sexual violence
- Ask the participants to describe how often they interact with victims of SV

Sexual violence (SV) refers to “any sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances, or acts to traffic, or otherwise directed, against a person’s sexuality using coercion, by any person regardless of their relationship to the victim, in any setting, including but not limited to home and work”⁴¹.

Sexual violence can be manifested in many forms, some of which are:

- rape within marriage (spousal rape),
- rape in dating relationships or by acquaintances,
- rape by strangers,
- undesirable sexual advances and/or sexual harassment (at school, work etc.),
- systematic rape, sexual slavery, and other forms of violence (e.g. forced impregnation) in humanitarian and conflict settings,
- sexual abuse of mentally or physically disabled people (e.g. elderly),
- sexual abuse and exploitation of children (see section 3.8 Child-specific issues),
- ‘customary’ forms of sexual violence, such as forced marriage (including forced marriage of children),
- harmful practices against the sexual integrity of women, e.g. female genital mutilation (FGM), obligatory inspections for virginity;
- denial to use contraception or to measures to protect against sexually transmitted diseases,
- forced abortion,
- forced prostitution and trafficking of people for the purpose of sexual exploitation.

Important Notes:

- Making profit is the main goal for many of these forms of sexual violence, especially in the case of trafficking and prostitution.
- These forms of sexual violence can also use various electronic means to achieve their goals, e.g. online advertisement, sexting, electronic forums, etc.

STEP 6 – Exercise: Myths and Facts:

- Explain to the participants that they will now discuss common beliefs surrounding domestic and sexual abuse (Important note: avoid referring to these as stereotypes or myths, i.e. don’t give a negative aspect or the impression that what will follow will criticize personal beliefs).
- Ask the participants to express their thoughts about how society and/or themselves perceive domestic and sexual violence. Examples of questions:
 - > How do you think that society perceives or reacts to domestic and sexual violence?
 - > Based on your experience, what do you think about DV or SV? To what extent it is acceptable?

⁴¹Krug, E.G., Dahlberg, L.L., Mercy, J.A., Zwi, A.B., & Lozano, R. (Eds.) (2002). *World report on violence and health*. Geneva: World Health Organization, p. 149.

> Think of a DV or sexual abuse case, was it an acceptable behavior? How do you support this?

- Allow the participants to express the examples listed below themselves during the discussion, and briefly discuss each topic/sentence.
- In case the participants have difficulties coming up with examples, use the information below and ask them what they believe about each sentence. Some facts are mentioned under the myths.
- After discussing all or most examples (depending on the time you have spent), make a short conclusion.

Examples of myths concerning domestic and sexual violence

Myth: *A man has the right to exert power over a woman. A woman should tolerate violence for her family's sake.*

Fact: This lies only on social norms and beliefs that promote gender inequality, diminish the value of women, and demonstrate males as the powerful and dominant gender.

Myth: *Domestic violence is a private family matter.*

Fact: The substantial costs and consequences of domestic violence to the individuals, the families, and the society require us to take action, speak up and address the phenomenon. (For more information see Module 2, section 2.3. – What being a ‘victim’ actually means?)

Myth: *Victims provoke their partners' abusive behavior.*

Fact: Victims may express resistance to the abusers' behaviors. A history of violence may underlie. The dynamic of power and control is not static but evolving. Whatever the case, violence and abuse are not acceptable.

Myth: *Women who were raped or beaten wanted it or were in some way 'asking for it'. They deserve what they get.*

Fact: This myth can be associated with the myth that victims provoke somehow the perpetrators. Moreover, it can be linked with the belief that women are responsible for controlling men's sexual urges.

Reality: *Men can be forced to have sex against their will.*

Fact: Even though it is assumed that men can defend themselves (more easily than women and children), research has shown that men can be forced to sexual acts against their will. In threatening situations, both men and women may experience a sense of ‘freezing’ as a form of self-preservation and become more submissive to the assault. In the case of men, the extreme fear or anxiety may provoke their sexual arousal which remains involuntary.

Myth: *Men who are sexually assaulted must be gay.*

Fact: Research evidence “shows that stranger rape is more likely to be by heterosexual than homosexual men and that two-thirds of gang rapes are perpetrated by heterosexual men”⁴².

Myth: *Alcohol and drugs are a major cause of domestic violence.*

Fact: Alcohol and drugs are often associated with DV. Yet, it should be kept in mind that many abusers do not drink or use drugs. Thus, it is not valid to say that alcohol and drugs cause DV, but that abusers often use these factors as an excuse.

Reality: *There are many legitimate reasons that a victim may choose to not to leave an abusive relationship.*

Fact: Victims often seek to leave the abusive relationship in an effort to minimize the abuse and/or protect themselves and their children. Yet, a set of social, economic, and cultural reasons may lead a victim to the decision to remain in an abusive relationship. (For more details see section 3.7 Non-disclosure and non-reporting of domestic and sexual abuse)

Myth: *Trafficking always involves some kind of physical force or abuse, abduction, or deprivation of freedom.*

Fact: Traffickers usually seek legitimate transfer methods, e.g. through travel or employment agencies, during which traffickers are usually perceived as allies by the ‘victims’ (‘recruitment’ and ‘transfer’ stages). During the stage of exploitation, the victims are usually under controlled freedom. At this phase, physical abuse may be used if the victims do not comply with the trafficker’s orders or ‘rules’.

STEP 2 – Availability heuristic

- Following the previous exercise, conclude:
 - Such myths usually involve and reproduce stereotypes that may reflect and/or reinforce social norms and beliefs about gender and gender-inequality.
 - Note that even the victims themselves may support such myths as a way to justify their abuse or due to lack of knowledge.
 - By ignoring the facts that may weaken these myths, we end up unable to address and prevent domestic and sexual violence, to provide proper care to the victims and the perpetrators.
 - > To this end, police officers should be aware that the society does not always correctly interpret domestic and sexual violence. Yet, they should feel confident to seek for accurate information in order to be able to inform and help the victims in any case.

It is important to be aware of the many myths about domestic and sexual violence. Such myths usually involve and reproduce stereotypes that may reflect and/or reinforce social norms and beliefs about gender and gender-inequality. Myths and misconceptions on domestic and sexual violence are often reproduced in the various media. According to Turvey⁴³, popular media usually provide false or distorted information, which are perceived as accurate and reliable by lay people due to the lack of reliable and accurate knowledge or experience; leading to what it is called availability heuristic:

⁴² King, M. (2014). Sexual Assault of Men and Boys. In S. Bewley and J. Welch (Eds.), *ABC of Domestic and Sexual Violence* (pp. 27-29). London, UK: BJM Books, p. 28.

“The *availability heuristic* is in play when judgments are made based on what one can remember rather than on complete or more reliable information. ... it is used for judging the commonality, frequency, or likelihood of events”⁴⁴.

> By ignoring the facts that may weaken these myths, we end up unable to address and prevent domestic and sexual violence, to provide proper care to the victims and the perpetrators.

Resources:

Council of Europe (2011). Convention on preventing and combating violence against women and domestic violence. Council of Europe Treaty Series - No. 210, Istanbul.

Directive 2012/29/EU of the European Parliament and of the Council of 25 October 2012 establishing minimum standards on the rights, support and protection of victims of crime, and replacing Council Framework Decision 2001/220/JHA, OJ L 315, 14.11.2012, p. 57–73. Retrieved from: <http://eur-lex.europa.eu/legal-content/en/TXT/?uri=CELEX:32012L0029> [Last accessed: 25 May 2018].

Doerner, W. G. & Lab, S. P. (2012). *Victimology* (6th ed.). Burlington, MA: Elsevier/Anderson Publishing Company.

Duxbury, F. (2014). Domestic Violence and Abuse. In S. Bewley and J. Welch (Eds.), *ABC of Domestic and Sexual Violence* (pp. 9-16). London, UK: BJM Books.

Feder, G. and Howarth, E. (2014). The Epidemiology of Gender-Based Violence. In S. Bewley and J. Welch (Eds.), *ABC of Domestic and Sexual Violence* (pp. 1-4). London, UK: BJM Books.

Johnson, D., & Van Vonderen, J. (2005). *The subtle power of spiritual abuse: Recognizing and escaping spiritual manipulation and false spiritual authority within the church*. Minnesota: Bethany House Publishers.

Karmen, A. (2010). *Crime victims: An introduction to victimology* (7th ed.). Belmont, CA: Wadsworth Cengage Learning.

King, M. (2014). Sexual Assault of Men and Boys. In S. Bewley and J. Welch (Eds.), *ABC of Domestic and Sexual Violence* (pp. 27-29). London, UK: BJM Books.

Krug, E.G., Dahlberg, L.L., Mercy, J.A., Zwi, A.B., & Lozano, R. (Eds.) (2002). *World report on violence and health*. Geneva: World Health Organization.

Larasi, M. (2014). 'Culture' and Violence. In S. Bewley and J. Welch (Eds.), *ABC of Domestic and Sexual Violence* (pp. 5-8). London, UK: BJM Books.

Sohal, A. and Johnson M. (2014). Identifying Domestic Violence and Abuse. In S. Bewley and J. Welch (Eds.), *ABC of Domestic and Sexual Violence* (pp. 30-36). London, UK: BJM Books.

Turvey, B. E. (2014). Victimhood: Entering the Criminal Justice System. In B. E. Turvey (Ed.), *Forensic Victimology: Examining Violent Crime Victims in Investigative and Legal Contexts* (2nd ed.) (pp. 31-65). San Diego: Academic Press.

⁴³Turvey, B. E. (2014). Victimhood: Entering the Criminal Justice System. In B. E. Turvey (Ed.), *Forensic Victimology: Examining Violent Crime Victims in Investigative and Legal Contexts* (2nd ed.) (pp. 31-65). San Diego: Academic Press, pp. 32-33.

⁴⁴Ibid, p. 33.

Ver Steegh, N. (2005). Differentiating Types of Domestic Violence: Implications for Child Custody. *Louisiana Law Review, Summer, 65*, 1379–1429.

World Health Organization (n.d.). *Violence against women: Global picture health response*. Retrieved from: http://www.who.int/reproductivehealth/publications/violence/VAW_infographic.pdf [Last accessed: 25 May 2018].

World Health Organization, London School of Hygiene and Tropical Medicine, & the Medical Research Council (2013). *Global and regional estimates of violence against women: prevalence and health effects of intimate partner violence and non-partner sexual violence*. Retrieved from: http://apps.who.int/iris/bitstream/10665/85239/1/9789241564625_eng.pdf [Last accessed: 25 May 2018].

World Health Organization (2012). *Intimate Partner Violence. WHO information sheet, series 'Understanding and addressing violence against women'*. Retrieved from: http://apps.who.int/iris/bitstream/10665/77432/1/WHO_RHR_12.36_eng.pdf?ua=1 [Last accessed: 25 May 2018].

3.2. Psychological Responses to Violence and Health Needs

SUGGESTED DURATION

20-30 MINUTES

OBJECTIVES

- SENSITIZE THE PRACTITIONERS ON THE CRIME SPECIFIC SYNDROMES THAT CAN POTENTIALLY OFFER SIGNIFICANT INSIGHT TO THE PSYCHOLOGICAL AND MENTAL STATE OF THE VICTIMS
- INCREASE AWARENESS OF PRACTITIONERS ON THE DIFFICULTIES THAT THE VICTIMS OF VIOLENCE GO THROUGH

Outline

STEP 1 – Crime specific syndromes

- Use the information below to inform the participants about some specific psychological responses to violent crime, such as domestic and sexual violence.
- Note that from a diagnostical perspective, the following crime specific syndromes do not constitute validated or scientifically proven disorders per se, but they can potentially offer significant insight to the psychological and mental state of the victims.
- Conclude that victims who experience one of these syndromes may face difficulties during their interaction with the police officers, especially during interviewing.

Even though, from a diagnostical perspective, they do not constitute validated scientifically proven disorders per se, the following crime specific syndromes can potentially offer significant insight to the psychological and mental state of the victims and increase awareness of the difficulties they go through.

Battered woman syndrome

According to the theory of Battered Women Syndrome (BWS) as suggested by Walker⁴⁵, physical, sexual and/or psychological abuse of women in the context of intimate relationships occurs in a pattern that can be perceived as a cycle of violence. There is an initial period of courtship then followed by a repetition of the following three phases in a cycle:

- tension-building phase: the woman's perception of danger heightens, and she tries to please the batter, which can eventually lead to the delay or escalation of the second phase;
- acute battering incident: the short period of time when the physical or sexual assault takes place;

⁴⁵ Walker, L.E. (1979). *The Battered Woman*. New York, NY: Harper Row; Walker, L.E. (2006). Battered woman syndrome: empirical findings. *Annals of the New York Academy of Science*, 1087, 142-157; Walker, L.E. (2009). *The Battered Woman Syndrome* (3rd ed). New York, NY: Springer.

-loving-contrition phase: the batterer apologizes, asks for forgiveness, and exhibits loving behavior (often called the ‘honeymoon phase’). Sometimes, there is absence of loving behavior, and only a temporary decrease or end of the violence.

A key concept in the BWS is ‘learned helplessness’, which is used to explain why women cannot leave an abusive relationship. The conflicted behavior of the abuser, interchanging loving and abusive behaviors in a random and unpredictable way, develops a psychological dependency, learned helplessness, making the abused woman passive and submissive.

Symptoms experienced by victimized women according to the BWS are:

1. Reexperiencing the traumatic event through intrusive recollections.
2. Hyperarousal and increased levels of anxiety, or hypervigilance.
3. Avoidance behavior and emotional numbing (e.g. depression, dissociation, minimization, repression, denial).
4. Disrupted interpersonal relationships.
5. Distorted body image distortion and/or somatic or physical concerns.
6. Sexual intimacy difficulties.

Rape trauma syndrome

According to the rape trauma syndrome (RTS) as described by Burgess and Holmstrom⁴⁶, victims of attempted or completed rape go through an acute disorganization and a long-term reorganization phase. The emotions of fear and anxiety experienced during the attack might persist through their entire lives.

The acute disorganization phase is characterized by significant disruption of the victim’s life and disorganization.

- The victims will experience:

- Emotional reactions: fear, anger, self-blame, shock, guilt, embarrassment, anxiety, shame, humiliation, degradation, and revenge, fear of injury, mutilation, and death.
- Physical Reactions: trauma from injuries, headaches, sleep and eating disturbances, stomach pains, nausea, vaginal pain or discomfort.

- Victims will react to the trauma in two ways:

1. Expressed: overt behaviors such as crying, hysteria, tenseness, confusion, and volatility.
2. Controlled: ambiguous behaviors such as calmness, shock, and passive appearance.

The Long-term reorganization phase lasts for a longer period and is characterized by:

- fears and phobias increased emotional lability, increased motor activity, intrusive thoughts, flashbacks, dreams, nightmares, difficulties in routine activities, global fear of sex, men, and being alone in crowds;
- significant motor activity with lifestyle changes to avoid revictimization and ensure safety and normal life functioning: change houses, phone numbers, jobs.

⁴⁶ Burgess, A. W., and Holmstrom, L. L. (1974). Rape trauma syndrome. *American Journal of Psychiatry*, 131, 981–986.

Stalking trauma syndrome

Stalking trauma syndrome (STS) has been proposed as a condition that describes the experience of a victim of stalking behavior. Given the fact that staking is not recognized as a traumatic experience, the authors of the STS developed this theory in order to emphasize the adverse, repeated and persistent victimization and helplessness that a victim subjected to stalking behavior endures. Often significantly hindered by the ineffective response of the criminal justice system, the lack of resources and support.

According to STS, a staking victim experiences:

- (1) Cycle of crisis: due to the ongoing nature of stalking the victim believes that there is no end to the cycle that keeps recurring. They remain into a contact state of heightened awareness time that can be described in three phases:
 - i. Crisis phase: the staking behavior begins (harassment, pursuit, attack).
 - ii. Recovery phase: a short period of perceived peace follows.
 - iii. Anticipation phase: the victim constantly expects another strike to soon follow.
- (2) Significant psychological effects: helplessness, hopelessness, anxiety, depression, desperation, loss of control, behavioral changes (e.g. disruption in eating and sleeping habits, social isolation, and hypervigilance), relocation or change of name.
- (3) Recovery-based effective coping tools: the victim has a shift in perspective and realizes that the cycle will eventually come to an end. This realization will allow them to initiate an active involvement and effective coping mechanisms, such as notifying others and having a support system, involving advocates, constructing safety plans (security systems, locks etc.), involve the police, file complaints, obtain protective orders.

STEP 2 – DV and SV Victims' health needs

- Use the information below to inform the participants about the health needs of DV and SV victims.
- Explain to the participants that it is important to be aware of these needs in order to signpost the victims to medical services.

Research shows that violence has a great impact on the victims' health, both immediate and long-term. The consequences of DV and SV on victims' health include:

- Physical consequences: e.g. injuries, fractures, chronic pain syndromes, disabilities, reduced physical functioning, chronic pelvic pain.
- Sexual and reproductive health problems: e.g. gynecological disorders, sexually transmitted infections (STIs), urinary tract infections (UITs), pregnancy complications or miscarriage, unsafe abortion, unsafe sexual behavior.
- Psychological and behavioral consequences: e.g. depression, eating disorders, panic attack, PTSD, alcohol and/or drug abuse, suicidal ideation, or self-harm.
- Fatal health consequences: e.g. maternal mortality, AIDS-related mortality, homicide, or suicide

However, practitioners should have in mind that the impact of violence on the health of a victim may not be always obvious. Yet as Sohal and Johnson⁴⁷, observe:

⁴⁷ Sohal, A. and Johnson M. (2014). Identifying Domestic Violence and Abuse. In S. Bewley and J. Welch (Eds.), *ABC of Domestic and Sexual Violence* (pp. 30-36). London, UK: BJM Books, p. 33.

- “The strong association between abuse and gynecological conditions support linking the clinical presentation to a possible underlying cause.
- Chronic pelvic pain and other gynecological conditions (e.g. STIs, vaginal bleeding, genital irritation, dyspareunia, and recurrent urinary tract infections (UTIs) are more common in abused women.
- A dose-response has been demonstrated between combined sexual and physical abuse and gynecological problems (three-times increased risk).”

Victims of violence and especially of domestic or sexual violence are often in need of medical assistance for traumatic injuries, rape forensic examination, and emergency contraception.

Resources:

Bewley, S. & Welch, J. (Eds). (2014). *ABC of Domestic and Sexual violence*. London, UK: BJM Books.

Burgess, A. W. & Carretta C. M. (2017). Rape and Its Impact on the Victim. In R. R. Hazelwood & A. W. Burgess (Eds.), *Practical aspects of rape investigation: A multidisciplinary approach* (5th Ed.) (pp. 3-17). Boca Raton, FL: CRC Press.

Burgess, A. W., and Holmstrom, L. L. (1974). Rape trauma syndrome. *American Journal of Psychiatry*, 131, 981-986.

Colins, M.J., Wilkas, M.B., (2001). Stalking trauma syndrome. In J.A. Davis (Ed.), *Stalking Crimes and Victim Protection* (pp. 317-334). Boca Raton, FL: CRC Press.

Dalton, M. (2014). Women's, Reproductive and Sexual Health Services. In S. Bewley and J. Welch (Eds.), *ABC of Domestic and Sexual Violence* (pp. 69-71). London, UK: BJM Books.

Duxbury, F. (2014). Domestic Violence and Abuse. In S. Bewley and J. Welch (Eds.), *ABC of Domestic and Sexual Violence* (pp. 9-16). London, UK: BJM Books.

Feder, G. and Howarth, E. (2014). The Epidemiology of Gender-Based Violence. In S. Bewley and J. Welch (Eds.), *ABC of Domestic and Sexual Violence* (pp. 1-4). London, UK: BJM Books.

Krug, E.G., Dahlberg, L.L., Mercy, J.A., Zwi, A.B., & Lozano, R. (Eds.) (2002). *World report on violence and health*. Geneva: World Health Organization.

McGrath, M. (2014). Psychological Aspects of Victimology. In B. E. Turvey (Ed.), *Forensic Victimology: Examining Violent Crime Victims in Investigative and Legal Contexts* (2nd ed.) (pp. 207-251). San Diego: Academic Press.

Sohal, A. and Johnson M. (2014). Identifying Domestic Violence and Abuse. In S. Bewley and J. Welch (Eds.), *ABC of Domestic and Sexual Violence* (pp. 30-36). London, UK: BJM Books.

Walker, L.E. (1979). *The Battered Woman*. New York, NY: Harper Row.

Walker, L.E. (2006). Battered woman syndrome: empirical findings. *Annals of the New York Academy of Science*, 1087, 142-157.

Walker, L.E. (2009). *The Battered Woman Syndrome* (3rd ed). New York, NY: Springer.

World Health Organization (2012b). Health Consequences. WHO information sheet, series 'Understanding and addressing violence against women', Retrieved from: http://apps.who.int/iris/bitstream/10665/77431/1/WHO_RHR_12.43_eng.pdf?ua=1 [Last accessed: 25 May 2018]

3.3. Vulnerabilities and Increased Risk Factors for DV and SV

SUGGESTED DURATION

30-40 MINUTES

OBJECTIVES

- INCREASE AWARENESS ON THE RISK FACTORS FOR DOMESTIC AND SEXUAL VIOLENCE
- ENCOURAGE PARTICIPANTS TO OBTAIN MORE ACCURATE INFORMATION ON DV AND SV AND STRENGTHEN THEIR MOTIVATION TO HELP THE VICTIMS

Outline

STEP 1 – Vulnerabilities and risk factors

- Use the information below to present the increased risk factors for DV and SV.
- The participants may notice that some of these factors may have been mentioned in the previous exercise as myths. Explain that risk factors should not be interpreted as the causes of DV and SV, but as vulnerabilities of the people involved in DV or SV.

Following an ecological model, research indicates that there is a range of risk factors for domestic and sexual violence. These factors can be divided in four groups, as presented below.

Risks factors for domestic and sexual abuse

Individual factors

Victim-related:

- lower educational level
- low income /unemployment
- ethnical minority groups/ migration status
- pregnancy
- disabilities
- sexual orientation
- elderly (especially in relation to neglect)
- history of abuse/violence, e.g. witnessing or experiencing violence as a child, sexual abuse during childhood, prior abusive partners
- previous withdrawal of complaints
- harmful use of alcohol and drugs
- prostitution and victims of trafficking
- mental health

- perceptions that justify the acceptance of violence, e.g. minimization, feeling it is acceptable for a man to beat his wife
- lack of social support
- degree of dependence to the aggressor (economic, social, or emotional)

Perpetrator-related:

- high levels of jealousy
- young age
- lower educational level
- history of violence, e.g. witnessing or experiencing violence as a child, sexual abuse during childhood, prior abusive partners
- harmful use of alcohol and drugs
- personality disorders/ psychopathology, e.g. suicidal or homicidal ideation, borderline personality
- perceptions that reinforce or justify the acceptance of violence, e.g. minimization, feeling it is acceptable for a man to beat his wife
- perception about the gender roles

Relationship factors

- married young
- disparity in educational level, e.g. a woman has a higher level of education than her male partner
- dissatisfaction or conflict in the relationship, divorce
- using male privilege or dominance in the family
- chronic violence
- economic stress
- multiple partners/ extramarital relationship/ concurrent relationships

Community and Societal factors

- norms and beliefs about gender, e.g. low social and/or economic status of women, lack of women's civil rights (e.g. restrictive or inequitable divorce and marriage laws)
- male privilege/ gender-inequitable social norms, e.g. notions of manhood linked with dominance and aggression
- social norms about the family structure, e.g. forced marriage
- poverty
- inadequate or weak legal framework against DV, IPV, sexual abuse
- social acceptance of violence as a way to resolve conflict (cultural)
- urban violence/ "gang culture"
- humanitarian catastrophes, armed conflicts

STEP 2 – Vulnerable groups of victims

- Use the information below to describe some specific vulnerabilities of other groups of victims
- Ask the participants to share their thoughts on these issues.
- Conclude that it is important to:

- > Acknowledge that vulnerable groups of victims may experience secondary victimization frequently. Police officers should acknowledge any personal attributions or stereotypes regarding these groups of victims and seek for more information to gain proper knowledge about their needs.
- > Show sensitivity in the particularities and special needs of the victims in these cases.
- > Gain cultural competence.

Group of victims & Case particularities	Special needs
---	---------------

Elderly

<ul style="list-style-type: none"> ● Abuse may take the form of: <ul style="list-style-type: none"> - <i>neglect and/or abandonment,</i> - <i>domestic violence,</i> - <i>assaults, maltreatment,</i> - <i>financial exploitation,</i> - <i>unreasonable confinement,</i> - <i>institutional abuse (i.e. in nursing homes).</i> ● Abusers may be family members, care givers, neighbors. ● Increased possibilities of emotional distress (e.g. depression). ● Hidden nature of elderly’s victimization. ● Non-disclosure/non-reporting due to the relationship with the abuser, the dependency relationship, disability/ health issues, isolation. 	<ul style="list-style-type: none"> - Increased need for medical care. - Increased need for social support.
--	--

LGBT+ (i.e. queer, questioning, intersex, asexual)

<ul style="list-style-type: none"> ● Abuse may take the form of: <ul style="list-style-type: none"> - <i>hate crime (e.g. homophobic crime),</i> - <i>intimate partner violence,</i> - <i>domestic violence,</i> - <i>sexual abuse,</i> - <i>threats or acts of revealing their sexual orientation.</i> ● Abusers may be males and females in either cases. ● Limited legal rights (e.g. legal definitions of DV which exclude same-sex relationships). ● Societal homophobia and lack of social support, e.g. family and friends not being supportive. ● Role of social perceptions, e.g. the assumption that the violence was among equals (because the victim fights back), resulting in ignoring the power imbalance that can still be present. ● “Transgender persons experience victimization in a unique way, due to the intersection of discrimination on the basis of gender, sexual orientation and gender identity”⁴⁸. ● Non-disclosure/non-reporting due to fear of social perceptions and homophobia. 	<ul style="list-style-type: none"> - Few available services specialized in LGBT+ victims, e.g. not available shelters. - Homophobic and transphobic social perceptions and attitudes. - Limited social support.
--	--

⁴⁸Wolhuter, L., Olley, N., & Denham, D. (2008). *Victimology: Victimization and victims' rights*. London and New York: Routledge- Cavendish, p. 103.

Ethic groups (e.g. Black and Minority Ethnicity - BME)

‘Culture’ plays an important role in this case, e.g. traditions, social pressure.
 May be victims of:

- hate crimes,
- domestic violence,
- sexual abuse,
- religiously motivated crimes,
- forced marriage,
- FMG (female genital mutilation, e.g. clitoridectomy, infibulation, excision),
- honor- and dowry- related killings,
- gang-related violence (especially the youth).

- Increased safety needs.
- Increased needs for medical care (mainly in cases of FMG and other harmful practices).
- Needs related to religious or spiritual beliefs.
- Preference for ethnicity- led services (e.g. BME-led services).
- Professionals’ limited cultural competence.
- Issues of confidentiality during translation.

Victims of Trafficking

- Crime taking place within the country or cross-border.
- Form of organized crime.
- Various purposes of trafficking (e.g. sexual or labor exploitation).
- Use of various means (e.g. fraud, deception, threats, coercion).

- Increased needs for health care.
- Increased safety needs.
- Increased emotional/ psychological support.
- Needs regarding obtaining official documents to prove identity.
- Increased need for cross-border cooperation of authorities.

Other groups, such as prostitutes, homeless, undocumented migrants

- Such groups are usually vulnerable due to their state of living or work.
- Usually perceived as deviant persons or ‘lifestyle choice’, resulting in ignoring their needs.

- Increased needs for health care
- Increased safety needs and shelter

Resources:

Brown, T.N.T. & Jody L. Herman (2015). *Intimate Partner Violence and Sexual Abuse among LGBT people. A review of existing research*. Los Angeles, CA: The Williams Institute.

Busch-Geertsema, V., O’Sullivan, E., Edgar, B. and Pleace, N. (2010). *Homelessness and Homeless Policies in Europe: Lessons from Research*. Brussels: FEANTSA.

Creighton, S.M. (2014). Female Genital Mutilation. In S. Bewley and J. Welch (Eds.), *ABC of Domestic and Sexual Violence* (pp. 72-72). London, UK: BJM Books.

Doerner, W. G. & Lab, S. P. (2012). *Victimology* (6th ed.). Burlington, MA: Elsevier/Anderson Publishing Company.

Duxbury, F. (2014). Domestic Violence and Abuse. In S. Bewley and J. Welch (Eds.), *ABC of Domestic and Sexual Violence* (pp. 9-16). London, UK: BJM Books.

Feder, G. and Howarth, E. (2014). The Epidemiology of Gender-Based Violence. In S. Bewley and J. Welch (Eds.), *ABC of Domestic and Sexual Violence* (pp. 1-4). London, UK: BJM Books.

Fitzgerald, C. & Todd, J. (2014). Perpetrators. In S. Bewley and J. Welch (Eds.), *ABC of Domestic and Sexual Violence* (pp. 46-49). London, UK: BJM Books.

Heise L, & Garcia-Moreno C. (2002). Violence by intimate partners. In Krug E, Dahlberg LL, Mercy JA, et al. (Eds), *World report on violence and health*, pp. 87--121. Geneva (Switzerland): World Health Organization. Retrieved from: http://www.who.int/violence_injury_prevention/violence/global_campaign/en/chap4.pdf [Last accessed 30 May 2017].

Karmen, A. (2010). *Crime victims: An introduction to victimology* (7th ed.). Belmont, CA: Wadsworth Cengage Learning.

Krug, E.G., Dahlberg, L.L., Mercy, J.A., Zwi, A.B., & Lozano, R. (Eds.) (2002). *World report on violence and health*. Geneva: World Health Organization.

Larasi, M. (2014). 'Culture' and Violence. In S. Bewley and J. Welch (Eds.), *ABC of Domestic and Sexual Violence* (pp. 5-8). London, UK: BJM Books.

Martin, F.C. (2014). Elder Abuse. In S. Bewley and J. Welch (Eds.), *ABC of Domestic and Sexual Violence* (pp. 59-61). London, UK: BJM Books.

Sohal, A. and Johnson M. (2014). Identifying Domestic Violence and Abuse. In S. Bewley and J. Welch (Eds.), *ABC of Domestic and Sexual Violence* (pp. 30-36). London, UK: BJM Books.

Todd, J. & Dewhurst, K. (1955). Othello Syndrome: A study in the psychopathology of sexual jealousy, *Journal of Nervous & Mental Disease*, 122(4), 367-374.

Turvey, B. E. (2014). Victimhood: Entering the Criminal Justice System. In B. E. Turvey (Ed.), *Forensic Victimology: Examining Violent Crime Victims in Investigative and Legal Contexts* (2nd ed.) (pp. 31-65). San Diego: Academic Press.

WHO/LSHTM (2010). *Preventing intimate partner and sexual violence against women: taking action and generating evidence*. Geneva/London: World Health Organization/ London School of Hygiene and Tropical Medicine.

Wolhuter, L., Olley, N., & Denham, D. (2008). *Victimology: Victimization and victims' rights*. London and New York: Routledge- Cavendish.

World Health Organization (2012). *Intimate Partner Violence. WHO information sheet, series 'Understanding and addressing violence against women*. Retrieved from: http://apps.who.int/iris/bitstream/10665/77432/1/WHO_RHR_12.36_eng.pdf?ua=1 [Last accessed 22 March 2017].

World Health Organization (2012c). Female genital mutilation. *WHO information sheet, series 'Understanding and addressing violence against women'*, Retrieved from: http://apps.who.int/iris/bitstream/10665/77428/1/WHO_RHR_12.41_eng.pdf [Last accessed 22 March 2017].

World Health Organization (2012d). Human Trafficking. *WHO information sheet, series 'Understanding and addressing violence against women'*, Retrieved from: http://apps.who.int/iris/bitstream/10665/77394/1/WHO_RHR_12.42_eng.pdf [Last accessed 22 March 2017]

3.4. Non-disclosure and Non-reporting of Domestic and Sexual Abuse

SUGGESTED DURATION

30-40 MINUTES

OBJECTIVES

- INCREASE AWARENESS ON REASONS FOR NON-DISCLOSURE AND NON-REPORTING OF DV AND SV

Outline

STEP 1 – Why victims don't report crimes to the police?

- Use the information below to introduce the process involved in deciding to report a crime and the reasons for non-reporting.

The victims' decision whether to report the crime to the police constitutes a complex process that involves:

- a cost benefit analysis, calculations of the costs and benefits (cognitive dimension);
- the existence of a supportive environment and level of social influence (social dimension);
- the emotional intensity of the individual (emotional dimension).

Moreover, the lack of good relations and trust between the public and the police undermines the public's confidence in the criminal justice system. This is often affected by the lack of public knowledge regarding the criminal justice system; the gap between the public's expectations and the actual practical outcomes of the criminal justice procedures; as well as their increased fear of crime and the punitive attitudes of the public.

Generally, the reasons for non-disclosure and non-reporting may include:

- the belief that nothing can be done and that the police will be indifferent;
- the fear or dislike of the police;
- the belief the incident was unimportant;
- the victim's inability to perceive the incident as a crime;
- the resilience and tolerance of victims (perhaps due to the nature of its relationship with the perpetrator, e.g. in intimate relationships);
- the possibility of victims being uninformed about their rights;
- the fear of social stigma.

STEP 2 – The case of non-disclosure of domestic and sexual abuse

- Use the information provided below to present the reasons for non-disclosure and non-reporting of DV and SV.

- Link this theme with secondary victimization, as well as section 2.4. “Victims in/and the CJS”

In parallel, additional reasons affect under-reporting in cases of domestic/intimate violence and sexual abuse. Domestic and sexual violence are crimes with a high dark figure, since the majority of these cases remain unreported. Generally, it appears that victims find it difficult to disclose what they have experienced or take any form of action due to many reasons which are related either to personal circumstances and/or to social circumstances and beliefs. For example, Heise and colleagues⁴⁹ suggest that the decision of a woman whether to leave the violent relationship may be the result of a calculated assessment about how to protect herself and her children. In other cases, the victims may recant, i.e. change his/her story or even withdraw the report and statement in any stage of the criminal proceedings. Such actions usually lead to dropping the charges against the perpetrator.

Moreover, research shows that vulnerable victims, such as victims of sexual and domestic violence, are more susceptible to negative treatment within the criminal justice system. According to Orth⁵⁰, police is one possible source of negative treatment, causing psychological harm and other behaviors associated with secondary victimization, like victim-blaming, and which in turn affects the victims’ ability to cope. Indeed, the concept of interactional injustice, which refers to the interpersonal treatment of the victims and information that they receive from police, suggests that the victims’ interactions with the police may result in secondary victimization.

The victim’s satisfaction regarding their contact with the criminal justice system and the police response is relatively low. The main reasons of dissatisfaction are the police’s indifference or insufficiency to help and catch the offender, and the police’s lack to provide information to victims, while the impoliteness of the police officers is a common reason of dissatisfaction in cases of assault and threats or when the victim is female reporting sexual incidents.

Reasons which may prevent a victim from disclosing and reporting, or push to recant his/her domestic or sexual victimization, may include:

- Personal perceptions about the current situation, e.g. victims try to justify their abuser’s behavior, or minimize the severity of the event.
- Personal perceptions about the future, e.g. victims try to convince themselves that the situation will improve, or that the abuser’s behavior will change (high level of emotional attachment to the perpetrator), or that the violence will escalate even more if the abuser is acquitted or after his/her release.
- Self-blame, i.e. victims believe that it was their fault, or that they somehow provoke the abuser’s behavior.
- Temporary shift in the abuser’s behavior, e.g. actions to express remorse, ask for sympathy.

⁴⁹ Heise L., Ellsberg M., Gottemoeller M. (1999). *Ending violence against women*. Baltimore, MD: Johns Hopkins University School of Public Health, Center for Communications Programs.

⁵⁰ Orth, U. (2002) Secondary victimization of crime victims by criminal proceedings. *Social Justice Research*, 15(4), 313-325.

- Negative feelings of disclosure, i.e. embarrassment/shame, depression, helplessness, guilt.
- Denial as a coping strategy, the desire to protect the offender.
- Safety and security reasons that prevent them from disclosing the situation at that particular time, e.g. fear of retaliation, the fear of repeated victimization, threats from the abuser or other family members or friends, external pressure.
- Economic dependence of the family by the perpetrator. In this case, the victim may consider the abuse as less harmful than having difficulties to support his/her family without the support from the abusive partner (e.g. be homeless).
- Fear that their children will be taken away either from the perpetrator (e.g. abduction) or by the social services (victim to be considered as incapable parent).
- Ignorance or lack of information on the legal framework and/or the existence of victims' services.
- Concerns about confidentiality breaches, e.g. that someone will inform the perpetrator, or publish the case on the media.
- Beliefs that the victim will be mistreated, e.g. the police will do nothing about it, the victim will not be believed or get support, it will be humiliated, or be blamed for what happened or for not leaving earlier.
- Social norms on gender roles and other stereotypes/misconceptions, e.g. the belief that the incident is a private matter, DV victims are always women, DV perpetrators are always men, fear that victim's sexual orientation will be revealed.
- Social stigma, e.g. that men who are victimized are weak.

Many women and girls experiencing domestic violence, sexual abuse, or other harmful practices (e.g. female genital mutilation, forced early marriage, 'honor-based' violence) may be reluctant to go to the police for safety and/or economic reasons and instead will visit a hospital.

At the same time, men's sexual or domestic victimization is still a taboo and is accompanied by discriminating stereotypes regarding their masculinity⁵¹. Yet, it is important to note that when the victims decide to report the crime of abuse/violence to the police, the main reasons for reporting are the desire to prevent the abused from happening again and the need for support.

STEP 3 – Case studies

- Inform the participants that they will now participate in a short exercise with case studies.
- Ask if they would like to share cases of domestic or sexual abuse of either adult or child victims. If yes, allow some time for the participants to write down their case-study. Note that the confidentiality of the persons involved in the case should be ensured.
- If participants have difficulties sharing their stories, you may use the case studies provided below.
- In this case, note that these are fictional stories and any similarities with real persons or cases is not intended.

⁵¹ King, M. (2014). Sexual Assault of Men and Boys. In S. Bewley and J. Welch (Eds.), *ABC of Domestic and Sexual Violence* (pp. 27-29). London, UK: BJM Books.

- The exercise can also be performed by dividing the participants into small groups and asking them to collectively work on a case study.
- For each story/case-study, ask the participants to:
 - a. Identify the forms and/or types of violence.
 - b. Identify if there are other people affected by the crime.
 - c. Identify the risk factors.
 - d. Identify potential reasons for not-disclosing/not-reporting.
 - e. Identify potential protective factors which may provide a supportive framework.

Case study 1 – Helen

Helen is 21 years old and lives with her parents (43-year-old mother and 47-year-old father) and her three siblings (24-year-old Patrick, 20-year-old Melina, and 15-year-old Olga) at rural near a large city. Over the past six months, she has been in a relationship with 23-year-old Joshua, who seems to like her a lot. She works at a gift shop, where she earns a decent wage that allows her to contribute to the household expenses, since her mother is unemployed and her siblings study in college, while Olga is in high school.

Following an intense violent incident during which her father beat her, Helen visits a psychologist. She reveals that her father has been raping her since she was 11 years old. After listening to Helen's story, the psychology urges her to report the abuse to the police. The police arrest her father who is kept detained. Her family reacts to her decision to press charges against her father and asks her to recant, claiming that she has imagined the whole situation seeking revenge from her father because he hit her. Her mother mentions that she had stated similar accusations against her father when she was 15 years old, but she later recanted and apologized.

The recent incident becomes public, and the welfare service visits the family house. Her friends support her as soon as they are informed of the situation. Her boyfriend said that he supports and loves her, even though she feels guilty for having sexual intercourse with him without telling him the truth about her relationship with her father.

Case study 2 – Mihaela

Mihaela is 25 years old and she is from Romania. She traveled to Italy after a friend encourages her and promises that she will find her a job with a good salary. She arrived at the airport accompanied by other two girls from Romania. A woman and two men welcomed them, one of whom stated that he is the lawyer who will arrange their documentation for work, asking that they give him their travel documents.

The girls were taken at an apartment where several foreign men from various countries were living. The girls remained many days in the apartment without receiving any update about their future job, while every time they asked about it, unexplained excuses were presented to them. The attitude of the people who had met at the airport changed to aggressiveness, threatening them about the safety of their families back in Romania. After some days, the girls were taken at a night club down town to work. One day Mihaela is taken at an office along with Muhammad, one of the residents in the apartment who is from Iran. There she was asked to sign some documents which were written in Italian and she could not understand. Even though she requested a translation, she signed them under the threat that they will harm her family.

One night, the police raid the night club and arrest its owner. All employees were taken to the Police Department where they are asked to testify about their work relationship with the club's owner, as there is evidence that the owner is involved in illegal forced marriages between EU nationals and third country nationals. Shortly before the police officer starts interviewing the girls, the lawyer of the club owner arrives at the Police Department. Mihaela realizes that he is the same person who had welcomed them at the airport.

Case study 3 – Karolina

Karolina is 28 years old and comes from Lithuania. She is married to Andreas and they live together in Greece, at the home town of her husband. Recently they had their first child, Maria who is now 4 months old. Karolina resigned from her job, part time waitress, as soon as she found out that she was pregnant. She has studied philology in Lithuania. She has few friends in Greece, most of whom are the wives of her husband's friends.

Karolina decided to go to the police with her baby girl, having visible bruises all over her body. She reports that she is victim of physical abuse by her husband since they got married. She mentions that she had attempted to divorce him twice in the past. She describes how the violence escalated and became more often when she got pregnant. One time she almost had a miscarriage. The abuse continued after she gave birth. However, she notes that the violence is directed only to her, not the baby.

Karolina discloses her victimization to her family in Lithuania, who advise her to go back to Lithuania. She wants to leave the country, but she is afraid that her husband will become more dangerous both towards her and the baby.

STEP 4 – Exercise: Conclusions on gender-specific issues

- Ask the participants to take out two pieces of paper.
- On one piece, ask them to write one or two words about a point or fact that they feel was the most important thing they have learned regarding the gender-specific issues.
- On the other piece, ask them to write up to 3 emotions that they feel about DV and SV.
- Collect all the papers and make two puzzles on each question.
- Allow the participants to express their reflections on contents of the puzzles.
- Thank the participants for their contribution.

Resources:

Bewley, S. & Welch, J. (Eds). (2014). *ABC of Domestic and Sexual violence*. London, UK: BJM Books.

Bonomi, A.E., Gangamma, R., Locke, C.R., Katafiasz, H., Martin, D. (2011). "Meet Me at the Hill Where We Used to Park": Interpersonal Processes Associated with Victim Recantation, *Social Science & Medicine*, 73(7), 1054-1061.

Felson, R.B., Messner, S.F., Hoskin, A.H., & Deane, G. (2002). Reasons for reporting and not reporting domestic violence to the police, *Criminology*, 40, 617-647.

Felson, R. and Pare, P.P. (2005). *The Reporting of Domestic Violence and Sexual Assault by Nonstrangers to the Police*, final report, Grant no. 2003-IJ-CX-1010, U.S. Department of Justice. Retrieved from: www.ncjrs.gov/App/Publications/abstract.aspx?ID=209039 [Last accessed: 25 May 2018].

Frieze, I. H., Hymer, S., & Greenberg, M. S. (1987). Describing the crime victim: Psychological

reactions to victimization. *Professional Psychology: Research and Practice*, 18(4), 299.

Gavrielides, Th. (Ed.) (2014). *A Victim-led Criminal Justice System: Addressing the Paradox*. London: IARS Publications.

Greenberg, M.S. and Beach, S.R., (2004). Property Crime Victims' Decision to Notify the Police: Social, Cognitive, and Affective Determinants. *Law and Human Behavior*, 28(2), 177-186.

Greenberg, M. S. and Ruback, R. B., (1992). *After the Crime: Victim Decision Making*. New York and London: Plenum Press.

Greenberg, M.S., Ruback, R. B. and Westcott, D. R., (1982). Decision Making by Crime Victims: A Multimethod Approach. *Law & Society Review*, 17(1), 47-84.

Heise L., Ellsberg M., Gottemoeller M. (1999). *Ending violence against women*. Baltimore, MD: Johns Hopkins University School of Public Health, Center for Communications Programs.

Jackson, J., Kuha, J., Hough, M., Bradford, B., Hohl, K., Gerber, M., Maffei, S. and Boda, Z. (2014). Trust and legitimacy across Europe: A FIDUCIA report on comparative public attitudes towards legal authority, in S. Maffei and L. Markopoulou (Eds), *FIDUCIA New European Crimes and Trust-Based Policy*, 2, pp. 155-192. Retrieved from: http://fiduciaproject.eu/fiducia_publications [Last accessed: 25 May 2018].

King, M. (2014). Sexual Assault of Men and Boys. In S. Bewley and J. Welch (Eds.), *ABC of Domestic and Sexual Violence* (pp. 27-29). London, UK: BJM Books.

Laxminarayan, M. (2013). Interactional justice, coping and the legal system: Needs of vulnerable victims. *International Review of Victimology*, 19(2), pp. 145-158.

Maffei, S. and Markopoulou, L. (Eds) (2013). *FIDUCIA. New European Crimes and Trust-Based Policy*, volume 1, FP7 research project. Retrieved from: http://fiduciaproject.eu/fiducia_publications [Last accessed: 25 May 2018]

Orth, U. (2002) Secondary victimization of crime victims by criminal proceedings. *Social Justice Research*, 15(4), 313-325.

Roberts, J.C., Wolfer, L., & Mele, M. (2008). Why victims of intimate partner violence withdraw protection orders. *Journal of Family Violence*, 23, 369-75.

Sohal, A. and Johnson M. (2014). Identifying Domestic Violence and Abuse. In S. Bewley and J. Welch (Eds.), *ABC of Domestic and Sexual Violence* (pp. 30-36). London, UK: BJM Books.

Sparks, R. F. (1982). *Research on Victims of Crime: Accomplishments, Issues, and New Directions*. Washington, DC: Department of Health and Human Services.

Van Dijk, J.J.M., Manchin, R., Van Kesteren, J., Nevala, S., & Hideg, G. (2005). *The Burden of Crime in the EU. Research Report: A Comparative Analysis of the European Crime and Safety Survey (EU ICS) 2005*. Retrieved from: http://www.unicri.it/services/library_documentation/publications/icvs/publications/ [Last accessed: 25 May 2018].

Van Dijk, Jan, Van Kesteren, John, Smit, Paul, Tilburg University, UNICRI, UNODC, (2007) *'Criminal Victimization in International Perspective: Key Findings from the 2004-2005 ICVS and EU ICS*. The Hague: Ministry of Justice, WODC. Retrieved from: http://www.unicri.it/services/library_documentation/publications/icvs/publications/ [Last accessed: 25 May 2018].

3.5. Child-specific Issues

SUGGESTED DURATION

20-30 MINUTES

OBJECTIVES

- INCREASE PARTICIPANTS' AWARENESS ON CHILD-SPECIFIC ISSUES AND THE CHILD VICTIMS' NEEDS
- PROVIDE BASIC KNOWLEDGE REGARDING CHILDREN ABUSE AND NEGLECT

Outline

STEP 1 – Children as victims

- Use the information below as an introduction to the child-specific issues.
- It might be useful to use and present facts and figures reflecting the international aspect of the issue (e.g. research data by the Council of Europe and UNICEF: https://www.coe.int/t/dg3/children/1in5/default_en.asp) as well as national data on the phenomenon, aiming to convey the message that child abuse and neglect still exist and affect us all as a society. It should also be highlighted that research data are usually based only on crimes reported to the authorities and, thus, do not necessarily reflect the actual prevalence of child victimization.

Child abuse and maltreatment have been recognized as a global problem, as research evidence reveals that violence against children remains hidden and unreported, even though child victims experience cruel forms of abuse. Moreover, children are often victimized by witnessing violence in their life, especially domestic violence. While previously society was more tolerant to such practices, nowadays these acts of violence, abuse or maltreatment against children are no longer tolerated.

The WHO Consultation on Child Abuse Prevention (1999, p. 15) defines:

“Child abuse or maltreatment constitutes all forms of physical and/or emotional ill-treatment, sexual abuse, neglect or negligent treatment or commercial or other exploitation, resulting in actual or potential harm to the child’s health, survival, development or dignity in the context of a relationship of responsibility, trust or power.”

Indicatively, “WHO estimates that 150 million girls and 73 million boys under 18 experienced forced sexual intercourse or other forms of sexual violence during 2002”⁵².

STEP 2 – Main forms of child abuse and neglect

- Use the information below to present the main forms of child abuse and neglect
- Note that the forms of child abuse and neglect can also be manifested using technology, such as the internet.

⁵² In UNICEF (2006). *An end to Violence against Children: The World Report on Violence Against Children*. Retrieved from: http://www.unicef.org/violencestudy/reports/SG_violencestudy_en.pdf [Last accessed: 25 May 2018].

Child abuse has many forms, which are often interconnected as cases of children who have been abused in multiple ways and/or in multiple settings (e.g. home, school, neighborhood) are frequently encountered. The main forms of child abuse are:

- **Physical abuse:** refers to the harms to the physical integrity of the child, e.g. fractures, injuries, bruises. Physical abuse of children was initially recognized as a problem in the early 60s, after X-ray observations of unexplained childhood fractures and wounds by the American doctor C. Kempe and his associates, who used the term "battered child syndrome" for the first time. Incidents of physical abuse may be single or repeated.
- **Neglect:** is a form of passive abuse which concerns the inadequate or inappropriate - in terms of the person who looks after the child - nutrition, medical care, clothing, housing, schooling and education, emotional support or monitoring of the child to such a degree that ignores or put in serious danger the health and development of the child.
- **Sexual abuse:** refers to the participation or exposure of children and adolescents in sexually explicit acts motivated by another person who is usually having an intimate relationship with the child. When sexual abuse occurs within the family, it is called incest. The purpose of such acts is usually the sexual stimulation and/or satisfaction of the offender. The victims are usually adolescents, because of the development of their genitalia. Many consider child sexual abuse as the ultimate crime of violence. However, there might also be some financial motives. In this case, the commercial aspects of child sexual abuse are referred to as "child sexual exploitation" which includes child pornography and prostitution.
- **Emotional or psychological abuse:** refers to behaviors and acts of intimidation, isolation, exploitation, devaluation, threats, and other delinquent acts that children face. These attitudes and actions prevent the development of a suitable and supportive environment for the child, while jeopardizing the physical, mental, and social development of the child.
- **Other forms of abuse:** include abandonment, substance abuse, Munchausen syndrome by proxy, dystrophy of non-organic origin, non-accidental poisoning, child witness syndrome

STEP 3 – Types of domestic and sexual violence affecting children and young people

- Use the information below to present the types of domestic and sexual violence affecting children and young people

There are many types of domestic and sexual violence which affect children and young people, either as victims or as witnesses of domestic incidents:

- **Child sexual abuse** (already described above), including female genital mutilation and infant male circumcision.
- **Sexual exploitation:** according to UN Optional Protocol on the Rights of the Child on the Sale of Children, Child Prostitution, and Child Pornography⁵³, "sale of children means any act or transaction whereby a child is transferred by any person or group of persons to another for remuneration or any other consideration". As mentioned above, child sexual exploitation includes child pornography and prostitution. According to the same UN Optional Protocol (2000, art. 2b and c), "child prostitution means the use of

a child in sexual activities for remuneration or any other form of consideration”, while “child pornography means any representation, by whatever means, of a child engaged in real or simulated explicit sexual activities or any representation of the sexual parts of a child for primarily sexual purposes”. Child pornographic material is characterized either as hardcore or softcore, depending on the level of sexual abuse suffered by the child victim.

- **Forced marriage:** usually of young girls, and is often related to cultural, religious or spiritual beliefs and practices.
- **Domestic violence from family members:** children may be affected by domestic violence either as direct victims of abuse, or by witnessing the violence towards other family members. Witnessing domestic violence may have great impact on children.
- **Intimate partner violence in adolescent relationships:** including same-sex relationships, usually involves physical, emotional, and/or sexual abuse, while it has been associated with family and peer violence.

Important Notes:

- Child abuse, especially trafficking and sexual exploitation is also manifested with the use of technology (e.g. internet, social media, forums).
- In some ethnic groups and traditions, girls may suffer the consequences of female genital mutilation and infibulation.

STEP 4 – Acute and long-term consequences of violence against children

- Use the information provided below to present the consequences of violence against children

The impact of child abuse affects the physical, sexual, and psychological development of the child, while it may also have long lasting effects. These consequences depend on three factors:

- Severity of abuse.
- Age of the child victim.
- Frequency of abuse.

The table below lists the costs and consequences suffered by victims of child abuse:

Impact of child abuse and neglect

Physical impact:

- Injuries, e.g. abdominal/thoracic injuries, fractures.
- Munchausen syndrome by proxy.
- Disability.

Sexual and reproductive consequences:

- Unwanted pregnancy.
- Sexually transmitted diseases, such as HIV/AIDS.

⁵³United Nations (2000). *Optional Protocol on the Rights of the Child on the Sale of Children, Child Prostitution, and Child Pornography*. Retrieved from: <http://www.ohchr.org/EN/ProfessionalInterest/Pages/OPSCCRC.aspx> [Last accessed: 25 May 2018], art. 2a.

- Reproductive health problems.

Psychological and behavioral impact:

- Alcohol and substance abuse.
- Depression, anxiety, PTSD, eating and somatic disorders.
- Reactive attachment disorder, disinhibited social engagement disorder.
- Low self-esteem, feeling of guilt and shame.
- Poor peer relationships.
- Low school performance.
- Self-harmful behaviors, suicidal ideation, delinquent behavior.

Financial costs:

- Medical care and insurance issues.
- Costs in the case of long-term disability or lost (e.g. death).
- Mental health care.
- Legal costs and Social welfare costs.

Resources:

Doerner, W. G. & Lab, S. P. (2012). *Victimology* (6th ed.). Burlington, MA: Elsevier/Anderson Publishing Company.

Goddard, A. (2014). Children. In S. Bewley and J. Welch (Eds.), *ABC of Domestic and Sexual Violence* (pp. 21-26). London, UK: BJM Books.

UNICEF (2006). *An end to Violence against Children: The World Report on Violence Against Children*. Retrieved from: http://www.unicef.org/violencestudy/reports/SG_violencestudy_en.pdf [Last accessed: 25 May 2018].

UNICEF (2013), *Child protection from violence, exploitation and abuse*, thematic report 2013, Retrieved from: https://www.unicef.org/publicpartnerships/files/Child_Protection_from_Violence_Exploitation_and_Abuse_2013_Thematic_Report.pdf [Last accessed: 25 May 2018].

United Nations (2000). *Optional Protocol on the Rights of the Child on the Sale of Children, Child Prostitution, and Child Pornography*. Retrieved from: [Last accessed: 25 May 2018].

World Health Organization (1999). *Report of the Consultation on Child Abuse Prevention*, Geneva: World Health Organization (document WHO/HSC/PVI/99.1). Retrieved from: <http://apps.who.int/iris/handle/10665/65900> [Last accessed: 25 May 2018].

3.6. Risk Factors and Indicators Related to Child Abuse and Neglect

SUGGESTED DURATION

50-60 MINUTES

OBJECTIVES

- PROVIDE BASIC KNOWLEDGE REGARDING THE RISK FACTORS TO CHILD ABUSE AND NEGLECT
- INCREASE PROFESSIONALS' AWARENESS ON THE INDICATORS OF CHILD ABUSE AND NEGLECT
- PRACTICE IN IDENTIFYING RISK FACTORS AND INDICATORS OF CHILD ABUSE

Outline

STEP 1 – Risk factors

- Use the information below to present the risk factors of child abuse and neglect.
- You may use practical examples or ask to the participants to describe cases from their work experience (note not to mention any information which may reveal the identity of the victim), in order to help the participants to recognize these situations.
- You may link these stories/examples with the next exercise of case studies

Risk factors include those family, personal, and social conditions which the child's vulnerability to abuse or maltreatment of any form. Many of these factors are general risk factors of domestic and sexual violence. According to the World Health Organization⁵⁴, risk factors related to child abuse and neglect can be categorized in a) individual and family factors, and b) community and societal factors.

Risks factors related to child abuse and neglect

Individual and family related factors

- Child and parents age
- Gender of the child and the offender
- Disabled child
- Family structure (e.g. single parent, number of siblings)
- Unwanted pregnancy or child
- Poor parenting skills
- Early exposure to violence
- Substance abuse
- Inadequate prenatal care

⁵⁴ World Health Organization (1999). *Report of the Consultation on Child Abuse Prevention*. Geneva: World Health Organization (document WHO/HSC/PVI/99.1). Retrieved from: <http://apps.who.int/iris/handle/10665/65900> [Last accessed: 25 May 2018].

- Physical or mental illness
- Parent's relationship problems
- Poor socioeconomic status
- Social isolation
- High levels of stress within the family
- History of domestic violence

Community and societal factors

- Non-existent, un-enforced child protection laws
- Decreased value of children (minority, disabled, gender)
- Social inequalities
- Organized violence (e.g. war, armed conflicts, high crime rates)
- High social acceptability of violence
- Media violence
- Cultural norms
- Poverty
- Gender inequalities
- Inadequate welfare system

Especially in the case of trafficking, researchers have categorized the factors affecting these forms of violence into push and pull factors, - i.e. the factors which facilitate and attract development of such forms of violence. More specifically:

- The “push factors” are associated with the countries of origin and include the factors that may lead adults and children to the decision to leave their country. This group of factors includes poverty, unemployment, family breakdown, neglect, violence, conflicts, natural disasters, low levels of education, lack of opportunities, and social inequalities.
- The “pull factors” are associated with the destination countries and refer to the factors that determine in which country the victims will be transferred. Such factors include the economic prosperity of some countries, increased opportunities, increased need for workers, job opportunities, high demand for sex services, peace, prospects of a good marriage and a better life. The migration, organized crime and technology are facilitating factors that increase the profits of exploitation, especially in the case of sex tourism.

STEP 2 – Indicators of child abuse

- Use the information provided below to present some indicators of child abuse and neglect.
- Note that indicators listed are only indicative and should not be consider or used as fixed check-list by practitioners.

It might be difficult to identify child abuse; yet, research has shown that the following are often present:

- There might be sudden changes in the behavior or school performance of the child, e.g. overly passive or aggressive.
- The child seems to have avoided or has not received help for physical injuries or medical problems, and parents seem to pay no attention.

- The victim has difficulties in concentrating or other learning difficulties.
- The victim is always watchful and avoids bodily contact.
- The parent shows little concern for the child.

Signs and indications of child abuse:

- Unexplained burns, bites, bruises, broken bones, or black eyes.
- Changes in appetite.
- Difficulties in walking or sitting.
- Seems frightened of a person (e.g. a parent).
- Avoids bodily contact.
- Extreme passivity, or aggression.
- Delayed physical or emotional development.
- Frequent absence from school.
- Steals or begs for food or money.
- Dirty/ neglected appearance e.g. lacks sufficient clothing.
- Poor personal hygiene.
- States that he/she spends much time alone at home.
- Refusal to participate in physical activities.
- Reports nightmares or bedwetting.
- Bizarre or unusual sexual knowledge or behavior.
- Unexpected pregnancy or sexually transmitted disease.
- Reports sexual or other form of abuse.
- Attempted suicide.

STEP 3 – Exercise: Case-studies of child abuse

- Inform the participants that they will now participate in a short exercise.
- Ask for 3 volunteers who will read the case-studies.
- Note that these are fictional stories and any similarities with real persons or cases is not intentional.
- Start by reading the first case study.
- Ask the participants to identify risk factors and indicators of child abuse.
- Repeat the same process with the other case studies.
- At the end, discuss whether we may use prejudices when dealing with child abuse cases.
- Note that the identification of risk factors should only serve to support the case investigation, and such factors should not be considered as preconditions for the existence of child abuse.

Case study 1 – Nadia

Nadia is 6 years old. She has 2 older brothers who usually play with their friends. Her family's socioeconomic status is relatively low, since there are periods of time that her stepfather is unemployed. The principal calls the police, after Nadia's teacher notices bruises on her arms and legs, and Nadia seems unable and unwilling to explain. When the police arrive, the school counsellor reports that Nadia's behavior has changed over the last month. She has become aggressive with her classmates and during breaks she isolates herself in the classroom. Her teacher mentions that she seems anxious and disturbed every time her stepfather comes to pick her up from school.

Case study 2 – Peter

Peter is 15 years old. His parents are working most hours of the day and rarely spend time with him or his siblings (1 brother and 2 sisters). The police arrest him after he was found using soft drugs at a neighborhood park. His appearance seemed very poor and neglected. He also seems to be hungry. Even though he seems too calm, it is obvious that he is anxious and avoids any bodily contact.

Case study 3 – Marian

Marian is 12 years old and lives with her divorced mother and stepfather. She was hospitalized after an attempted suicide. A police officer is called to interview Marian due to suspicious of abuse, after the doctors noticed abrasions on her legs. When the police officer arrives, she seems to express a quite sophisticated sexual behavior, like she is flirting. The doctors report that it seems that she is not eating sufficiently. Moreover, her hospital file indicates that she had visited the gynecological department about a month ago and received medical care for a sexually transmitted disease. Marian reports that her mother is often away at work and that she is left alone with the stepfather many times.

Resources:

Child Welfare Information Gateway (2007). *Recognizing Child Abuse and Neglect: Signs and Symptoms*. Washington, DC: U.S. Department of Health & Human Services. Retrieved from: <https://www.childwelfare.gov/pubPDFs/signs.pdf> [Last accessed: 25 May 2018].

Clark, M. A. (2003). Trafficking in Persons: an issue of human security. *Journal of Human Development*, 4(2), 247 – 263.

Doerner, W. G. & Lab, S. P. (2012). *Victimology* (6th ed.). Burlington, MA: Elsevier/Anderson Publishing Company.

Heyzer, N. (2002). *Combating Trafficking in Women and Children: A Gender and Human Rights Framework*. New York: UNIFEM (UN Development Fund for Women).

Hodge D. R. and Lietz C. A. (2007). The International Sexual Trafficking of Women and Children: A Review of the Literature. *Affilia (Journal of Women and Social Work)*, 22(2), 163-174.

Staiger, I. (2005). Trafficking in Children for the Purpose of Sexual Exploitation in the EU. *European Journal of Crime, Criminal Law and Criminal Justice*, 13(4), 603–624.

UNICEF (2006). *An end to Violence against Children: The World Report on Violence Against Children*. Retrieved from: http://www.unicef.org/violencestudy/reports/SG_violencestudy_en.pdf [Last accessed: 25 May 2018].

World Health Organization (1999). *Report of the Consultation on Child Abuse Prevention*, Geneva: World Health Organization (document WHO/HSC/PVI/99.1). Retrieved from: <http://apps.who.int/iris/handle/10665/65900> [Last accessed: 25 May 2018].

3.7. Reasons for Non-reporting Child Abuse

SUGGESTED DURATION

20-30 MINUTES

OBJECTIVES

- RAISE AWARENESS OF THE PROFESSIONALS ON THE REASONS THAT CHILD VICTIMS
MAY NOT DISCLOSE OR REPORT ABUSE

Outline

STEP 1 – Child reasons for not reporting

- Use the information below to present the main reasons for non-reporting child abuse.

Most children avoid disclosing their abuse due to personal reasons, reasons relating to their relationship with the offender, and other social reasons. According to research findings, the reasons for non-reporting include:

- developmental age, especially related to the cognitive development and abilities of the child, their memory and attention span;
- sex of the child, e.g. boys seem to find it harder to report their (sexual) abuse and tend to disclose it after a longer period of time;
- relationship to the perpetrator, e.g. the child victims find it difficult to report their abuse if the perpetrator is a family member. Generally, the closest the relationship with the perpetrator, the harder for the child to disclose the abuse;
- fear of reprisal, e.g. due to threats from the abuser or other family members, distortion of social norms from the perpetrator, exchange offers and gifts.
- cultural and ethnical background, e.g. due to stereotypes/misconceptions on gender roles and marriage, linguistic issues, social isolation;
- fear or stress for negative consequences to or from the parents;
- feelings of responsibility and complicity.

Resources:

Helen, B. and Camille W. (2014). *Suffering in Silence: Children and unreported crime*. Report by the Victim Support in partnership with the University of Bedfordshire, on behalf of the All Party Parliamentary Group (APPG) for Victims and Witnesses of Crime. Retrieved from: <https://www.victimsupport.org.uk/sites/default/files/Suffering%20in%20silence%20-%20Children%20and%20unreported%20crime.pdf> [Last accessed: 25 May 2018].

Themeli, O. (2014). *Τα παιδιά καταθέτει. Η δικανική εξέταση ανηλίκων μαρτύρων, θυμάτων σεξουαλικής κακοποίησης* [The children testify. Forensic examination of juvenile witnesses, victims of sexual abuse]. Αθήνα: Εκδόσεις Τόπος.

Module 4

Interaction with Victims and Communication Skills

4.1. Introductory Discussion

SUGGESTED DURATION

30-45 MINUTES

OBJECTIVES

- OBTAIN A BETTER UNDERSTANDING OF THE CONTEXT IN WHICH THE PARTICIPANTS ENCOUNTER AND INTERACT WITH VICTIMS WITH SPECIAL NEEDS AND TAILOR THE TRAINING DELIVERY TO THEIR DAILY PRACTICE
- IDENTIFY THE CASES OR SITUATIONS THEY FIND MOST DIFFICULT TO HANDLE AND FOCUS ON SUCH CASES THROUGHOUT THE TRAINING DELIVERY
- DISCUSS AND AGREE IN COOPERATION WITH THE PARTICIPANTS THE BASIC PRINCIPLES OF AN EFFECTIVE INTERACTION WHICH WILL FORM THE BASIS OF THIS MODULE
- IDENTIFY AND DISCUSS POTENTIALLY PROBLEMATIC AREAS IN THEIR APPROACH TOWARDS ACHIEVING THE BASIC OUTCOMES OF A GOOD INTERACTION

Outline

STEP 1 – Icebreaker

- Start this section with an open discussion with the participants to obtain a better understanding of their daily work.
- Indicative topics:
 - a. How/when/where a typical conversation with a victim with special needs takes place?
 - b. Which cases do they find most difficult to handle?
 - c. Which are the cases they most often encounter?
 - d. What do they consider as a good interaction with a victim?
 - e. Which is usually the main purpose of the interaction?
 - f. Which is the outcome they usually try to achieve?
 - g. What problems do they encounter in achieving the desired outcome?

STEP 2 – The basics of a good interaction

- Following up on the conversation during STEP 1, identify and discuss the commonalities and main outcomes police officers try to achieve during these interactions.
- Allow the participants time to come up with the basic outcomes of a good interaction themselves.
- Introduce the outcomes in the form of discussion making sure that the participants agree.
- Close this step by agreeing with the participants on the basic principles of an effective interaction below, which will form the basis of this module.

⁵⁵ Retrieved and adapted from Morrison, J. (2014). *The first interview* (4th ed.). New York, NY: Guilford Publications, p. 2.

A good interaction, from the perspective of both the police officer and that of the victim, should result into three basic outcomes⁵⁵:

- ↑ Acquisition of the highest possible amount of accurate information relating to the purpose of the interaction.
- ↓ In the less possible amount of time.
- ↔ While developing a good working relationship (rapport) with the victim.

STEP 3 – Common Patterns

- Recognize the significant difficulty in achieving the three basic outcomes and discuss the methods often implemented towards that.
- Introduce the ‘intuitive’ pattern below and discuss with the participants any potential positive and negative elements they identify in this approach.
- Discuss potential ineffective aspects of this pattern and how these can possibly hinder the process of a good interaction.

Research shows that a set of commonalities exists in the approaches that police officers adopt when conducting interviews with victims and witnesses:

1. Brief introduction.
2. Open-ended question generally asking what happened.
3. A few seconds later the officer interrupts the victim.
4. And poses a series of direct questions regarding the offence and the perpetrator.
5. Some of them often leading or suggestive.

This ‘intuitive’, and in some sense natural pattern, however, often results to incorrect or inadequate information retrieval. The following elements appear to be common factors across the different methods used which have been found highly hinder the process:

1. “The interviewer has a predetermined set of topics or questions that guides the interview.
2. The interviewer asks a specific question about each of the items in the predetermined set.
3. The interviewer generally controls the flow of information and does much of the talking (and thinking) thereby relegating the witness to playing a passive role, namely to answer the interviewer’s questions.”⁵⁶

The importance of non-interruption while the witness is narrating the events during the early stages of the interview has been repeatedly highlighted as a determining factor for effective information retrieval, since any interruption may result in shortened response and information being lost or forgotten. Similarly, emerging indications show that witnesses may exhibit a lower need of compliance when they feel empowered, strongly suggesting, therefore, the importance of allowing the victim to exercise some control over the interview process. An equally important factor that has been often linked with the victim’s cooperation and information retrieval is the type and wording of the questions used.

⁵⁶ Retrieved from Fisher, R., Ross, S. J., & Cahill, B. S. (2010). Interviewing Witnesses and Victims. In P. A. Granhag (Ed.), *Forensic Psychology in Context: Nordic and International Approaches*. Cullompton, UK: Willan, p. 57.

STEP 4 – Difficult questions

- Recognize the difficult, ‘threatening questions’, a police officer often has to ask, focusing on the feelings they experience when they need to ask such questions.
- Present the example of the question ‘Did you kill your wife’ to illustrate the importance of wording in posing threatening questions.

Difficult questions about a person’s behavior, such as those that a police officer often has to ask, are defined as ‘threatening questions’, as they often involve sensitive subjects and socially undesirable behaviors. The wording of the question can significantly impact the accuracy of the information received.

Bradburn, Sudman, and Wansink use Barton’s summary of techniques for posing threatening questions, dating back to 1958, to illustrate the effect of different wordings, using the example of the question ‘Did you kill your wife’⁵⁷:

a. The Casual Approach:

“Do you happen to have murdered your wife?”

b. The Numbered Card Approach:

“Would you please read off the number on this card that corresponds to what became of your wife?” (Hand card to respondent)

- (1) Natural death
- (2) I killed her
- (3) Other (What?)

c. The Everybody Approach:

“As you know, many people have been killing their wives these days. Do you happen to have killed yours?”

d. The “Other People” Approach:

“Do you know any people who have murdered their wives?”
“How about yourself?”

e. The Sealed Ballot Approach:

In this version, you explain that the survey respects people’s rights to anonymity in respect to their marital relations, and that they themselves are to fill out the answer to the question, seal it in an envelope, and drop it in a box conspicuously labelled “Sealed Ballot Box” carried by the interviewer.

f. The Kinsey Approach:

At the end of the interview, stare firmly into respondent’s eyes and ask in simple, clear-cut language, such as that to which the respondent is accustomed, and with an air of assuming that everyone has done everything, “Did you ever kill your wife?”

⁵⁷ Retrieved from Bradburn, N. M., Sudman, S., & Wansink, B. (2004). *Asking questions: the definitive guide to questionnaire design - for market research, political polls, and social and health questionnaires*. San Francisco, CA: John Wiley & Sons., p. 79-80.

Resources:

Barton, A. J. (1958). Asking the Embarrassing Question. *Public Opinion Quarterly*, 22, 67–68.

Black, I. S. & Yeschke, C. L. (2014). *The art of investigative interviewing* (3rd ed.). Waltham, MA: Butterworth Heinemann - Elsevier Inc.

Bradburn, N. M., Sudman, S., & Wansink, B. (2004). *Asking questions: the definitive guide to questionnaire design - for market research, political polls, and social and health questionnaires*. San Francisco, CA: John Wiley & Sons., p. 79-80.

Fisher, R. & Castano, N., (2008). Cognitive Interview. In B. Cutler (Ed.), *Encyclopaedia of Psychology and Law*. Thousand Oaks, CA: SAGE Publications.

Fisher, R. P. (1995). Interviewing victims and witnesses of crime. *Psychology, Public Policy, and Law*, 1(4), 732.

Fisher, R. P., Geiselman, R. E., & Raymond, D. S. (1987). Critical analysis of police interviewing techniques, *Journal of Police Science and Administration*, 15, 177–85.

Fisher, R., Ross, S. J., & Cahill, B. S. (2010). Interviewing Witnesses and Victims. In P. A. Granhag (Ed.), *Forensic Psychology in Context: Nordic and International Approaches*. Cullompton, UK: Willan.

George, R. C. & Clifford, B. R. (1992). Making the most of witnesses, *Policing*, 8, 185–98.

Ministry of Justice (2011). *Achieving Best Evidence in Criminal Proceedings: Guidance on interviewing victims and witnesses, and guidance on using special measures*. London, GB: Ministry of Justice. Retrieved from: https://www.cps.gov.uk/sites/default/files/documents/legal_guidance/best_evidence_in_criminal_proceedings.pdf [Last accessed: 11 May 2018].

Morrison, J. (2014). *The first interview* (4th ed.). New York, NY: Guilford Publications.

4.2. Basic Principles: Empathy, Neutrality, Objectivity, Rapport

SUGGESTED DURATION

30-45 MINUTES

OBJECTIVES

- INTRODUCE PARTICIPANTS TO THE CONCEPTS OF EMPATHY, NEUTRALITY, OBJECTIVITY AND RAPPORT
- STRESS THE IMPORTANCE OF THE BASIC PRINCIPLES DURING THEIR INTERACTIONS WITH VICTIMS OF CRIME
- ENHANCE THE PARTICIPANTS' CAPACITY IN EFFECTIVELY APPLYING THESE PRINCIPLES DURING THEIR INTERACTIONS WITH VICTIMS OF CRIME

NOTES FOR TRAINERS

No specific exercise is foreseen for this activity, only conversational presentation and introduction of the basic principles. The participants should be able to acquire vicarious experience of the basic principles throughout this module while advancing other skills (e.g. empathy and rapport can be built by careful wording of questions, allowing free narrative of events, non-verbal encouragements etc.)

- Trainers are encouraged to pay particular attention to make sure that the basic principles are present in all exercises throughout this and subsequent modules.

Outline

STEP 1 – Empathy

- To initiate the conversation regarding empathy the use of visuals or other interactive methods are recommended to stimulate and engage the participants. For example, the following video “Brené Brown on Empathy” (available on YouTube: <https://www.youtube.com/watch?v=1Evwgu369Jw&t=7s>) could be used, or any other video more appropriate for the specific group of professionals or the national context.
 - Following the video, explain to the participants the concept of empathy is and how it can be useful while interacting with victims.
 - Discuss with the participants how they express empathy during their interactions with victims.
 - Based on their answers, advise participants on how to cultivate and express empathy when interacting with victims.

Empathy is the ability to understand how a person feels and to respond appropriately. Thus, it includes two basic elements or mechanisms:

1. Understanding how a person feels, his/her psychological state. This presupposes switching the attention from oneself to the other, focusing on the other to take his/her perspective (cognitive empathy).
2. Reacting to this knowledge, experiencing or feeling, on some level, what the other person feels (affective empathy).

In other words, empathy refers to the ability to understand and acknowledge the internal state of another person, including the person's feelings, thoughts, and viewpoints, as well as the **motivation** driving his/her behavior. It is not equivalent to compassion, but a complex process promoting and resulting from and to good communication. Feelings of distress by observing another in pain and feeling for another in pain may be present.

Why is empathy needed:

- Allows individuals to interact effectively when communicating with other people.
- Creates a confidential framework in which a process can take place (e.g. victim interviewing).
- Builds rapport.
- Encourages the victim to provide the information and evidence needed.

How to cultivate empathy:

- Imagine how the other person is thinking and feeling, based on what the other person is describing or expressing.
- Imagine how you would feel or think if in the position of the victim.

STEP 2 – Neutrality and Objectivity

- Describe the basic principles of neutrality and objectivity.
- Ask the participants how often they feel that it is hard to be neutral and objective when communicating with victims. Discuss the reasons behind those feelings.
- Explain to the participants that it is essential to be aware of our personal limits as professionals. Yet, note that sometimes our perceptions or negative feelings towards other persons due to their personal characteristics or situations, are based on stereotypes or our personal experiences.
- Advise them how to express neutrality and objectivity during their interactions with the victims.

It is essential that police officers remain independent of any prejudices related to the victims' gender, race, ethnic, cultural or socio-economic or professional background, which may adversely affect or harm the rights of the victims, as well as retain an impartial attitude towards any person involved in a case. Police officers should remain sensitive to the beliefs, manners, and customs of the victims, and try to avoid any discrimination during their interaction with a victim.

Neutrality is one of the basic principles of an efficient communication of a professional with another person. Usually it is expressed by:

- showing and offering equal treatment to any individual regardless his/her personal characteristics and regardless the situation that he/she is involved;
- being non-judgmental to what is being said and presenting a non-judgmental attitude;
- avoiding influencing the victim to adopt an idea or opinion during the discussion or to impose any preferred outcome on the conversation process.

Similar to neutrality, objectivity refers to projecting an impartial attitude and avoiding influence by stereotypical perceptions or other external influences when communicating with a victim. By losing his/her objectivity, the officer:

- may distort the information provided by the victim,
- incorrectly evaluate the information either by overestimating or by understating the significance.

Neutrality and objectivity will safeguard the interaction process by retaining a balance between what the victim is expressing and the listener's personal thoughts. Being non-judgmental to what is said will further strength the framework and allow the listener to collect more accurate information and evidence and prevent false claims. To this end, the officer needs to suspend his/her private thoughts and feelings. However, this does not mean that the officer should in any case give up his/her personal beliefs.

STEP 3 – Rapport

- Describe the importance of building rapport.
- Ask the participants whether they feel it is easy or difficult to build rapport when communicating with victims. Discuss the reasons behind those feelings.
- Explain that building rapport will improve their communication with victims and advise participants on how to build rapport during their interactions with a victim.

Rapport is associated with developing a positive relationship with the victim, which will allow the creation of a cooperative framework between the police officer and the victim. Even though rapport develops gradually as the two parties meet, a police officer can create a good rapport through his/her attitude and professionalism from the first contact with the victim. By establishing rapport:

- the victim will feel safe and comfortable to share his/her story with the police officer;
- the police officer will have the opportunity to observe the way that victim communicates and his/her attitudes, as these will be reflected in their communication;
- the police officer will have the opportunity to collect information.

STEP 4 – How to express the basic principles in practice

- Explain that building rapport will improve the police communication with victims and advise participants on how to build rapport and express the other basic principles during their interactions with victims.

How to express the basic principles in practice:

- Preparation is key in developing rapport, starting from preparing the room to drafting a set of questions, or learning as much as possible about the victim.
- Use of the basic principles of empathy, neutrality, and objectivity to frame the communication.
- Proper introductions, greeting the victim, and providing explanations regarding the purpose of the conversation.
- Personalization of the interaction by using the victim's name throughout the conversation.
- Neutral responses and expressions, i.e. body language and statements that indicate neither approval nor disapproval and avoidance of adjectives or descriptions that indicate positive or negative discrimination.
- Addressing the victim's concerns, no matter how trivial those might appear.
- Acknowledgement and respect of the victims' feelings and thoughts without judging.
- Awareness and monitoring of one's verbal and non-verbal behavior, such as neutral but appropriate facial expressions; frequent eye contact; calm, interested, and sympathetic appearance, without being overly talkative, friendly, or considerate.

- Active observation of the victim's verbal and non-verbal behavior and appropriate response, mirroring the victim's behavior.
- Awareness regarding cultural and individual differences, or language and communication issues which may affect the communication with the victim.
- Avoidance of leading or suggestive questions.
- Focusing only on the victim and his/her narrative and leaving the examination of other information and evidence for a later stage.
- If an officer cannot respond positively to a victim's comment or what the victim is expressing, directly respond to that comment should be avoided, as that might force the officer to express an opinion which may disappoint the victim and break the trust between them. Instead, silence might be preferable, or an effort could be made to sympathize with the victim by acknowledging the feelings behind it. For example:⁵⁸
 - VICTIM: 'I couldn't stand him calling me an idiot anymore, so I started throwing things at him to make him stop. Wouldn't you do the same?'
 - POLICE OFFICER: 'It seems that you were angry, and you reacted.'
- In case a victim disrupts the officer's ability to communicate with him/her due to his/her personal characteristics or situation, it is advisable to interrupt the conversation or refer the victim to another colleague to continue with the process.
- Awareness of one's personal limits as a professional, and the extent that these may affect one's work, is very important and the essence of professionalism. In sum: 'Don't be so sure!'.

Resources:

Baron-Cohen, S., & Wheelwright, S. (2004). The empathy quotient: an investigation of adults with Asperger syndrome or high functioning autism, and normal sex differences. *Journal of autism and developmental disorders*, 34(2), 163-175.

Batson, C. D. (2009). These Things Called Empathy: Eight Related but Distinct Phenomena. In J. Decety & W. Ickes (Eds.), *The Social Neuroscience of Empathy* (pp. 3-15). Cambridge, MA: MIT Press.

Black, I. S. & Yeschke, C. L. (2014). *The art of investigative interviewing* (3rd ed.). Waltham, MA: Butterworth Heinemann - Elsevier Inc.

Dziobek, I., Rogers, K., Fleck, S., Bahnemann, M., Heekeren, H. R., Wolf, O. T., & Convit, A. (2008). Dissociation of Cognitive and Emotional Empathy in Adults with Asperger Syndrome Using the Multifaceted Empathy Test (MET). *J Autism Dev Disord*, 38, 464-473.

Frank, M. G., Yarbrough, J. D., & Ekman, P. (2006). Investigative interviewing and the detection of deception. In T. Williamson (Ed.), *Investigative interviewing: Rights, research and regulation* (pp. 229-255). Cullompton, Devon: Willan Publishing.

Ivey, A. E., Ivey, M. B., & Zalaquett, C. P. (2010). *Intentional interviewing and counseling: Facilitating client development in a multicultural society* (7th ed.). Belmont, CA: Brooks/Cole.

Ministry of Justice (2011). *Achieving Best Evidence in Criminal Proceedings: Guidance on interviewing victims and witnesses, and guidance on using special measures*. London, GB: Ministry of Justice.
Retrieved from: https://www.cps.gov.uk/sites/default/files/documents/legal_guidance/best_evidence

⁵⁸ Retrieved and adapted from Morrison, J. (2014). *The first interview* (4th ed.). New York, NY: Guilford Publications, p. 28.

[in_criminal_proceedings.pdf](#) [Last accessed: 11 May 2018].

Morrison, J. (2014). *The first interview* (4th ed.). New York, NY: Guilford Publications.

Sommers-Flanagan, J. & Sommers-Flanagan, R. (2014). *Clinical interviewing* (5th ed.). Hoboken, NJ: John Wiley & Sons.

St-Yves, M. (2006). The psychology of rapport: Five basic rules. In T. Williamson (Ed.), *Investigative interviewing: Rights, research and regulation* (pp. 87–105). Cullompton, Devon: Willan Publishing.

Themeli, O. (2014). *Τα παιδιά καταθέτει. Η δικανική εξέταση ανηλίκων μαρτύρων, θυμάτων σεξουαλικής κακοποίησης* [The children testify. Forensic examination of juvenile witnesses, victims of sexual abuse]. Αθήνα: Εκδόσεις Τόπος.

Themeli, O., & Panagiotaki, M. (2014). Forensic interviews with children victims of sexual abuse: the role of the counselling psychologist. *The European Journal of Counselling Psychology*, 3(1), 1-19.

UNODC - United Nations Office on Drugs and Crime (2009). Module 8: Interviewing victims of trafficking in persons who are potential witnesses. In UNODC, *Anti-human trafficking manual for criminal justice practitioners*. Vienna: United Nations Publications. Retrieved from: https://www.unodc.org/documents/human-trafficking/TIP_module8_Ebook.pdf [Last accessed: 10 May 2018].

Wilson, C., & Powell, M. (2001). *A guide to interviewing children: Essential skills for counsellors, police lawyers and social workers*. London: Routledge.

Woods, T. O. (2008). *First Response to Victims of Crime: A Guidebook for Law Enforcement Officers*. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Office of Victims of Crime. Retrieved from: <https://www.ovc.gov/publications/infores/pdf/2010FirstResponseGuidebook.pdf> [Last accessed: 14 May 2018].

Yarbrough, J., Hervé, H. F., & Harms, R. (2013). The sins of interviewing: errors made by investigative interviewers and suggestions for redress. In B.S. Cooper, D. Griesel, M. Ternes (Eds.), *Applied issues in investigative interviewing, eyewitness memory, and credibility assessment* (pp. 59-95). New York, NY: Springer.

Yuille, J. C., Marxsen, D., and Cooper, B., (1999). Training Investigative Interviewers: Adherence to the Spirit, As Well As the Letter. *International Journal of Law and Psychiatry*, 22(3–4), 323–336.

4.3. Setting, Introduction and Opening

SUGGESTED DURATION

45-60 MINUTES

OBJECTIVES

- INTRODUCE BASIC ASPECTS AND PRINCIPLES REGARDING THE SETTING, INTRODUCTION AND OPENING OF CONVERSATION WITH A VICTIM
- STRESS THE IMPORTANCE THAT THE INITIAL CONTACT HAS ON INITIATING AND MAINTAINING RAPPORT AND BUILDING A COOPERATIVE RELATIONSHIP WITH THE VICTIM

Outline

STEP 1 – Setting, introduction and opening

- Start this section by asking the participants to briefly describe the most common settings and circumstances where their interactions with victims with special needs take place (e.g. victim's house, police station office etc.).
- Stress the importance that the first impression and initial contact may have on initiating and maintaining a cooperative relationship with the victim and present the basic aspects below in a conversational manner.

First impressions are important and thus, the opening of the conversation can often determine the success of any further interaction and significantly affect the establishment of a cooperative relationship and rapport with the victim. Circumstances are often less than ideal, but every effort should be made to do the best with what is available, while always prioritizing the victim's comfort and privacy.

Setting and seating arrangement:

- If possible, the room furniture should be arranged in manner that allows the victim to sit closest to the door and the door is within their eyesight and not behind them, to increase the victim's feelings of safety and security.
- Traditional sitting across a desk should be avoided, as the desk creates a barrier between the individuals.
- Similarly, sitting face-to-face directly across the victim should be avoided, to allow them the flexibility to evade direct eye contact if they feel uncomfortable. Sitting in a diagonal angle (90-120 degrees), at the side of the desk instead of in front of it, is preferable.

Personal Appearance:

- If possible, police attire and equipment should be avoided or kept to a minimum, to appear less intimidating – especially with child victims – and reduce the perceived authority gap between the officer and the victim.

Introductions:

- Introducing oneself in a balanced and reassuring way, greeting the victim by name and offering to shake hands are essential elements so as to personalize the conversation and initiate rapport.
- Although general comments or questions and discussion about neutral topics is an option at this stage (e.g. asking about their welfare, background or basic needs and so on), caution should be exercised. Some individuals find it helpful in reducing anxiety and creating a positive climate, whereas it increases anxiety and fear in others as it prolongs the process.

Opening:

- It is very important to explain the purpose and process of the interaction and any other pertinent procedural issues to the victim, in order to reduce their anxiety and fear and, most importantly, increase their sense of control.
- In cases of child victims, detailed explanation is of outmost importance and appropriate language should be used.
- It should be always kept in mind that many individuals might not have any prior contact with the authorities and might be completely unfamiliar and unaware of the foreseen procedures. This fact coupled with the effects of trauma can significantly increase the victim's feelings of powerlessness.

Note taking and other methods of recording:

- It is strongly suggested to always inform the victim about the need to take notes or use other methods of recording and to make sure that they are comfortable with it.
- Note taking should be kept to a minimum, so that it does not interfere with the open communication.

STEP 2 – Exercise

- Based on the aspects presented above, ask the participants to role play sample openings.
- Ask 2 participants to volunteer to step in the center of the room and perform a brief role play exercise.
- One will play the victim and one the officer.
- Discuss the exercise with the whole group and provide feedback:
 - > what was difficult?
 - > what was easy?
 - > how did the speaker feel during the process?
 - > how did the listener feel during the process?
 - > what did the observers note in terms of the basic principles of interacting with victims: neutrality, respect, body language, empathy, etc.?
 - > will there be any challenges in using these skills in their daily practice?
- Thank the participants.

Resources:

Benjamin, A. (1987). *The helping interview with case illustrations*. Boston, MA: Houghton Mifflin.

Bitiukova, N., Faix-Prukner, C., Vidmar, N. H., & Sile, S. (2016). *Toolkit for the Law Enforcement Bodies – Accommodating the Needs of the Victims of Homophobic and Transphobic Hate Crimes*. Developed under the “Accommodating the needs of the victims of homophobic and transphobic hate crimes” project (JUST/2013/FRC/AG/6163). Warsaw: Campaign Against Homophobia. Retrieved from: <http://hatenomore.net/publ/03-toolkit-miedzyn/03-toolkit-miedz.pdf> [Last accessed: 14 May 2018].

Black, I. S. & Yeschke, C. L. (2014). *The art of investigative interviewing* (3rd ed.). Waltham, MA: Butterworth Heinemann - Elsevier Inc.

Byers, G. (2011). *Victims with Disabilities: The Forensic Interview-Techniques for Interviewing Victims with Communication and/or Cognitive Disabilities*. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Office of Victims of Crime . Retrieved from: <https://www.ovc.gov/publications/infores/pdfxt/VictimsGuideBook.pdf> [Last accessed: 18 May 2018].

Ferraro, E. F. (2015). *Investigative Interviewing: Psychology, Method and Practice*. Boca Raton, FL: CRC Press.

Lamb, M. E., Hershkowitz, I., Orbach, Y., & Esplin, P. W. (2011). *Tell me what happened: Structured investigative interviews of child victims and witnesses* (Vol. 56). Chichester, UK: John Wiley & Sons.

Lamb, M. E., Orbach, Y., Hershkowitz, I., Esplin, P. W., & Horowitz, D. (2007). A structured forensic interview protocol improves the quality and informativeness of investigative interviews with children: A review of research using the NICHD Investigative Interview Protocol. *Child Abuse & Neglect*, 31(11–12), 1201–1231.

Ministry of Justice (2011). *Achieving Best Evidence in Criminal Proceedings: Guidance on interviewing victims and witnesses, and guidance on using special measures*. London, GB: Ministry of Justice. Retrieved from: https://www.cps.gov.uk/sites/default/files/documents/legal_guidance/best_evidence_in_criminal_proceedings.pdf [Last accessed: 11 May 2018].

Morrison, J. (2014). *The first interview* (4th ed.). New York, NY: Guilford Publications.

Orbach, Y., Hershkowitz, I., Lamb, M. E., Esplin, P. W., & Horowitz, D. (2000). Assessing the value of structured protocols for forensic interviews of alleged child abuse victims. *Child Abuse & Neglect*, 24(6), 733–752.

Sommers-Flanagan, J. & Sommers-Flanagan, R. (2014). *Clinical interviewing* (5th ed.). Hoboken, NJ: John Wiley & Sons.

The Advocate’s Gateway (2015). *Working with traumatised witnesses, defendants and parties - Toolkit 18*. London: The Council of the Inns of Court, The Advocate’s Gateway. Retrieved from: <http://www.theadvocatesgateway.org/images/archive/18-working-with-traumatised-witnesses-defendants-and-parties-2015.pdf> [Last accessed: 15 May 2018].

Themeli, O. (2014). *Τα παιδιά καταθέτει. Η δικανική εξέταση ανηλίκων μαρτύρων, θυμάτων σεξουαλικής κακοποίησης* [The children testify. Forensic examination of juvenile witnesses, victims of sexual abuse]. Αθήνα: Εκδόσεις Τόπος.

UNODC - United Nations Office on Drugs and Crime (2009). Module 8: Interviewing victims of trafficking in persons who are potential witnesses. In UNODC, *Anti-human trafficking manual for criminal justice practitioners*. Vienna: United Nations Publications. Retrieved from: https://www.unodc.org/documents/human-trafficking/TIP_module8_Ebook.pdf [Last accessed: 10 May 2018]

UNODC - United Nations Office on Drugs and Crime (2009). Module 9: Interviewing child victims of trafficking in persons. In UNODC, *Anti-human trafficking manual for criminal justice practitioners*. Vienna: United Nations Publications. Retrieved from: http://www.unodc.org/documents/human-trafficking/TIP_module9_Ebook.pdf [Last accessed: 10 May 2018].

Wilson, C., & Powell, M. (2001). *A guide to interviewing children: Essential skills for counsellors, police lawyers and social workers*. London: Routledge.

Woods, T. O. (2008). *First Response to Victims of Crime: A Guidebook for Law Enforcement Officers*. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Office of Victims of Crime. Retrieved from: <https://www.ovc.gov/publications/infores/pdftxt/2010FirstResponseGuidebook.pdf> [Last accessed: 14 May 2018].

Yarbrough, J., Hervé, H. F., & Harms, R. (2013). The sins of interviewing: errors made by investigative interviewers and suggestions for redress. In B.S. Cooper, D. Griesel, M Ternes (Eds.), *Applied issues in investigative interviewing, eyewitness memory, and credibility assessment* (pp. 59-95). New York, NY: Springer.

4.4. Asking Questions

SUGGESTED DURATION

90-120 MINUTES

OBJECTIVES

- STRESS THE IMPORTANCE OF WORDING AND TIMING IN POSING QUESTIONS
- FAMILIARIZE PARTICIPANTS WITH THE BASIC TYPES OF QUESTIONS, THEIR FUNCTIONS, ADVANTAGES, AND DISADVANTAGES
- PROVIDE PARTICIPANTS WITH USEFUL STRATEGIES AND TECHNIQUES FOR THE APPROPRIATE USE OF QUESTIONS IN DIFFERENT SITUATIONS AND FOR DIVERSE PURPOSES

Outline

STEP 1 – Types of Questions

- Discuss and present the general types of questions and their functions in a conversational manner.
- Try not to provide specific examples but ask the participants to provide real examples of each type instead.

Notes for trainers:

- The duration of this step should vary according to the participants' previous knowledge and level of experience. For example, if the participants are familiar with the types of questions, only key points should be briefly presented to recapitulate and reframe the existing knowledge.

Free Narrative of Events:

Beginning with

Open question: *What / How*

Examples

“What I would really like is to hear in your own words...”

“I just wanted to hear from you what happened.”

“What happened?”

- Following the introductions, the victim should be allowed to give their account of events for a few minutes without interruptions, constrains, or directions.
- When the victim is recalling the events, it is important to avoid any interruptions and all cues should be noted for further follow up questions later on.
- The victim should be encouraged to narrate the events in their own words by using non-specific prompts, such as ‘did anything else happen?’, ‘is there more you can tell me?’, rather than specific closed questions.
- This phase is important for establishing rapport, showing interest in the victim, allowing them control over the situation, and obtaining an unbiased account of the events to be examined further.

Open Questions		
Beginning with	Type of Question	Examples
<i>What</i>	Open	“What happened?”
<i>How</i>	Open	“How did the incident happen?”
<i>Where</i>	Minimally open	“Where did the incident took place?”
<i>When</i>	Minimally open	“When did the incident took place?”
<i>Who</i>	Minimally open	“Who else was there?”

- Open questions tend to result to more information and a broader scope of information.
- As these questions allow to the victim the freedom to respond as they see fit, their use shows interest in the victim, allows them control over the situation and shows to the victim that they and their story are important.
- They should be used in earlier stages to encourage the victims to tell their story.

Closed Questions:

Beginning with	Examples
<i>Do, Does, or Did</i> <i>Is, Was, or Are</i>	“Do you have any injuries?” “Was a weapon used?” “Does he contact you often?” “Are you able to stay at a friend’s house tonight?”

- The responses usually are yes/no or a few words.
- As these questions indicate the sort of answer that is expected, there are very useful for eliciting specific information.
- However, they reduce the power of the respondent and, thus, should be mostly used at later stages during the conversation.

Swing Questions:

Beginning with	Examples
<i>Could, or Would,</i> <i>Can, or Will</i>	“Can I ask you a few questions about that night?” “Would you like to tell me some more information about him?” “Would you mind if we talk a bit about what happened?” “Would you like to tell me what happened?”

- These questions can be answered with yes/no, but their intention is to encourage more elaboration on specific issues.
- They allow more power to the respondent and victims can more easily say that they do not want to respond. Thus, they can sometimes be the most open questions.
- They should be used only when rapport has been established as they can backfire.
- Caution should be exercised when used with children or adolescents, as they might take them literally (e.g. ‘Would you like to tell me some more about what happened?’, ‘No’).

STEP 2 – Role play exercise

- Ask 2 participants to volunteer to step in the center of the room and perform a brief role play exercise.
- One participant will play the victim and the other the officer.
- Give the case scenario below to the victim and allow them a few minutes to prepare.
- Inform the officer that he will be speaking with a victim of sexual exploitation, focusing on the questions regarding the sexual abuse.
- Discuss the exercise with the whole group and provide feedback:
 - > what was difficult?
 - > what was easy?
 - > how did the speaker feel during the process?
 - > how did the listener feel during the process?
 - > did they manage to receive all the necessary information?
- Thank the participants.

Case study – Sandra⁵⁹

Sandra, a 16-year-old girl, went to what she thought was a weekend-trip at a friends’ house. She had met Katia via Facebook and she was invited to her country house for a party in the absence of Katia’s parents. Sandra was one of many boys and girls present that was drugged, forced to dress in minimal clothing, obliged to pose for pornographic photos, and coerced to intercourse with some of the attendants and to lie about their age. Her personal items were confiscated, and they used violence and threats to ensure her compliance. Katia and her accomplices collected the money resulting from Sandra’s and the other victims’ sexual services. One of the other victims reported the crime and named Sandra as one of the victims. Sandra was called to provide a statement.

STEP 3 – Problematic Questions

- Following up on the discussion during the exercise in STEP 2, introduce the topic of problematic questions.
- Discuss and present (some of) the types of problematic questions and their negative functions in the form of discussion with the participants and through questions. For example, ask participants to present their views or examples of questions that in their experience are not very effective.

⁵⁹ Retrieved and adapted from: United Nations Office on Drugs and Crime, Human Trafficking Knowledge Portal, Case Law Database, UNODC No.: CAN017. Retrieved from: <https://www.unodc.org/cld/case-law-doc/traffickingpersonscrimetype/can/oliver-machado.html?lng=en&tmpl=htms> [Last Accessed: 12 March 2018].

- Try not to provide specific examples but ask the participants to provide real examples of each type instead.

Notes for trainers:

- The duration of this step should vary according to the participants' previous knowledge and level of experience. For example, if the participants are familiar with the problematic approaches, those should only be briefly presented to recapitulate and reframe the existing knowledge.

Bombardment/ grilling:

- “Did you see the suspect? Have you ever seen him before? Do you know his name?”
 - × The victim becomes defensive.
 - × Too much control to the one asking the questions.

Multiple questions:

- “Was this the first time it happened and, if not, how many times has it happened before?”
 - × Cause confusion.
 - × The victim may respond to one part and ignore the rest.

Topic hopping:

- Moving from one topic to the next and then back again.
 - × Causes confusion.
 - × Hinders the recalling process.

Questions as statements:

- “Don’t you think that leaving him is the right choice?”
 - × Dictate the right answer and increase bias.
 - × Promote one’s personal point of view.

Why questions:

- “Why did you go there alone?”; “Why did you give him your home address?”; “Why didn’t you report it sooner?”; “Why didn’t you tell anyone?”
 - × The victim becomes defensive.
 - × Increase discomfort and a sense of attack, as they can be perceived as criticism.
 - × They lack empathy and respect and exhibit negative regard for the person.

Negative questions:

- “You haven’t been doing drugs, right?”; “You didn’t have anything to drink before that?”
 - × Dictate the proposed, or expected, or wanted answer.
 - × Increase the possibility of inaccurate responses.

Pejorative questions:

- “Has your drinking caused you any problems with the authorities?”; “Was your job the reason you had to leave your child with him?”
 - × The victim becomes defensive.
 - × Rapport might be highly compromised.

Leading questions:

–“He hit you, didn’t he?”; “It was your husband that did this to you, right?”

- × Suggest the expected answer.
- × Increase the possibility of inaccurate responses.
- × As children are naturally more susceptible to suggestions, they are in increased danger of compliance and conformity.

STEP 4 – Strategies

- Ask participants to share techniques or strategies that they implement and find useful when they need to pose difficult questions.
- Based on their responses, present (some of) and discuss the different strategies to pose threatening questions below.
- Try not to provide specific examples but ask the participants to provide real examples of each technique instead.

Notes for trainers:

- The duration of this step should vary according to the participants’ previous knowledge and level of experience. For example, if the participants are familiar with the various techniques, those should only be briefly presented to recapitulate and reframe the existing knowledge.
- Trainers should consider combining this step with the next (STEP 5 – Exercise) for more participatory interactive learning.

STEP 5 – Exercise

- While presenting each group of strategies ask the participants to give examples of threatening questions they often have to pose to victims with special needs in their everyday work life, preferably with typical cases that they find most difficult to handle.
- Write the questions on the board.
- Use the questions on the board and ask participants to pose them in a less threatening way using the techniques presented.
- In case the participants do not offer their own questions, consider using some of the following questions adapted from the EVVI template questionnaire⁶⁰:
 - Do you feel depressed or have suicidal thoughts?
 - Has your husband/boyfriend/dad ever threatened or committed acts of violence against the victim? If so, please clarify.
 - Does your husband/boyfriend/dad have problems with drugs and/or alcohol? If so, please clarify.

Although some of Barton’s⁶¹ methods are no longer thought to be effective, several strategies based on differentiating the wording or the timing of a question can be implemented to try to reduce the threat and increase accuracy.

⁶⁰ Retrieved from Ministère français de la Justice (2015). *EVVI (Evaluation of Victims)*. Developed in co-operation with the French Victim Support and Mediation Institute (INAVEM), the French National School for the Judiciary (ENM), the Crown Prosecution Service (United Kingdom), the Polish Ministry of Justice (Poland), the ‘Secretaria General de la Administracion de Justicia’ (Spain), the ‘Associação Portuguesa de Apoio à Vitima’ (Portugal), and ‘GIP-JCI - Justice Coopération Internationale’ (France), under the EVVI (EValuation of VICTims) project (JUST/2013/JPEN/AG /4602). Retrieved from: http://www.justice.gouv.fr/publication/evvi_guide_en.pdf [Last accessed: 24 April 2018].

⁶¹ Barton, A. J. (1958). Asking the Embarrassing Question. *Public Opinion Quarterly*, 22, 67–68.

Wording of the questions⁶²

Techniques	Advantages	Disadvantages
Open-ended questions		
Asking about the frequency of the behavior instead of providing specific options (e.g. once/twice, often/sometimes)	Allows them to give an unexpected or high frequency (e.g. everyday/always). In close-ended questions respondents tend to give a middle response (e.g. sometimes) instead of the truth.	Vague answers. Need for follow up questions
Close-ended questions		
Presenting the behavior as something common and then asking if it has ever happened to the victim.	It suggests that the behavior in question is common practice and a positive answer would not be perceived as shocking.	Useful only when all is needed is to know if something has ever happened.
Longer questions with familiar words		
Starting with a small introduction (e.g. now I would like to ask you a question about...), mentioning the commonality or popularity of such behavior, listing examples of that behavior to induce memory and ensure understanding.	Relieves the pressure to underreport. Provides additional memory cues. Ensures understanding of the question by using examples.	In some cases, can be confusing or a focus from the issue at hand.

Timing of the questions⁶³

Techniques	Advantages	Disadvantages
Embedded questions		
Starting with questions about other threatening topics or behaviors that are not of interest, and then asking the primary question.	The degree of a threatening question is highly dependent upon the context. If more threatening questions preceded the one that is of interest, the latter might seem less threatening than if it was the first one. Useful when you are only interested in that specific question.	Starting the conversation with threatening questions reduces respondent's cooperation. Increases underreporting of the first threatening question.
Choosing the appropriate time frame		
Starting with 'Did you/he/she ever, even once...' and then asking about the defined period that is of interest.	Questions about past events are less threatening than those about current events.	Vague answers. Need for follow up questions.
Sequencing		
Starting progressively with less difficult or more general questions about a set/topic of behavior activities, and then moving to the most difficult or uncomfortable ones.	Improves reporting accuracy by progressively clarifying the topic of questioning and appeases the uncomfortableness.	Requires more time.

⁶² Retrieved and adapted from Bradburn, N. M., Sudman, S., & Wansink, B. (2004). *Asking questions: the definitive guide to questionnaire design - for market research, political polls, and social and health questionnaires*. San Francisco, CA: John Wiley & Sons.

⁶³ Ibid.

Loading the questions ⁶⁴		
Techniques	Advantages	Disadvantages
The ‘everybody does it approach’		
Starting with phrases such as - ‘Everybody had/does...’ - ‘The most common ... is... How often do you...’ - ‘Even the best ... do...’.	Reduces the threat of reporting the behavior.	Using ‘many people do it’ instead of ‘everybody’ or ‘the most common’ may increase the threat.
Assuming the behavior		
A closed question assuming the behavior and directly asking the frequency, specific type of action, or other details.	Reduces the threat of reporting the behavior	Not suitable for socially desirable behaviors as it might increase overreporting.
Use of authority to justify behavior		
Starting the question with an attribution to an authority figure (e.g. ‘doctors nowadays...’, ‘scientists say...’, ‘research shows...’) and then asking about the specifics.	Increases probability of favorable reaction to the likeable or respected authority	Avoid specific names or groups and use general authority attributions instead, as the respondent might be unaware of the first.

Not all methods are suitable for each unique case and each strategy has potential advantages and disadvantages, but there might prove to be effective tools in difficult situations and can be used in conjunction, as needed, in each specific case.

Caution should be exercised when some of the following techniques are used with children and other vulnerable populations. In an effort to please the one asking the questions, these groups are in greater danger of and particularly vulnerable to compliance and, therefore, some techniques could be perceived as suggestive when not used cautiously.

STEP 6 – Role play exercise

- If there is enough time repeat the role play exercise from STEP 2 in small groups.
- Ask the participants to split in groups of 3 (or 4) people.
- Ask them to decide who will be the police officer, who will be the victim, and who will be the observer.
- The observer takes notes on the usage of the various skills and techniques.
- Give the case scenario below to the victim and allow them some time to prepare.
- The trainers make rounds to observe the process.
- After the victim finishes his/her story, each group discusses the feedback (how the speaker felt, how the listener felt, what the observer noticed) for a few minutes.
- Regroup the participants and discuss the exercise with the whole group and provide feedback:

⁶⁴ Ibid.

- > what was difficult?
- > what was easy?
- > how did the speaker feel during the process?
- > how did the listener feel during the process?
- > what did the observers note in terms of the basic principles of interacting with victims: neutrality, respect, body language, empathy, etc.?
- > did they manage to receive all the necessary information?
- Thank the participants.

Case study – Christina⁶⁵

After her mother and stepfather split up, Christina, 14 years old, and her siblings stayed with their stepfather. He had been sexually abusing her since she was 12. She mentions that he would use condoms, but not all the time. She could not recall how many times he had sexual intercourse with her. She says that he would have sex with her on the floor and sometimes on the bed. He stopped sleeping with her when he realized that she was pregnant. She talked to a hospital nurse when she went to give birth and the police was called.

Resources:

Barton, A. J. (1958). Asking the Embarrassing Question. *Public Opinion Quarterly*, 22, 67–68.

Bitiukova, N., Faix-Prukner, C., Vidmar, N. H., & Sile, S. (2016). *Toolkit for the Law Enforcement Bodies – Accommodating the Needs of the Victims of Homophobic and Transphobic Hate Crimes*. Developed under the “Accommodating the needs of the victims of homophobic and transphobic hate crimes” project (JUST/2013/FRC/AG/6163). Warsaw: Campaign Against Homophobia. Retrieved from: <http://hatenomore.net/publ/03-toolkit-miedzyn/03-toolkit-miedz.pdf> [Last accessed: 14 May 2018].

Blair, G. & Steinberg, A. G. (2011). Child Abuse and Neglect. In E. Y. Drogin, F. M. Dattilio, R. L. Sadoff, & T. G. Gutheil, (Eds.) *Handbook of Forensic Assessment: Psychological and Psychiatric Perspectives* (pp. 361-389). Hoboken, NJ: John Wiley & Sons, Inc.

Bradburn, N. M., Sudman, S., & Wansink, B. (2004). *Asking questions: the definitive guide to questionnaire design - for market research, political polls, and social and health questionnaires*. San Francisco, CA: John Wiley & Sons.

Bull, R., Bilby, C., Cooke, C., & Grant, T. (2009). *Criminal psychology: A beginner's guide*. Oxford, GB: Oneworld Publications.

Byers, G. (2011). *Victims with Disabilities: The Forensic Interview-Techniques for Interviewing Victims with Communication and/or Cognitive Disabilities*. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Office of Victims of Crime. Retrieved from: <https://www.ovc.gov/publications/infores/pdftxt/VictimsGuideBook.pdf> [Last accessed: 18 May 2018].

Fivush, R., Peterson, C., & Schwarzmüller, A. (2002). Questions and answers: The credibility of child witnesses in the context of specific questioning techniques. In M. L. Eisen, J. A. Quas, & G. S. Goodman

⁶⁵ Retrieved and adapted from: United Nations Office on Drugs and Crime, Human Trafficking Knowledge Portal, Case Law Database, UNODC No.: ZAF009. Retrieved from: https://www.unodc.org/cld/case-law-doc/trafficking-personscrimetype/zaf/2017/the_state_and_makhosini_mathews_fakudze.html?lng=en&tmpl=htms [Last Accessed: 12 March 2018].

(Eds.), *Memory and suggestibility in the forensic interview* (pp. 331-354). Mahwah, NJ: Erlbaum.

Ivey, A. E., Ivey, M. B., & Zalaquett, C. P. (2010). *Intentional interviewing and counseling: Facilitating client development in a multicultural society* (7th ed.). Belmont, CA: Brooks/Cole.

Lamb, M. E., Hershkowitz, I., Orbach, Y., & Esplin, P. W. (2011). *Tell me what happened: Structured investigative interviews of child victims and witnesses* (Vol. 56). Chichester, UK: John Wiley & Sons.

Lamb, M. E., Orbach, Y., Hershkowitz, I., Esplin, P. W., & Horowitz, D. (2007). A structured forensic interview protocol improves the quality and informativeness of investigative interviews with children: A review of research using the NICHD Investigative Interview Protocol. *Child Abuse & Neglect*, 31(11-12), 1201-1231.

Milne, R., & Bull, R. (2006). Interviewing victims of crime, including children and people with intellectual disabilities. In M.R. Kebbell & G. M. Davies (Eds.), *Practical psychology for forensic investigations and prosecutions* (pp. 7-24). West Sussex, England: John Wiley & Sons.

Ministère français de la Justice (2015). *EVVI (Evaluation of Victims)*. Developed in co-operation with the French Victim Support and Mediation Institute (INAVEM), the French National School for the Judiciary (ENM), the Crown Prosecution Service (United Kingdom), the Polish Ministry of Justice (Poland), the 'Secretaria General de la Administracion de Justicia' (Spain), the 'Associação Portuguesa de Apoio à Vitima' (Portugal), and 'GIP-JCI - Justice Coopération Internationale' (France), under the EVVI (EValuation of VICTims) project (JUST/2013/JPEN/AG/4602). Retrieved from: http://www.justice.gouv.fr/publication/evvi_guide_en.pdf [Last accessed: 24 April 2018].

Ministry of Justice (2011). *Achieving Best Evidence in Criminal Proceedings: Guidance on interviewing victims and witnesses, and guidance on using special measures*. London, GB: Ministry of Justice. Retrieved from: https://www.cps.gov.uk/sites/default/files/documents/legal_guidance/best_evidence_in_criminal_proceedings.pdf [Last accessed: 11 May 2018].

Morrison, J. (2014). *The first interview* (4th ed.). New York, NY: Guilford Publications.

Orbach, Y., Hershkowitz, I., Lamb, M. E., Esplin, P. W., & Horowitz, D. (2000). Assessing the value of structured protocols for forensic interviews of alleged child abuse victims. *Child Abuse & Neglect*, 24(6), 733-752.

Poole, D. A., & Lindsay, D. S. (2002). Children's suggestibility in the forensic context. In M. L. Eisen, J. A. Quas, & G. S. Goodman (Eds.), *Memory and suggestibility in the forensic interview* (pp. 355-382). Mahwah, NJ: Erlbaum.

Saywitz, K. J. & Lyon T. D. (2002). Coming to Grips with Children's Suggestibility. In M. L. Eisen, J. A. Quas, & G. S. Goodman (Eds.), *Memory and suggestibility in the forensic interview* (pp. 85-113). Mahwah, NJ: Erlbaum.

Sommers-Flanagan, J. & Sommers-Flanagan, R. (2014). *Clinical interviewing* (5th ed.). Hoboken, NJ: John Wiley & Sons.

The Advocate's Gateway (2015). *General principles from research, policy and guidance: planning to question a vulnerable person or someone with communication needs - Toolkit 2*. London: The Council of the Inns of Court, The Advocate's Gateway. Retrieved from: <http://theadvocatesgateway.org/images/toolkits/2-general-principles-from-research-policy-and-guidance-planning-to-question-a-vulnerable-person-or-someone-with-communication-needs-141215.pdf> [Last accessed: 15 May 2018].

The Advocate's Gateway (2015). *Planning to question a child or young person - Toolkit 6*. The Council of the Inns of Court, The Advocate's Gateway. Retrieved from: <http://theadvocatesgateway.org/images/toolkits/6-planning-to-question-a-child-or-young-person-141215.pdf> [Last accessed: 15 May 2018].

Themeli, O. (2014). *Ta παιδιά καταθέτει. Η δικανική εξέταση ανηλίκων μαρτύρων, θυμάτων σεξουαλικής*

κακοποίησης [The children testify. Forensic examination of juvenile witnesses, victims of sexual abuse]. Αθήνα: Εκδόσεις Τόπος.

United Nations Office on Drugs and Crime, Human Trafficking Knowledge Portal, Case Law Database, UNODC No.: CAN017. Retrieved from: <https://www.unodc.org/cld/case-law-doc/traffickingpersonscrimetype/can/oliver-machado.html?lng=en&tmpl=htms> [Last Accessed: 12 March 2018].

UNODC - United Nations Office on Drugs and Crime (2009). Module 8: Interviewing victims of trafficking in persons who are potential witnesses. In UNODC, *Anti-human trafficking manual for criminal justice practitioners*. Vienna: United Nations Publications. Retrieved from: https://www.unodc.org/documents/human-trafficking/TIP_module8_Ebook.pdf [Last accessed: 10 May 2018].

UNODC - United Nations Office on Drugs and Crime (2009). Module 9: Interviewing child victims of trafficking in persons. In UNODC, *Anti-human trafficking manual for criminal justice practitioners*. Vienna: *United Nations Publications*. Retrieved from: http://www.unodc.org/documents/human-trafficking/TIP_module9_Ebook.pdf [Last accessed: 10 May 2018].

Wilson, C., & Powell, M. (2001). *A guide to interviewing children: Essential skills for counsellors, police lawyers and social workers*. London: Routledge.

Yarbrough, J., Hervé, H. F., & Harms, R. (2013). The sins of interviewing: errors made by investigative interviewers and suggestions for redress. In B.S. Cooper, D. Griesel, M. Ternes (Eds.), *Applied issues in investigative interviewing, eyewitness memory, and credibility assessment* (pp. 59-95). New York, NY: Springer.

4.5. Active Observation and Listening

SUGGESTED DURATION

90-120 MINUTES

OBJECTIVES

- INTRODUCE AND FAMILIARIZE THE PARTICIPANTS WITH THE BASIC PRINCIPLES OF ATTENDING BEHAVIOR
- ENHANCE THE PARTICIPANTS' CAPACITIES IN USING THE VARIOUS ACTIVE OBSERVATION AND LISTENING SKILLS

Outline

STEP 1 – Active listening and observation skills

- Ask participants what they think makes a person a good listener and what could potentially hinder a specific communication.
- To stimulate the conversation ask them to think of person they know, that makes them feel that he/she truly listens them when they discuss important issues.
- Then ask them to think of things that family, friends or colleagues do or tell them when they are angry, sad, anxious, or distressed, which they find that make them feel worse.
- Based on the discussion and real-life examples offered, explain the basic notions of active communication, verbal and nonverbal behavior.
- Introduce the skills through discussion or by using a question based on their specific function. For example:
 - > How do you usually place your body when talking with a victim?
 - > Do you think that the way you look at the victim, or position your body, may affect the communication process? How/ in what ways?
 - > What can you say when you haven't understood what the victim said?
 - > What can you say when you suspect that the victim is lying?
 - > What kind of insight can you gain while observing a victim's body language?
- Introduce and discuss (some) of the skills and dos and don'ts below as appropriate. Try not to provide specific examples but ask the participants to provide real examples of each technique instead, collaboratively working on their examples to improve them by asking for alternative approaches or wording.

Notes for trainers:

- The duration of this step should vary according to the participants' previous knowledge and level of experience. The skills are presented in a sequence of more general to more advanced techniques. Therefore, if participants, are, for example, familiar with the verbal and non-verbal skills of active listening, only key points of those should be briefly presented to recapitulate and reframe the existing knowledge, and more time should be devoted to more advanced skills, such as clarification, supporting confrontation and redirecting.

- Trainers should consider combining this step with the next (STEP 2 – Exercise) for more participatory interactive learning.

STEP 2 – Exercise

- When applicable, consider performing small demonstrations/role play exercises with the participants as actors after the presentation of each (set of) skill(s).

Several verbal and nonverbal behaviors and skills can be used by an individual to appear, sound, act but most importantly be a good listener⁶⁶. Active listening requires empathy and engagement into the conversation and attending behavior is the ‘most basic communication strategy⁶⁷ for an effective interaction. Attending behavior consists of verbal and non-verbal behavioral cues that show to the individual that one is actively engaged in the conversation, they are listening carefully and understanding them fully, serving therefore as encouragements for them to keep talking. Observational skills constitute the key element of attentive behavior and refer to closely observing the verbal and non-verbal behavior of the individual, and, most importantly, any changes or discrepancies and conflicts, and responding appropriately.

Non-verbal behavior

Eye contact

- ✓ Maintaining eye contact and looking at the individual throughout the conversation is a sign of interest and respect.
- × Individual differences: staring should be avoided if the individual appears overwhelmed or uncomfortable talking about a specific subject.
- × Cultural differences: eye contact might not be appropriate in some cultures.

Facial expressions

- ✓ An expressive face, reacting appropriately to what the victim says, shows interest and helps sustain rapport.
- ✓ Mimicking the victim’s expressions appropriately shows understanding and interest.
- × Intense or overemphasized expressions should be avoided, since they might be perceived as inappropriate.
- × Lack of appropriate facial expressions might be perceived as lack of interest.

Body language

- ✓ A natural, relaxed, but attentive posture with feet and legs placed in an unobtrusive position should be adopted.
- ✓ Use of smooth and unobtrusive hand gestures is recommended
- ✓ Leaning slightly closer toward the victim can be used to show interest or encourage elaboration.
- ✓ Individual and cultural differences: responding and adapting according to their behavior, e.g. proximity to the victim.

⁶⁶Sommers-Flanagan, J. & Sommers-Flanagan, R. (2014). *Clinical interviewing* (5th ed.). Hoboken, NJ: John Wiley & Sons, p. 60.

⁶⁷ Ivey, A. E., Ivey, M. B., & Zalaquett, C. P. (2010). *Intentional interviewing and counseling: Facilitating client development in a multicultural society* (7th ed.). Belmont, CA: Brooks/Cole, p. 62.

- × Moving around too much and overemphasized gestures can increase the victim's tension or anxiety.
- × Folding arms across the chest, leaning back on the chair from the waist up, crossing legs away from the individual, or turning away from the individual can be perceived as signs of apathy or disinterest.
- × Any physical contact other than a handshake should be avoided, since it can be perceived as inappropriate by some individuals.

Vocal qualities, language, and silences

Vocal qualities

- ✓ A neutral, warm and non-judgmental tone should be used.
- ✓ It is important to adjust the vocal qualities according to the specific needs of the victim e.g. speaking slowly when they have difficulty understanding.
- × Increased tones, high pitch or fast speech rate should be avoided in all cases.

Talking their language

- ✓ Terms and concepts that the victim can understand should be used, especially in cases of child victims.
- ✓ Using their language and using plain language is recommended to ensure understanding.
- ✓ The pace of the discussion and should follow the victim's pace and needs, e.g. slower pace to allow for the victim to think and process a question before answering.
- × Any terms that might carry negative meaning (e.g. victim) should be avoided.
- × Professional terms and jargon should be avoided, as it should always be assumed that most victims are not familiar with the process and procedures foreseen.

Silences

- ✓ Silences are important and useful for the victim to think or recompose and recover.
- ✓ A few seconds (10-15) or instances (1-2) should pass before intervening.
- ✓ It is recommended to allow the victim some space during silences.
- × Staring at the victim during the pause should be avoided, as it can increase their discomfort.
- × When silences are interrupted the recalling of events can be significantly disrupted.

Encouragement

Probing, Mm-hmm/ Yes/ Smiles/ Nods

- ✓ Open-ended, specific/closed questions, mm-hmm, yes, smiles, nods, repeating the victims' phrase, etc. should be used, as appropriate, to encourage the victim to continue elaborating, show them that what they have communicated has been understood, and elicit more information and specific details.
- × Overuse should be avoided, alternating (every minute or two) between verbal and nonverbal encouragements and other phrases could be used instead.

Paraphrase

- ✓ Simple paraphrasing by repeating the essential information of what the victim just said, can be used to ensure proper understanding, to show the victim they have been heard and to encourage further information.
- ✓ It can be used as a question or ending with a question to allow the victim to correct any misinformation.
- × Echoing verbatim exactly what has been said should be avoided.
- × Commenting or unconsciously having a positive or negative tone should be avoided.

Summarize

- ✓ Small summaries of the various topics and facts examined can be used to integrate what has been said, transit to the next topic, ensure proper understanding, and facilitate more focused discussion.
- ✓ Following an accurate and appropriate summary the victim will most likely respond positively and continue elaborating.
- ✓ The victim should always be included in the process, asking their confirmation through verbal and nonverbal skills.
- × Long summaries that will turn the focus away from the victim and towards the speaker should be avoided.

Empathetic comments - Reassurance

- ✓ Empathetic comments and non-verbal smiles and nods should be used to show understanding and validation of their experience.
- ✓ They can help encourage a victim to continue when a sensitive topic is discussed, e.g. 'I can only imagine what you are going through, it is a very hard decision to come here and report the incident today'. 'I can only imagine how difficult this must be for you.'
- × Generalizations, false hopes, clichés and stereotypic expressions should be avoided, e.g. 'It will all work out', 'things will get better', 'you will soon forget all about it'.
- × Phrases such as 'I know how you must feel.', 'I understand your position' should be avoided.

Clarifications, Redirecting and Supportive confrontation

Clarifications

- ✓ Stating ones' own confusion and repeating what has just been said with a small closed question at the end could be used to ensure proper understanding or clarification, (e.g. So you first... 'Did I understand that correctly?').
- ✓ Simply asking what has been said is appropriate in cases of mishearing or misunderstanding (e.g. 'I am sorry, I am not sure I understood that right. Could you repeat what you said?')
- × Clarifications in minor or unimportant details should be avoided as they might derail the conversation.

Redirecting

- ✓ Redirecting always starts with a supportive comment and can be used to avoid abrupt interruptions when clarity or change of subject is needed, or the victim is avoiding a question, redirecting the conversation back to the issue of concern, e.g.:

- ‘Thank you, I think that I have a good understanding of how things were with the two of you before. Could you now tell me some more about what happened after he came back the other night?’
- ‘I can only imagine how difficult it must be to talk about all these again. However, I really want to do everything I can do to help. And I think that in order to achieve that we need to go back a moment and talk about what happened that night’.
- × Changing or increasing the tone and using a judgmental tone should be avoided.

Supportive Confrontation

- ✓ A respectful supportive confrontation can be used clarify discrepancies or vagueness.
- ✓ Using evidence and facts to point the conflicts, and most importantly a non-judgmental and non-blaming tone, the officer can present his/her confusion and ask for the victim’s help to clarify, e.g.:
 - ‘I am sorry, but I think I might have missed something. You just said that this was the first time you saw him, but earlier you told me you knew each other from work. Could you please help me out with that?’
- × General phrases (e.g. ‘that doesn’t make sense’, ‘that’s not what you said before’) and accusations should be avoided.
- × Confrontations too early in the discussion might negatively affect rapport.

STEP 3 – Exercise

- Ask the participants to split in groups of 3 (or 4) people.
- Ask them to decide who will speak, who will listen, and who will observe for feedback.
- The speaker chooses a topic for the conversation. It can be an emotional topic of personal significance of their choosing (positive or negative, personal or something that happened to someone else, true or fictional).
- Alternatively, the speaker can choose a real case with a victim or an imaginary one, based on real case examples. In this case, ask participants to focus on the cases they find most difficult to handle or the ones that they encounter most often.
- The speaker speaks for about 4-5 minutes (focused on the main body of the discussion, not the beginning or the opening, when the victim explains what happened).
- The listener uses active listening skills as mentioned above.
- The observer takes notes on the usage of the skills.
- The trainers make rounds to observe the process.
- After the speaker finishes his/her story, each group discusses the feedback (how the speaker felt, how the listener felt, what the observer noticed) for a few minutes.
- If there is enough time, ask the groups to switch roles and repeat the exercise.
- Regroup the participants and discuss the exercise with the whole group:
 - > what was difficult?
 - > what was easy?
 - > how did the speaker feel during the process?
 - > how did the listener feel during the process?
 - > what did the observers note in terms of the basic principles of interacting with victims: neutrality, respect, body language, empathy, etc.?
 - > did they manage to receive all the necessary information?
 - > focus on what the participants found difficult or frustrating: frustration can be a sign of difficulties in handling something.
- Thank the participants.

Resources:

Berman, P. S. (2005). *Interviewing and diagnostic exercises for clinical and counseling skills building*. Mahwah, NJ: Lawrence Erlbaum Associates

Bitiukova, N., Faix-Prukner, C., Vidmar, N. H., & Sile, S. (2016). *Toolkit for the Law Enforcement Bodies – Accommodating the Needs of the Victims of Homophobic and Transphobic Hate Crimes*. Developed under the “Accommodating the needs of the victims of homophobic and transphobic hate crimes” project (JUST/2013/FRC/AG/6163).

Warsaw: Campaign Against Homophobia. Retrieved from: <http://hatenomore.net/publ/03-toolkit-miedzyn/03-toolkit-miedz.pdf> [Last accessed: 14 May 2018].

Black, I. S. & Yeschke, C. L. (2014). *The art of investigative interviewing* (3rd ed.). Waltham, MA: Butterworth Heinemann - Elsevier Inc.

Byers, G. (2011). *Victims with Disabilities: The Forensic Interview-Techniques for Interviewing Victims with Communication and/or Cognitive Disabilities*. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Office of Victims of Crime. Retrieved from: <https://www.ovc.gov/publications/infores/pdfxt/VictimsGuideBook.pdf> [Last accessed: 18 May 2018].

Cormier, L. S., Nurius, P. S., & Osborn, C. J. (2012). *Interviewing and change strategies for helpers: Fundamental skills and cognitive-behavioral interventions* (7th ed.). Belmont, CA: Brooks/Cole.

Ferraro, E. F. (2015). *Investigative Interviewing: Psychology, Method and Practice*. Boca Raton, FL: CRC Press.

Ivey, A. E., Ivey, M. B., & Zalaquett, C. P. (2010). *Intentional interviewing and counseling: Facilitating client development in a multicultural society* (7th ed.). Belmont, CA: Brooks/Cole.

Lamb, M. E., Orbach, Y., Hershkowitz, I., Esplin, P. W., & Horowitz, D. (2007). A structured forensic interview protocol improves the quality and informativeness of investigative interviews with children: A review of research using the NICHD Investigative Interview Protocol. *Child Abuse & Neglect*, 31(11–12), 1201–1231.

Ministry of Justice (2011). *Achieving Best Evidence in Criminal Proceedings: Guidance on interviewing victims and witnesses, and guidance on using special measures*. London, GB: Ministry of Justice. Retrieved from: https://www.cps.gov.uk/sites/default/files/documents/legal_guidance/best_evidence_in_criminal_proceedings.pdf [Last accessed: 11 May 2018].

Morrison, J. (2014). *The first interview* (4th ed.). New York, NY: Guilford Publications.

Orbach, Y., Hershkowitz, I., Lamb, M. E., Esplin, P. W., & Horowitz, D. (2000). Assessing the value of structured protocols for forensic interviews of alleged child abuse victims. *Child Abuse & Neglect*, 24(6), 733–752.

Sommers-Flanagan, J. & Sommers-Flanagan, R. (2014). *Clinical interviewing* (5th ed.). Hoboken, NJ: John Wiley & Sons.

The Advocate’s Gateway (2015). *General principles from research, policy and guidance: planning to question a vulnerable person or someone with communication needs - Toolkit 2*. London: The Council of the Inns of Court, The Advocate’s Gateway. Retrieved from: <http://theadvocatesgateway.org/images/toolkits/2-general-principles-from-research-policy-and-guidance-planning-to-question-a-vulnerable-person-or-someone-with-communication-needs-141215.pdf> [Last accessed: 15 May 2018].

The Advocate’s Gateway (2015). *Planning to question a child or young person - Toolkit 6*. The Council of the Inns of Court, The Advocate’s Gateway. Retrieved from: <http://theadvocatesgateway.org/images/toolkits/6-planning-to-question-a-child-or-young-person-141215.pdf> [Last accessed: 15 May 2018].

Themeli, O. (2014). *Τα παιδιά καταθέτει. Η δικανική εξέταση ανηλίκων μαρτύρων, θυμάτων σεξουαλικής κακοποίησης* [The children testify. Forensic examination of juvenile witnesses, victims of sexual abuse]. Αθήνα: Εκδόσεις Τόπος.

UNODC - United Nations Office on Drugs and Crime (2009). Module 8: Interviewing victims of trafficking in persons who are potential witnesses. In UNODC, *Anti-human trafficking manual for criminal justice practitioners*. Vienna: United Nations Publications. Retrieved from: https://www.unodc.org/documents/human-trafficking/TIP_module8_Ebook.pdf [Last accessed: 10 May 2018].

UNODC - United Nations Office on Drugs and Crime (2009). Module 9: Interviewing child victims of trafficking in persons. In UNODC, *Anti-human trafficking manual for criminal justice practitioners*. Vienna: United Nations Publications. Retrieved from: http://www.unodc.org/documents/human-trafficking/TIP_module9_Ebook.pdf [Last accessed: 10 May 2018].

Walters, R. P. (1980). *Amity: Friendship in action. Part I: Basic friendship skills*. Boulder, CO: Christian Helpers.

Wilson, C., & Powell, M. (2001). *A guide to interviewing children: Essential skills for counsellors, police lawyers and social workers*. London: Routledge.

Woods, T. O. (2008). *First Response to Victims of Crime: A Guidebook for Law Enforcement Officers*. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Office of Victims of Crime. Retrieved from: <https://www.ovc.gov/publications/infores/pdf/txt/2010FirstResponseGuidebook.pdf> [Last accessed: 14 May 2018].

Yarbrough, J., Hervé, H. F., & Harms, R. (2013). The sins of interviewing: errors made by investigative interviewers and suggestions for redress. In B.S. Cooper, D. Griesel, M Ternes (Eds.), *Applied issues in investigative interviewing, eyewitness memory, and credibility assessment* (pp. 59-95). New York, NY: Springer.

4.6. Difficult Interactions

SUGGESTED DURATION

60-90 MINUTES

OBJECTIVES

- FAMILIARIZE PARTICIPANTS WITH PRACTICAL AND SITUATION SPECIFIC TECHNIQUES FOR HANDLING DIFFICULT INTERACTIONS WITH VICTIMS
- PRACTICE THE SKILLS ACQUIRED THROUGHOUT THE PREVIOUS SECTIONS OF THIS MODULE

Outline

STEP 1 – Overall Instructions

- Ask participants to describe the type of interactions they find most challenging.
- Explain the reasoning behind each victim reaction and introduce the techniques through discussion and in collaboration with the participants. For example, by asking what strategies they implement in such cases, which of those often prove effective or ineffective and why.
- Try not to provide specific examples but ask the participants to provide real examples of each technique instead.

Notes for trainers:

- The duration of this step should vary according to the participants' previous knowledge and level of experience. The skills are presented in a sequence of more basic to more advanced techniques. Therefore, if participants, for example, are familiar with the basic techniques, key points of those should be briefly presented to recapitulate and reframe the existing knowledge and more time should be devoted to advanced skills, non-judgmental and non-threatening confrontation.

Due to the difficulties that the victims experience they might often be highly emotional during their interactions with the law enforcement authorities. At the same time, talking about the event further enhances their emotional reactions, which can vary from crying to being overly angry or aggressive.

Similarly, due to public perceptions or previous interactions with the criminal justice system, victims can often exhibit hostile behavior towards police officers. That coupled with the effects of victimization to the individual, could potentially result in situations where the cooperation is significantly impaired.

Other times, despite the officers' best efforts, the victims might provide vague answers on the facts under examination, either due to the complexity of the facts themselves, or the mental and psychological distress the victim is experiencing due to the trauma, or other related individual characteristics.

There might be cases where the victims are – or at least it is suspected that they are- lying.

These cases should be distinguished by those where the victim does not in fact remember what happened or their mental and psychological state has left them confused about the facts. Significant attention is needed in this case to avoid victim blaming and damaging the cooperative relationship with the victim.

Although these reactions are typical in traumatized victims and to be expected given the circumstances, they can often result into a hindered communication and insufficient information gathering. The following techniques and examples can be implemented in such cases in an effort to appease the emotional expressions and direct the conversation to the topics of interest.

Maintain your composure and talk quietly

Getting rattled, becoming defensive or angry, and reciprocating the behavior will probably exacerbate the situation. If the victim speaks in an angry and high tone, lowering the tone of your voice, speaking calmly, softly and quietly, will most likely result in the victim mirroring your tone and lower their voice as well. Statements like the following should be avoided, as they could aggravate the victim's intense feelings.

- × I am just trying to help.
- × I am just doing my job.
- × If you don't tell me, I cannot help you.
- × I am not the one that did this to you.
- × I haven't done anything to you.
- × You are obligated to tell me.

Acknowledge the emotion, be on their side, and agree with them

Recognizing how the victim feels, showing that you understand and accept their emotions is always a good first step that could help appease their emotions:

- VICTIM: (shouting or crying) 'You have done nothing! He is still out there, and I cannot leave the house! Why don't you put him in jail?'
- POLICE OFFICER: 'I can see that you feel angry and frustrated.' (*don't use the words 'I understand' or 'I know' as it most likely will further frustrate the victim, try using 'I see' or 'I can see' or 'I can only imagine' instead*).
- VICTIM: 'You bet I am!'
- VICTIM: 'I just want you to leave me alone, and to be done with all these.'
- POLICE OFFICER: 'I really don't want to bother you any more than I have to, and I will do anything I can to finish this as quickly as possible. But I cannot do that until you tell me what happened.'

Change the subject

The behavior could be a result of the line of questioning touching a very difficult topic. Changing the subject to something less threatening and revisiting the situation once a better rapport is developed is advisable.

Check first and ask for the victim's help to understand

If the victim is vague or gives conflicting answers, a good start is to first ask the victim

to restate the facts to make sure that there was no miscommunication on either part. Stating your own confusion and asking for their help to better understand can potentially help increase their cooperation.

- POLICE OFFICER: 'I am sorry, I am not sure I got this right. Could you please run it by me once again?'
- POLICE OFFICER: 'Please help me understand that part.'
- POLICE OFFICER: 'So, let me get this right.'
- POLICE OFFICER: 'Just to make sure that I understood what you said.'

Explain again and redefine the questions

Reposing the question in a different manner or wording, redefining the question asking for specifics can be used to ensure understanding.

- POLICE OFFICER: 'What I really wanted to know at this point is if you have seen him after you left the house.'

Definitions, structure and precision

Asking the victim to define vague words – such as often, some time ago – and posing questions that provide the structure and amount of precision needed, can assist in obtaining more details without having to pose a series of close-ended questions.

- VICTIM: 'We have always been fighting a lot.'
- POLICE OFFICER: 'What exactly do you mean with fighting?'
- POLICE OFFICER: 'How long has it been since you last saw him?'
- VICTIM: 'It's been a while...'
- POLICE OFFICER: 'Can you give me an idea of how long ago?' or 'When was the last time you saw him?'

Closed-ended questions

Switching to close-ended questions can be used as last resort to specify the kind of information need and avoid the change of subject by the victim.

- POLICE OFFICER: 'Could you please tell me about your ex-husband?'
- VICTIM: 'He is terrible! He was the biggest mistake of my life! I should have never married him. My parents wanted me to...'
- POLICE OFFICER: (Interrupts) 'Do you still see him often?'
- VICTIM: 'He doesn't even care about our children...'
- POLICE OFFICER: (Interrupts) 'When was the last time you or the kids saw him?'
- VICTIM: 'Last month when he came by the house to see the kids.'

Redirect the questions

Redirecting can be used when the victim is moving off the topic or avoids answering the questions.

- POLICE OFFICER: 'Now I would like to hear about your living situation. You mentioned earlier that your husband no longer lives with you?'
- VICTIM: 'I threw him out! I cannot even stand him anymore! He has done so many things to me I don't even want to see him.'

- POLICE OFFICER: 'We might be able to talk about that later. What I really need to know now is if he still comes by the house every now and then?'
- POLICE OFFICER: 'What I really wanted to know at this point is if you have seen him after you left the house. Perhaps later we can talk more about the fight you had.'

Alternative explanations and sources

The possibility of alternative explanations for why the victim is being vague, lying, or refuses to cooperate (e.g. fear of retaliation, communication difficulties) should always be examined and, if possible, alternative sources or records should be sought.

Non-judgmental and non-threatening confrontation

In cases of hostility or non-cooperation a non-threatening confrontation – excusing and justifying their behavior while empathizing with them – can be used:

- POLICE OFFICER: 'Would you like to tell me what happened?'
- VICTIM: 'All of you keep asking me the same questions! Can you just talk to the other guy from before?'
- POLICE OFFICER: 'I can imagine that you must be getting tired from repeating the same things.'
- VICTIM: 'You think?!'
- POLICE OFFICER: 'I don't mean to burden you more. Going through something like that must have been very difficult.'
- VICTIM: 'You bet it was.'
- POLICE OFFICER: 'What happened? It must have been awful for you to be this upset.'

Interrupt the conversation

The option of taking a break and continuing the conversation at a later time – a few minutes or days later – when the victim will have the chance to recover should always be kept in mind. The need for breaks or pauses might occur often with victims that feel overwhelmed, and also with children.

- POLICE OFFICER: 'I can see that you are too upset at the moment. Let's take a pause for a few minutes and we can continue our discussion once you feel better.'
- POLICE OFFICER: 'I can see that you are too upset at the moment. Let's stop for now, and you can come back tomorrow morning, once you had a chance to get some rest.'

STEP 2 – Exercise

- Ask 2 participants to volunteer to step in the center of the room and perform a role play exercise.
- One participant will play the victim and other the officer.
- Give the scenario below to the victim. Prepare the victim and ask them to present excessive emotions, such as anger, hostility, crying, vagueness or lying for the purposes of the exercise.
- Discuss the exercise with the whole group and provide feedback:
 - > what was difficult?
 - > what was easy?
 - > how did the speaker feel during the process?

- > how did the listener feel during the process?
- > what did the observers note in terms of the basic principles of interacting with victims: neutrality, respect, body language, empathy, etc.?
- Thank the participants.
- If there is enough time, repeat the exercise with the other case study.

Case study – Marianna

Marianna is 32 years old, she has been married to Costas, a truck driver, for the past 10 years and they live together at the home town of her husband. They had recently their third child, Niki, who is now 4 months old. Their other two children are Joanna, 3 years old, and George, 5 years old. Marianna doesn't work because she has a mild form of mental disability for which she receives a small disability allowance from a welfare service. Moreover, Costas prefers that she stays home to take care of and raise their children. Her parents live at a village near her house, but rarely visit her due to some health issues of her father. She has few friends, mainly from the neighborhood, some of whom help her when Costas is travelling for work.

Marianna has been a victim of physical abuse by her husband since they got married. Most of the abuse incidents occur when he returns home from work trips. She attempted to commit suicide once in the past, about 3 years after she got married. Costas controls her daily routine and all her contacts with other people. He constantly insults and degrades her abilities as a woman and a mother. He often calls her stupid and worthless and tells her that she should stay home because people laugh at her. Sometimes he even encourages their children to call her names.

Violence has escalated after she gave birth and her husband sometimes even acts aggressively towards the two older children. Even though she wanted to report the abuse to the police several times before, Costas told her that the police will not believe her because of her mental disability and threatened her that the welfare service will take the children away from her. Two days ago, he returned home from a trip and showed her a set of knives he had just bought. They had a fight because Marianna expressed her concerns regarding the knives and the safety of the children. She decides to go to the Police to ask for protection for her and her children.

Marianna arrives at the police station very upset and confused. She finds it difficult to focus and answer questions, and there are moments when she seems disoriented. She often repeats that she wants to escape from her marriage but finds it difficult to raise her children alone.

Case study – Damian⁶⁸

Damian, 18-years-old, was in emotional and mental distress and in conflict with his parents when he saw an advertisement in a newspaper calling for kidney donations and

⁶⁸ Retrieved and adapted from United Nations Office on Drugs and Crime, Human Trafficking Knowledge Portal, Case Law Database, UNODC No.: ISR015. Retrieved from: https://www.unodc.org/cld/case-law-doc/traffickingpersonscrimetype/isr/2007/j.a._vs._state_of_israel.html?lng=en&tmpl=htms [Last Accessed: 12 March 2018].

promising compensation. Damian was rather poor, belonging to a local minority, with no significant prospects and had dropped out of school in a young age.

His consent was obtained without providing him with full medical information and the medical dangers of the operation. He was promised that the procedure was easy and would leave only a small scar. He was told the flight to Europe was a "trip" and that he would gain a lot of money, specifically \$7000.

He was invited to live in the house of Jason, who represented himself as a knowledgeable physician, for several days before the trip. He was not allowed to leave the house alone for several days and his passport was withheld to prevent him from running away.

He received half of the payment before the trip. From the airport he was flown to another country, accompanied by one of the Jason's accomplices, where his kidney was removed. He was threatened that if he complained to police he would be arrested, since what he did was a crime. When he demanded his money, he was physically assaulted. They later charged him with expenses and debts, owing to Jason for food and rent. He was left with only \$500. He was then forced to go back to his parents' house.

He was not given any medical treatment upon his return. He continued to suffer pain and weariness long after the operation. He was so afraid that he didn't seek medical treatment to remove the stitches from the surgery, but rather cut them in his own kitchen with a knife.

He was taken to the hospital by his parents, when he developed a high fever from an infection. The doctors called the police, but Damian refuses to cooperate and is trying to lie his way out.

Resources:

Black, I. S. & Yeschke, C. L. (2014). *The art of investigative interviewing* (3rd ed.). Waltham, MA: Butterworth Heinemann - Elsevier Inc.

Byers, G. (2011). *Victims with Disabilities: The Forensic Interview-Techniques for Interviewing Victims with Communication and/or Cognitive Disabilities*. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Office of Victims of Crime. Retrieved from: <https://www.ovc.gov/publications/infores/pdfxt/VictimsGuideBook.pdf> [Last accessed: 18 May 2018].

Lamb, M. E., Hershkowitz, I., Orbach, Y., & Esplin, P. W. (2011). *Tell me what happened: Structured investigative interviews of child victims and witnesses* (Vol. 56). Chichester, UK: John Wiley & Sons.

Ministry of Justice (2011). *Achieving Best Evidence in Criminal Proceedings: Guidance on interviewing victims and witnesses, and guidance on using special measures*. London, GB: Ministry of Justice. Retrieved from: https://www.cps.gov.uk/sites/default/files/documents/legal_guidance/best_evidence_in_criminal_proceedings.pdf [Last accessed: 11 May 2018].

Morrison, J. (2014). *The first interview* (4th ed.). New York, NY: Guilford Publications.

The Advocate's Gateway (2015). *General principles from research, policy and guidance: planning to question a vulnerable person or someone with communication needs - Toolkit 2*. London: The Council of the Inns of Court, The Advocate's Gateway. Retrieved from: <http://theadvocatesgateway.org/images/toolkits/2-general-principles-from-research-policy-and-guidance-planning-to-question-a-vulnerable->

[person-or-someone-with-communication-needs-141215.pdf](#) [Last accessed: 15 May 2018].

The Advocate's Gateway (2015). *Working with traumatised witnesses, defendants and parties - Toolkit 18*. London: The Council of the Inns of Court, The Advocate's Gateway. Retrieved from: <http://www.theadvocatesgateway.org/images/archive/18-working-with-traumatised-witnesses-defendants-and-parties-2015.pdf> [Last accessed: 15 May 2018].

United Nations Office on Drugs and Crime, Human Trafficking Knowledge Portal, Case Law Database, UNODC No.: ISR015. Retrieved from: https://www.unodc.org/cld/case-law-doc/traffickingpersonscrimetype/isr/2007/j.a._vs._state_of_israel.html?lng=en&tmpl=htms [Last Accessed: 12 March 2018].

UNODC - United Nations Office on Drugs and Crime (2009). Module 8: Interviewing victims of trafficking in persons who are potential witnesses. In UNODC, *Anti-human trafficking manual for criminal justice practitioners*. Vienna: United Nations Publications. Retrieved from: https://www.unodc.org/documents/human-trafficking/TIP_module8_Ebook.pdf [Last accessed: 10 May 2018].

UNODC - United Nations Office on Drugs and Crime (2009). Module 9: Interviewing child victims of trafficking in persons. In UNODC, *Anti-human trafficking manual for criminal justice practitioners*. Vienna: United Nations Publications. Retrieved from: http://www.unodc.org/documents/human-trafficking/TIP_module9_Ebook.pdf [Last accessed: 10 May 2018].

Vrij, A. (2014). Interviewing to detect deception. *European Psychologist*, 19, 184–194.

Vrij, A., & Granhag, P. A. (2012). Eliciting cues to deception and truth: What matters are the questions asked. *Journal of Applied Research in Memory and Cognition*, 1(2), 110–117.

Wilson, C., & Powell, M. (2001). *A guide to interviewing children: Essential skills for counsellors, police lawyers and social workers*. London: Routledge.

Yarbrough, J., Herve, H. F., & Harms, R. (2013). The sins of interviewing: errors made by investigative interviewers and suggestions for redress. In B.S. Cooper, D. Griesel, M Ternes (Eds.), *Applied issues in investigative interviewing, eyewitness memory, and credibility assessment* (pp. 59-95). New York, NY: Springer.

4.7. Closure

SUGGESTED DURATION

40-50 MINUTES

OBJECTIVES

- PROVIDE THE PARTICIPANTS WITH SOME BASIC TIPS ON HOW TO EFFECTIVELY CLOSE A DISCUSSION WITH A VICTIM
- AS THIS SECTION REQUIRES PUTTING IN PRACTICE MANY OF THE SKILLS DISCUSSED EARLIER DURING THIS MODULE, THIS ACTIVITY IS A GOOD OPPORTUNITY TO ASSESS THE PARTICIPANTS' PROGRESS, BEFORE CONCLUDING THE TRAINING OR MOVING TO THE NEXT MODULE

Outline

STEP 1 – The closing

- Start this section by asking the participants to present how the closing of a conversation with a victim takes place.
- Present the basic principles/tips below through discussion and in collaboration with the participants. For example, asking what should have been achieved by the end of the conversation; or which steps do they consider important when closing a discussion.

The main goal to be achieved by the end of a conversation with a victim is – apart from sufficient information gathering – to prepare the victim for what's next and establish a good working relationship.

A good closing, from the perspective of both the victim and that of the officer, would entail the following steps:

1. Summary

Summary of the key points the victim said, using their words as much as possible. It is very important to involve the victim in this process and ask them to verify and provide corrections if anything is missing or mistaken.

- So, to sum things up, ever since you met last month he has been contacting you on your phone regularly, sending you messages on social media, and showing up at your work without any apparent reason. Last week you thought he followed you home from work, and a few days later you saw him under your house. And last night he was ringing your bell in the middle of the night insisting to come up. Does that sum it up?

2. Additional information

The summary might encourage the retrieval of further information; therefore, the victim should always be asked if there is anything else they would like to add. For example:

- Is that right? Is there something I might have missed that you would like to add?

- Have we missed anything? Looking back are there any important facts that we haven't covered?

3. Next steps and future arrangements

Keeping in mind that many victims may not be aware of all procedural issues, it is very important to discuss the next steps and explain what is going to happen next, while always including the victims in the process. Any arrangements for any future communications or meetings should be also set at this point.

- What is going to happen next is it that we will need some time to gather a bit more information. I will keep you updated on every step of the way and let you know as soon as we have any more information. It will probably take a few days until then. In the meantime, you can always reach me at this number if you any questions, or if there anything else you remember. How does that sound?
- As soon as we proceed with reporting your case to the prosecutor we will call you again to set a new meeting. Would that be ok with you?

4. Signposting

Information and details on available support available services should also be offered at this point in a casual manner (see also module 6).

- In the meantime, here is the contact information of some organizations that you might find useful. For example, you can contact them if you need any help, or you would just like to talk to someone.

5. Their questions

Before closing it is also important to give the victim the opportunity to ask any questions they might have.

- Before we rap up, is there anything at all you would like to ask me?
- Do you perhaps have any other questions, or details you would like to discuss before we go?

6. Thanks and positive note

The victim should be thanked for their help and cooperation, and an effort should be made to close the discussion on a positive note and by offering some reassurance or a message of hope – without however any false promises. This will help maintain the good cooperative relationship that was built throughout the discussion and appease some of the negative emotions the victim is having, allowing them to leave the discussion with some sense of control over what is going to happen next.

- Thank you for having this conversation with me, you really helped me understand what happened. I can only imagine how difficult this must have been for you, we will do our best to help in any way we can. And hopefully we will soon be able to take appropriate actions.

7. The victim has the last word

It is advisable to allow the victim the sense that they have the last word of the conversation, as this will enhance their feelings of power and control over the process.

STEP 2 – Exercise

- Based on the material discussed above, but also throughout this module, ask participants to role play the closure by using real life examples.
- Ask 2 participants to volunteer to step in the center of the room and perform a brief role play exercise.
- One participant will play the victim and the other the officer.
- Discuss the exercise with the whole group and provide feedback:
 - > what was difficult?
 - > what was easy?
 - > how did the speaker feel during the process?
 - > how did the listener feel during the process?
 - > what did the observers note in terms of the basic principles of interacting with victims: neutrality, respect, body language, empathy, etc.?
- Thank the participants.

Resources:

Bitiukova, N., Faix-Prukner, C., Vidmar, N. H., & Sile, S. (2016). *Toolkit for the Law Enforcement Bodies – Accommodating the Needs of the Victims of Homophobic and Transphobic Hate Crimes*. Developed under the “Accommodating the needs of the victims of homophobic and transphobic hate crimes” project (JUST/2013/FRC/AG/6163). Warsaw: Campaign Against Homophobia. Retrieved from: <http://hatenomore.net/publ/03-toolkit-miedzyn/03-toolkit-miedz.pdf> [Last accessed: 14 May 2018].

Bull, R., Bilby, C., Cooke, C., & Grant, T. (2009). *Criminal psychology: A beginner's guide*. Oxford, GB: Oneworld Publications.

Byers, G. (2011). *Victims with Disabilities: The Forensic Interview-Techniques for Interviewing Victims with Communication and/or Cognitive Disabilities*. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Office of Victims of Crime. Retrieved from: <https://www.ovc.gov/publications/infores/pdfxtxt/VictimsGuideBook.pdf> [Last accessed: 18 May 2018].

Lamb, M. E., Hershkowitz, I., Orbach, Y., & Esplin, P. W. (2011). *Tell me what happened: Structured investigative interviews of child victims and witnesses* (Vol. 56). Chichester, UK: John Wiley & Sons.

Lamb, M. E., Orbach, Y., Hershkowitz, I., Esplin, P. W., & Horowitz, D. (2007). A structured forensic interview protocol improves the quality and informativeness of investigative interviews with children: A review of research using the NICHD Investigative Interview Protocol. *Child Abuse & Neglect*, 31(11–12), 1201–1231.

Ministry of Justice (2011). *Achieving Best Evidence in Criminal Proceedings: Guidance on interviewing victims and witnesses, and guidance on using special measures*. London, GB: Ministry of Justice. Retrieved from: https://www.cps.gov.uk/sites/default/files/documents/legal_guidance/best_evidence_in_criminal_proceedings.pdf [Last accessed: 11 May 2018].

Morrison, J. (2014). *The first interview* (4th ed.). New York, NY: Guilford Publications.

Orbach, Y., Hershkowitz, I., Lamb, M. E., Esplin, P. W., & Horowitz, D. (2000). Assessing the value of structured protocols for forensic interviews of alleged child abuse victims. *Child Abuse & Neglect*, 24(6), 733–752.

Themeli, O. (2014). *Ta παιδιά καταθέτει. Η δικανική εξέταση ανηλίκων μαρτύρων, θυμάτων σεξουαλικής κακοποίησης* [The children testify. Forensic examination of juvenile witnesses, victims of sexual abuse]. Αθήνα: Εκδόσεις Τόπος.

UNODC - United Nations Office on Drugs and Crime (2009). Module 8: Interviewing victims of trafficking in persons who are potential witnesses. In UNODC, *Anti-human trafficking manual for criminal justice practitioners*. Vienna: United Nations Publications. Retrieved from: https://www.unodc.org/documents/human-trafficking/TIP_module8_Ebook.pdf [Last accessed: 10 May 2018]

UNODC - United Nations Office on Drugs and Crime (2009). Module 9: Interviewing child victims of trafficking in persons. In UNODC, *Anti-human trafficking manual for criminal justice practitioners*. Vienna: United Nations Publications. Retrieved from: http://www.unodc.org/documents/human-trafficking/TIP_module9_Ebook.pdf [Last accessed: 10 May 2018].

Wilson, C., & Powell, M. (2001). *A guide to interviewing children: Essential skills for counsellors, police lawyers and social workers*. London: Routledge.

Woods, T. O. (2008). *First Response to Victims of Crime: A Guidebook for Law Enforcement Officers*. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Office of Victims of Crime. Retrieved from: <https://www.ovc.gov/publications/infores/pdf/txt/2010FirstResponseGuidebook.pdf> [Last accessed: 14 May 2018].

Module 5

Individual Assessment of Victims' Needs

5.1. Individual Assessment

SUGGESTED DURATION

30-60 MINUTES

OBJECTIVES

- EXPLAIN THE NEED, TIMING, SETTING, AND PROCESS OF INDIVIDUAL ASSESSMENT
- PREPARE THE PARTICIPANTS FOR THE NEXT ACTIVITY ON THE PRACTICAL IMPLEMENTATION OF THE INDIVIDUAL ASSESSMENT

ADAPTATION

If a national law or specific procedural guidelines for individual assessment exist, make sure to explain the context to the participants. For example:

- When it takes place (e.g. during the interview, or official statement, or afterwards)?
- Who carries out the assessment?
- Is it confidential or part of the official file?
- Who can have access to it?
- Is the victim's consent required?

Outline

STEP 1 - Practicalities from the EVVI manual⁶⁹

- Start this section by asking the participants to share their experience, if any, in conducting assessments of victims' needs.
- Present the basic information below regarding the individual assessment (based on Article 22 of the Victims' Directive).
- Discuss any questions.

Why is individual assessment needed?

- To determine whether a victim is particularly vulnerable to secondary and repeat victimization, intimidation and retaliation during criminal proceedings.
- To determine whether a victim has specific protection needs based on the criteria listed in paragraph 2 of Article 22:
 - > the personal characteristics of the victim,
 - > the type or nature of the crime,

⁶⁹ The information presented in this step was retrieved from: Ministère français de la Justice (2015). *EVVI (Evaluation of Victims)*. Developed in co-operation with the French Victim Support and Mediation Institute (INAVEM), the French National School for the Judiciary (ENM), the Crown Prosecution Service (United Kingdom), the Polish Ministry of Justice (Poland), the 'Secretaria General de la Administracion de Justicia' (Spain), the 'Associação Portuguesa de Apoio à Vitima' (Portugal), and 'GIP-JCI - Justice Coopération Internationale' (France), under the EVVI (EValuation of VICTims) project (JUST/2013/JPEN/AG/4602). Retrieved from http://www.justice.gouv.fr/publication/evvi_guide_en.pdf [Last accessed: 24 April 2018]; and European Commission, DG Justice (2013), DG Justice Guidance document related to the transposition and implementation of Directive 2012/29/EU of the European Parliament and of the Council of 25 October 2012 establishing minimum standards on the rights, support and protection of victims of crime, and replacing Council Framework Decision 2001/220/ JHA, Ares (2013)3763804, Brussels, 19 December 2013, pp. 44-46. Retrieved from: <https://e-justice.europa.eu/fileDownload.do?id=05758a3a-9e2e-49a5-a7ec-3737c3ad6876> [last accessed: 14 May 2018].

- > the relationship between the victim and the offender, and
- > the circumstances of the crime.
- To determine if and what special protection measures should be applied, as listed in Articles 23 and 24 of the Victims' Directive.

Important notes:

- The Directive does not set any priority categories of victims. To this end, all victims are entitled to individual assessment. However, child victims, victims of violence in close relationships, sexual violence or exploitation, gender-based violence, human trafficking, terrorism, organized crime, hate crime, and victims with disabilities, should be assessed with particular care, as they typically have particular vulnerabilities.
- The individual assessment is personalized and adaptable, depending on the seriousness of the offence and/or the harms suffered by the victim.
- The individual assessment should be updated throughout the criminal proceedings and take into account any changes to the victims' situation or other circumstances that may affect the victims' safety.
- Child victims are always presumed to have specific protection needs and, therefore, the assessment of children focuses on determining which of the protection measures listed in Articles 23 and 24 need to be put in place for each child.

When should it be carried out?

The individual assessment should be conducted as soon as possible after the victim reports a crime.

However, if circumstances prevent it (e.g. the victim is injured or traumatized and is having difficulties concentrating and/or understanding the questions), all necessary arrangements should be made for the assessment to be performed as soon as the circumstances allow it.

Even in cases when the performance of the assessment is not feasible, any risks for the victim should be still addressed. In such cases, an option would be to contact a suitable person (e.g. relative, support worker) who may provide the necessary information.

Where should it be carried out?

The practitioner should ensure that the individual assessment takes place at a suitable location where the victim feels comfortable and safe (e.g. away from the location of the offence, or the offender).

Moreover, the practitioner should consider the specific needs of the victim in order to avoid secondary victimization and ensure the victim's privacy when sharing their needs. Especially in the case of child victims, the location where the individual assessment will be carried out is important for creating a suitable and safe environment for the child.

How should it be carried out?

A case-by-case approach should be followed in order to perform a personalized evaluation of the victims' needs.

The victim should be provided with clear explanations, informing them that the purpose

of the individual assessment is the identification and determination of special protection measures or specific protection needs.

“The victims’ concerns and fears in relation to proceedings should be a key factor in determining whether they need any particular measure”⁷⁰.

Factors such as the nature and severity of the offence, the degree of trauma suffered by the victim, the repeat violation of a victim’s physical, sexual, or psychological integrity, the gender, the age, maturity or intellectual capacity of the victim, the ethnicity, any linguistic issues, the relationship between the victim and the offender, etc., should be taken into account when conducting the individual assessment in order to provide a comprehensive evaluation/ understanding of each unique case.

Useful tips:

- ✓ The individual assessment should be ‘timely’.
- ✓ The individual assessment should be carried out in cooperation with the victim, and with respect to the victim’s wishes. It should always be kept in mind that some victims may feel that they will be put in danger if a decision to provide a protection measure is made without their consent.
- ✓ The individual assessment should be conducted in a separate, private room, to safeguard the victim’s privacy and avoid unexpected interruptions.
- ✓ Repeating the same questions should be avoided.
- ✓ Each protection measure that the victim might be entitled to and how it would protect them should be clearly explained to the victims.
- ✓ In all cases the victim should be encouraged to contact the authorities if there are any changes in their situation.
- ✓ The evaluator should consider the relevance of each question to the individual victim and the circumstances.
- ✓ It is highly recommended for all professionals involved in the individual assessment process to work together to complete the evaluation process.

Resources:

Directive 2012/29/EU of the European Parliament and of the Council of 25 October 2012 establishing minimum standards on the rights, support and protection of victims of crime, and replacing Council Framework Decision 2001/220/JHA, OJ L 315, 14.11.2012, p. 57–73. Retrieved from: <http://eur-lex.europa.eu/legal-content/en/TXT/?uri=CELEX:32012L0029> [Last accessed: 14 May 2018].

European Commission, DG Justice (2013), DG Justice Guidance document related to the transposition and implementation of Directive 2012/29/EU of the European Parliament and of the Council of 25 October 2012 establishing minimum standards on the rights, support and protection of victims of crime, and replacing Council Framework Decision 2001/220/JHA, Ares (2013)3763804, Brussels, 19 December 2013. Retrieved from: <https://e-justice.europa.eu/fileDownload.do?id=05758a3a-9e2e-49a5-a7ec-3737c3ad6876> [Last accessed: 14 May 2018].

⁷⁰ Recital 58 of the Directive 2012/29/EU of the European Parliament and of the Council of 25 October 2012 establishing minimum standards on the rights, support and protection of victims of crime, and replacing Council Framework Decision 2001/220/JHA, OJ L 315, 14.11.2012, p. 57–73. Retrieved from: <http://eur-lex.europa.eu/legal-content/en/TXT/?uri=CELEX:32012L0029> [Last accessed: 14 May 2018].

Ministère français de la Justice (2015). *EVVI (Evaluation of Victims)*. Developed in co-operation with the French Victim Support and Mediation Institute (INAVEM), the French National School for the Judiciary (ENM), the Crown Prosecution Service (United Kingdom), the Polish Ministry of Justice (Poland), the 'Secretaria General de la Administracion de Justicia' (Spain), the 'Associação Portuguesa de Apoio à Vitima' (Portugal), and 'GIP-JCI - Justice Coopération Internationale' (France), under the EVVI (EVALuation of VICTims) project (JUST/2013/JPEN/AG/4602). Retrieved from: http://www.justice.gouv.fr/publication/evvi_guide_en.pdf [Last accessed: 24 April 2018].

5.2. The EVVI Questionnaire

SUGGESTED DURATION

120-150 MINUTES

OBJECTIVES

- PRESENT THE EVVI INDIVIDUAL ASSESSMENT TOOL
- PROVIDE PARTICIPANTS WITH SOME BASIC TIPS ON HOW TO EFFECTIVELY PERFORM AN INDIVIDUAL ASSESSMENT OF THE VICTIMS' NEEDS
- PRACTICE THROUGH ROLE PLAYING AND CASE STUDIES THE EVVI QUESTIONNAIRE
- AS THIS SECTION REQUIRES PUTTING IN PRACTICE ALL THE SKILLS DISCUSSED IN PREVIOUS MODULES, THIS ACTIVITY IS A GOOD OPPORTUNITY TO ASSESS THE PARTICIPANTS' PROGRESS AND IDENTIFY ANY FURTHER TRAINING NEEDS

ADAPTATION

If there an official form or procedure is currently implemented by the local authorities for the assessment of victims' needs, the material for this section should be adapted accordingly. Alternatively, both forms/processes could be presented in a complementary/comparative manner (e.g. if the evvi provides additional information that might be useful in the process).

Outline

STEP 1 – The EVVI questionnaire⁷¹

- Briefly present the template of the EVVI questionnaire (available here in French, English, Spanish, Portuguese, and Polish: <http://www.justice.gouv.fr/aide-aux-victimes-10044/un-guide-pour-levaluation-des-victimes-28155.html>) and hand out the questionnaire to the participants.
- Describe the contents of the questionnaire and the implementation process. (An extensive description of each question is available in the manual of the EVVI questionnaire).
- Explain that it has been developed to assist practitioners in performing the assessment of victims' needs and that the questions are for guidance only, and thus should not be read out in questionnaire style to the victim. Instead its purpose is to work as a checklist, ensuring that the interviewer has evaluated all necessary information.

The questionnaire is divided in two parts:

I. The first part aims to collect information regarding the victim's personal characteristics, personal vulnerability, and risk and fear of harm. The purpose of

⁷¹ The information presented in this step was retrieved from: Ministère français de la Justice (2015). *EVVI (Evaluation of Victims)*. Developed in co-operation with the French Victim Support and Mediation Institute (INAVEM), the French National School for the Judiciary (ENM), the Crown Prosecution Service (United Kingdom), the Polish Ministry of Justice (Poland), the 'Secretaria General de la Administracion de Justicia' (Spain), the 'Associação Portuguesa de Apoio à Vitima' (Portugal), and 'GIP-JCI - Justice Coopération Internationale' (France), under the EVVI (EValuation of VICTIMS) project (JUST/2013/JPEN/AG/4602). Retrieved from: http://www.justice.gouv.fr/publication/evvi_guide_en.pdf [Last accessed: 24 April 2018].

collecting this information is to identify any specific protection needs or the need for a more detailed evaluation.

- II.** The second part includes a more detailed assessment based on the current situation of the victim, the offence history, and the suspect. The purpose of this part is to determine the level of risk for the victim and the extent of the special measures that the victim may be entitled during criminal proceedings. Special measures should be provided to victims at a greater risk of repeat or secondary victimization, intimidation, or retaliation.

Guidelines:

- The template questionnaire is for guidance only. Any information should be collected through a discussion with the victim, rather than through standard questioning.
- It is preferable to complete part one and part two of the questionnaire (when required) at the same time. However, where this is not possible, any delay should be kept to a minimum. Where a delay occurs, care should be given to put in place interim protection measures, as necessary before carrying out the detailed evaluation in the second part.
- The practitioner should explain to victim the purpose of the assessment and receive his/her informed consent for the assessment. This consent should be received for both parts of the questionnaire separately, especially in the case there are different evaluators for each part.
- The first part of the template questionnaire has identified eight types of specific offences (taken from the Victims' Directive, Article 22 §3) and three circumstances in which victims are more likely to have special protection needs. After completing this part of the questionnaire, it should be possible to identify any specific protection needs, as well as other relevant needs (e.g. communication or mobility issues and what support is already in place).
- The second part of the questionnaire should be used only if needed. Where the victim falls within any of the categories listed in the first part of the questionnaire, a more detailed assessment should be carried out using the second part of the questionnaire.
- Moreover, part two of the template questionnaire should be filled in:
 - > if the evaluator considers it appropriate, based on any identified vulnerability;
 - > if any of the questions relating to the type or nature of the crime(s) or to the circumstances of the crime(s) were answered positively.
- The number of positive answers does not necessarily correlate with the level of risk presented by the victim's particular vulnerability to secondary and repeat victimization, intimidation and retaliation. For example, a victim may still be at high risk even if he or she only answered "yes" to one question.
- The evaluator should also consider any additional information relating to the victim and the suspect.
- Asking for the victim's point of view on what support he or she requires during criminal proceedings will always be useful.
- At the end of the process, the victim dates and signs the assessment.
- After the completion of the questionnaire, the evaluator should have collected all the necessary information in to order to address the victim's protection needs, and identify which measures are appropriate and any support referral needs (i.e. to counselling, legal services, victim support service, community services).

STEP 2 – Role play exercise

- Inform the participants that role play exercises using the EVVI questionnaire will take place.
- Hand out the flash cards (see Annex 2) with probes and suggested wording for each question and explain how they work.
- Explain that there are only suggestive, to serve as aids in case they encounter any difficulties, and it is not necessary to be used verbatim.
- Stress the fact that the flash cards are only study aids. Participants should try to acquire all the information for EVVI through a conversational manner, and not ask every question on the flash cards in a sequential manner. But if they encounter any difficulties they can always take a quick look in the cards for help e.g. if they have difficulties phrasing a specific question.
- Encourage participants to use their own words, based on the skills developed throughout the seminar and to develop their own personal style.
- Ask 2 participants to volunteer to step in the center of the room and perform the role play exercise, using the flash cards if and whenever they need.
- Hand out the scenarios with the case studies. (Alternatively, any other case studies which might be more representative of the national situation or real case examples can be used).
- Give some time to the volunteers who will play the victims to read and understand the scenarios.
- Discuss the exercise with the whole group and provide feedback:
 - > what was difficult?
 - > what was easy?
 - > how did the speaker feel during the process?
 - > how did the listener feel during the process?
 - > what did the observers note in terms of the basic principles of interacting with victims: neutrality, respect, body language, empathy, etc.?
 - > did they manage to receive all the necessary information?
- Thank the participants.
- If there is enough time, repeat the exercise with the other case study.

Case study 1 – Anna⁷²

Anna is an unmarried, pregnant mother of 6 minor children. She lives with Emmanuel and her children in a Roma settlement. They live under inadequate conditions, without sufficient means for covering basic needs, and they are sustained through social assistance.

By using force and threats, Emmanuel forces Anna and their 14-year-old daughter to beg. When they do not bring enough money they get beaten, slapped, hit on the head and body. He takes the money and spends it for gambling. They are being forced to beg six days a week.

They did not report the crime because they are afraid of him, as they are constantly

⁷² Retrieved and adapted from United Nations Office on Drugs and Crime, Human Trafficking Knowledge Portal, Case Law Database, UNODC No.: SRB041. Retrieved from: https://www.unodc.org/cld/case-law-doc/traffickingpersonscrimetype/srb/2014/k_12813.html?lng=en&tmpl=htms [Last Accessed: 12 March 2018].

beaten. They are afraid and very concerned about what would happen when he would get out of jail. When she previously reported him, he had beaten her to change her statement, which she eventually did, and he was subsequently released.

The police are called by the hospital, when Anna arrives with severe bruising and gravely hurt, in danger of having a miscarriage. Afraid of hers and her children safety she, very reluctantly, agrees to report the crime.

During the interview, she often cries, can hardly speak, seems very afraid, and repeatedly asks for reassurances that he will not be able to hurt her again.

Case study 2 – Aisha

Aisha is 14 years old and lives with her uncle and his family in a small village. Her parents are working abroad and decided to let her stay with her uncle to avoid changing schools. Both her parents' and her uncle's families are low income and facing a lot of hardships. Aisha attends a school for children with special needs, as she has impaired communicational skills and kinetic difficulties since childhood and has been having trouble speaking and moving freely.

Her uncle, Mat, is 47 years old. He has been married to his wife for 25 years and they have 4 children. He seems to be very authoritarian over his family. His children have a very strict daily program, as they help in housework and are often not allowed to attend any social activities. Aisha's aunt is a very quiet and secretive person, with a very limited social network.

The director of the school calls the police when teachers observe that Aisha has behavioral regression, for example she has stopped talking as much and performing tasks that she was previously able to. Also, she recently reported pain in the lower abdomen and waist. Some neighbors reported that they often see Mat leaving the house with Aisha, and sometimes they see unknown cars outside the house.

STEP 3 – Role play exercise

- If there is enough time, repeat the above exercise in small groups.
- Ask the participants to split in groups of 3 (or 4) people.
- Ask them to decide who will be interviewer, who will be the victim, and who will be the observer.
- The observer takes notes on the usage of the various skills.
- The trainers make rounds to observe the process.
- After the speaker finishes his/her story, each group discusses the feedback (how the speaker felt, how the listener felt, what the observer noticed) for a few minutes.
- Regroup the participants and discuss the exercise with the whole group and provide feedback:
 - > what was difficult?
 - > what was easy?
 - > how did the speaker feel during the process?
 - > how did the listener feel during the process?
 - > what did the observers note in terms of the basic principles of interacting with victims: neutrality, respect, body language, empathy, etc.?
- Focus on what was difficult or frustrating: frustration can be a sign of difficulties in

handling something.

- Thank the participants.
- If there is enough time, repeat the exercise with the other case study.

Case study 3 – John

John is 30 years old and lives together with his 31-year-old boyfriend George. They have been in an intimate relationship for about 4 years. Both their families are aware of their sexual identity and support their decision to live together. They both work in a big multinational company, in different departments. They have been hiding their relationship at work, because the company has a rather strict policy against relations between co-workers.

Even though their relationship has been loving so far, George started expressing some jealousy after a work party, which was held 2 weeks ago. He believes that John was spending too much time with other male coworkers, while completely neglecting him. For the past two weeks, their relationship has become more distant. They fight very often, and one night John tells George that he wants to end their relationship. They get into a fight, and George forces John to sexual intercourse.

The neighbors call the police. When the police arrive, George is the one doing all the talking and John remains silent. George assures the officers that nothing happened, and they leave. A few days later John visits the emergency room with intense pain and visible signs of abuse. The doctors call the police. John eventually admits the abuse but refuses to file a complaint because George has threatened to expose his sexual orientation at work.

Case study 4 – Margaret

Margaret is a 70-year-old lady at the early stages of dementia. She lives alone at her apartment, but a caregiver visits her every day. Her husband died about five years ago after a stroke. She has two children, a 40-year-old daughter and a 37-year-old son. Her son, John, lives in Australia where he got married and has two children. Her daughter, Maria, got married a year after she finished school and has three children.

Maria got recently divorced after she decided to end a violent marriage. She is looking for a place to stay with the two of her children, 17-year-old Clare and 15-year-old Andrew. Her older son, Tom, who is 20 years old, is studying at a university in another town.

Margaret tells Maria that she and her children are more than welcome to live with her until Maria finds a good apartment to rent. Margaret thinks that this will also give her the chance to spend more time with her daughter and grandchildren. Maria decides to move into her mother's house. Since she works part time at a shop, she suggests to her mother to reduce the caregiver's visits to two days per week just to bring her medications and help her with grocery shopping.

However, the situation at home becomes worse as Maria and her children are often fighting for any given reason. Sometimes Margaret is trying to mediate to resolve the

conflicts, but the other family members do not seem to pay any attention to her. After 3 months Margaret has a mild stroke which aggravated her dementia. Maria decided to quit her job to take care of her mother.

Margaret is transferred to the Emergency room after she reportedly fell from the stairs. The doctors call the police when they observe injuries that are not consistent with the fall, as well as signs of physical abuse in non-visible parts of the body. Maria does not provide adequate explanations about the status of her mother. The children behave aggressively and blame Maria for the condition of their grandmother.

Resources:

Directive 2012/29/EU of the European Parliament and of the Council of 25 October 2012 establishing minimum standards on the rights, support and protection of victims of crime, and replacing Council Framework Decision 2001/220/JHA, OJ L 315, 14.11.2012, p. 57–73. Retrieved from: <http://eur-lex.europa.eu/legal-content/en/TXT/?uri=CELEX:32012L0029> [Last accessed: 14 May 2018].

Ministère français de la Justice (2015). *EVVI (Evaluation of Victims)*. Developed in co-operation with the French Victim Support and Mediation Institute (INAVEM), the French National School for the Judiciary (ENM), the Crown Prosecution Service (United Kingdom), the Polish Ministry of Justice (Poland), the 'Secretaria General de la Administracion de Justicia' (Spain), the 'Associação Portuguesa de Apoio à Vitima' (Portugal), and 'GIP-JCI - Justice Coopération Internationale' (France), under the EVVI (EValuation of VICTims) project (JUST/2013/JPEN/AG/4602). Retrieved from: http://www.justice.gouv.fr/publication/evvi_guide_en.pdf [Last accessed: 24 April 2018].

United Nations Office on Drugs and Crime, Human Trafficking Knowledge Portal, Case Law Database, UNODC No.: SRB041. Retrieved from: https://www.unodc.org/cld/case-law-doc/traffickingpersonscrimetype/srb/2014/k_12813.html?lng=en&tmpl=htms [Last Accessed: 12 March 2018]

Module 6

Signposting and Referral Pathways

6.1. Signposting and Available Support Services

SUGGESTED DURATION

30-40 MINUTES

OBJECTIVES

- SENSITIZE PARTICIPANTS ON THE IMPORTANCE OF SIGNPOSTING
- PRESENT THE AVAILABLE SERVICES AND PROVIDE THEM WITH THE NECESSARY INFORMATION
- ENHANCE THE PARTICIPANTS' CAPACITIES FOR EFFECTIVE SIGNPOSTING AND REFERRAL PATHWAY DEVELOPMENT

Outline

STEP 1 – Available support services

- Inform the participants on the available victim support services in the country/ region, including contact information, types of services provided (e.g. shelter, legal or psychological counselling etc.), referral procedures etc.
- Consider handing out any additional material, such as flyers, cards, and brochures which might be useful. The aim is for the participants to acquire an overview of the available support services and ready to use information to effectively signpost or refer victims according to their needs.

Notes for trainers:

- As part of the PROTASIS project, the partners from Greece, Italy and Portugal performed during February - May 2017 an extensive cataloguing of available general and specialist victims support services in their respective countries. The comprehensive lists, in English and in national languages, can be found in the following link: <https://protasis-project.eu/victim-support-services/>.

STEP 2 – Signposting

- Participants should have acquired a comprehensive understanding of the importance of signposting by now. Therefore, hand out the Practitioners' Checklist for Victim Referral (see Annex 3) and briefly restate the importance of signposting, while providing a few practical tips, such as the ones below, and introducing the next session where representatives of support organizations will provide more expert advice.

Useful tips⁷³

✓ Involve the victim in the process.	× Don't just pass on the information.
✓ Be creative on finding some time and the right time.	× Don't hurry the discussion or bring up signposting at an inappropriate moment.
✓ Discuss and explain the available options.	× Don't just list a number of services.
✓ Offer cards, flyers, or telephone numbers.	× Don't insist on passing information in writing, it might prove to be unsafe if the perpetrator finds the information.
✓ Make sure no one is listening or watching.	× Don't pass information in front of the alleged perpetrator, children, other family members or friends.
✓ Give the information directly to the victim.	× Don't use third parties, or family as translators to pass the information.

Resources:

Bewley, S. & Welch, J. (Eds). (2014). *ABC of Domestic and Sexual violence*. London, UK: BJM Books.

⁷³ Retrieved and adapted from Bewley, S. & Welch, J. (Eds). (2014). *ABC of Domestic and Sexual violence*. London, UK: BJM Books.

6.2. Networking

SUGGESTED DURATION

60-90 MINUTES

OBJECTIVES

- CAPACITY BUILDING ON SIGNPOSTING AND REFERRAL SKILLS FOR ADULT AND CHILD VICTIMS WITH SPECIAL NEEDS
- NETWORKING AND COOPERATION DEVELOPMENT
- REFERRAL PATHWAYS' DEVELOPMENT

Outline

STEP 1 – Presentations

- Invite representatives of victim support organizations specializing in services for adult and child victims with special needs.
- For more interactive learning, consider inviting representatives working as practitioners who have daily contact with victims and share their experience
- Consider inviting representatives from organizations that provide general support services to victims as well as organizations offering specialized support. When choosing organizations offering specialized support services, the most prevalent victimization types in the country, as well as the groups of victims (e.g. trafficking, domestic violence, sexual violence or any other pertinent issue) that the specific participants most often encounter in their daily practice, should be taken into consideration.
- Presentations should include information regarding the services provided by each organization, as well as information on how a cooperative relationship could be developed between the organization and the police, promoting coordination of action and opening communication lines.

STEP 2 – Discussion

- Open the floor to participants for discussion with the invited speakers.
- Encourage networking and the exploration of potential avenues for cooperation.

Annex 1

Evaluation and Impact Assessment - Executive Summary

Protasis Evaluation and Impact Assessment

Maija Linnala, Simon Aulton, Theo Gavrielides

The IARS International Institute

Executive Summary

This report is produced as part of ‘Protasis: Police Training Skills’ (Grant Agreement JUST/2015/RDAP/AG/VICT/9318), which is a two-year EU funded project launched in December 2016. The project seeks to support better implementation of the EU Victims’ Directive 2012/29/EU establishing minimum standards on the rights, support and protection of victims of crime. As an independent partner excluded from the delivery and design of the material and training, IARS has undertaken the evaluation and impact assessment of the training programme. This report is an output of the capacity building and training, which took place in Greece, Italy and Portugal.

Below is a summary of the key findings:

- ✓ Participants were very satisfied with the elements of the training, including the extent they could actively participate, the support given throughout, and the facilitators.
- ✓ Participants were very satisfied with the structure and content of the training, including victim-sensitive and gender-oriented aspects.
- ✓ Participants were very satisfied with the interactive tools, activities and exercises, including discussions and sharing examples, and exchanging practical knowledge.
- ✓ All the components of the training programme were between satisfactory and very satisfactory.
- ✓ Both of the skills-oriented seminars were rated as very satisfactory, and the skills-oriented workshop was rated as the most useful seminar.
- ✓ Trainers agreed that the Victim’s Services catalogue provided the participants with a better understanding of services available to victims of crime, and trainers also observed an attitude change in participants during the training.
- ✓ The overall increase in confidence levels regarding scenarios may demonstrate that the training has had a positive impact on participants’ readiness to tackle similar cases, and to ensure the level of victim support and the respect of victims’ rights and their access to justice.
- ✓ 81 per cent of the participants believed that the training programme could raise awareness regarding the challenges and good practices for an effective and sustainable implementation of the EU policy framework on supporting victims of crime and the role of the police.
- ✓ Participants agreed that the training has had a positive impact on them, and they strongly agreed that the training has enabled them to enhance victim’s rights, and the skills taught in the training have enhanced their capacity as officers.

- ✓ Participants would almost certainly share and disseminate training material, new knowledge and skills with colleagues.

Below is a summary of the key recommendations:

- ✓ The target group should be more defined, i.e. the frequency of interaction with victims.
- ✓ The extent the training is tailored to participants' specific needs should be improved by increasing the duration of the training and adjusting the training elements, or by targeting the training to a more specific group of officers.
- ✓ The information about the implementation of the victim's directive should be improved by specifying the target group or by providing a more in depth and detailed seminar.
- ✓ The training contents, including the training responding to reality and its flexibility, should be reviewed.
- ✓ A more varied use of visual aids, including videos, presentations, illustrations and charts and graphs, should be utilised.
- ✓ More in depth information and training time should be devoted for the skills-oriented seminars.
- ✓ The 2-day work visit should be recommended as part of the future training in order to ensure the exchange of good practices on a European level.
- ✓ Trainers should be provided with more time to deliver the training programme.
- ✓ The scenario options should reflect the jurisdiction of each country the training is taking place in.
- ✓ All the abovementioned recommendations suggest that the future training programme should undergo a training needs assessment.

Annex 2

PROTASIS Flashcards

 <p>Co-funded by the Rights, Equality and Citizenship Programme of the European Union</p> <p>– Questions</p> <p>PROTASIS Flash Cards</p>  <p>• Instructions</p>	<p>Preparation stage #1</p> <ul style="list-style-type: none"> • Setting and seating arrangement • Privacy & minimum external interferences • Avoid intimidating personal appearance: e.g. full equipment • Necessary documents and stationery • Other useful items, e.g. water, tissues
<p>Before you start, keep in mind... #2</p> <ul style="list-style-type: none"> • Language: as precise as possible, plain, in terms they can understand • Facial expressions: expressive face, reacting appropriately to what the victim says, avoiding intense expressions, smiling for reassurance, and understanding 	<p>Before you start, keep in mind... #3</p> <ul style="list-style-type: none"> • Body language: natural, relaxed but attentive posture – be aware of individual and cultural differences • Note taking to a minimum • Active observation of the victim’s verbal and nonverbal behavior • Empathy, neutrality, objectivity, rapport
<p>Introductions #4</p> <p>– Good morning [...], my name is [...]. I am police officer working at the [...] Police Department <i>(offer to shake hands)</i></p>	<p>Opening #5</p> <p>– I would like to talk with you about [...] <i>(purpose of the meeting)</i></p> <p>– Do you have some time to talk now? / Would this be a convenient time? / Would that be all right?</p> <p>– The purpose of our meeting today is to talk about [...]</p>

<p>Setting and Seating #6</p> <ul style="list-style-type: none"> – Would you like to have a sit here? <i>(indicate sitting arrangement)</i> – Is it alright if we sit over here? <i>(for other settings that the office, e.g. their house)</i> 	<p>Note taking #7</p> <ul style="list-style-type: none"> – Do you mind if I take some notes while we talk? / I would like to take a few notes, if that is alright with you. – I just want to make sure I remember everything correctly.
<p>Consent & Procedural issues #8</p> <ul style="list-style-type: none"> • If applicable explain: <ul style="list-style-type: none"> ○ the process of the individual assessment ○ any confidentiality issues ○ and make sure you have their consent 	<p>General Information #9</p> <ul style="list-style-type: none"> – Firstly, if that is alright with you, I would like to write down some basic information about you. – Could you please tell me your full name? – When and where were you born? – Which is your nationality?
<p>General Information #10</p> <ul style="list-style-type: none"> – A phone number we could reach you? – Where are you currently living? – Is there someone you would like to note as a contact person? A friend, family member or a lawyer maybe? 	<p>General Information #11</p> <ul style="list-style-type: none"> – What is your current employment status? <ul style="list-style-type: none"> <input type="checkbox"/> Employed <input type="checkbox"/> Unemployed <input type="checkbox"/> Retired <input type="checkbox"/> Student – Do you go to school? /What grade are you? <i>(for children)</i>

<p>General Information #12</p> <ul style="list-style-type: none"> – Thank you very much, I think I have everything. – Is there maybe something else you would like to add? 	<p>Free narrative of events #13</p> <ul style="list-style-type: none"> – Perhaps you have already described what happened when you reported that incident, but it would really help if I hear from you what happened. – What I would like is to hear from you what happened. – In your own words, could you please tell me what happened?
<p>Vulnerability-Risks & fear of harm #14</p> <ul style="list-style-type: none"> • During the free narrative of events listen carefully for any indications of personal vulnerabilities and risks and fear of harm. • Take note of cues to follow up with specific questions to clarify or verify information 	<p>Vulnerability-Risks & fear of harm #15</p> <ul style="list-style-type: none"> • Pose (some of) the following questions as appropriate • In any order that seems more suitable, not necessarily successively. • In conversational manner.
<p>Previous victimization #16</p> <ul style="list-style-type: none"> – Have you ever experienced anything similar before? – Have you ever experienced any act by another person, which caused or could have cause you any harm? – When did this happened? / Has anything like this happened during the last 24 months? 	<p>Children #17</p> <ul style="list-style-type: none"> – You mentioned your daughter/son. Do you have more children? – Do they live with you? – How old are they?

<p>Support services #18</p> <ul style="list-style-type: none"> – You mentioned... (<i>victim's reference to support services</i>). Is there a specific social worker who supports you? – Do you receive some kind of support? 	<p>Support services #19</p> <ul style="list-style-type: none"> – Are you worried about having enough money for covering basic needs? – Has your family ever received Welfare or other forms of assistance?
<p>Other vulnerabilities #20</p> <ul style="list-style-type: none"> – Is there someone in the family with history of serious illness? Physical or mental? – Have you ever had any health problems? Any other difficulties? 	<p>Alcohol or drugs #21</p> <ul style="list-style-type: none"> – Have you ever had an alcohol or drug problem? – Have your friends or relatives ever complaint that you drink too much? – Have your friends or relatives ever complaint about your use of drugs?
<p>Mother tongue #22</p> <ul style="list-style-type: none"> – You mentioned that your family is from... Where you also raised there? – Is ... your mother tongue? – Which is your nationality and/or ethnicity? 	<p>Circumstances of the crime #23</p> <ul style="list-style-type: none"> – You mentioned that you have seen him/her before. Could you elaborate a bit more on that? – Have you seen him/her before? (<i>Ask follow up questions to determine any personal connection with the suspect</i>)

<p>Circumstances of the crime #24</p> <ul style="list-style-type: none"> – How do you think [he/she] will react with the progress of the case? – Do you think that [he/she] will try to further cause you any harm? – 	<p>Circumstances of the crime #25</p> <ul style="list-style-type: none"> – If I understood correctly, and please correct me if I am wrong, this was not the first time, right? – Has [he/she] ever tried to hurt you before? /How many times has it happened before?
<p>Vulnerability #26</p> <ul style="list-style-type: none"> • Before concluding the assessment note: <ul style="list-style-type: none"> ▪ Difficulty speaking <ul style="list-style-type: none"> <input type="checkbox"/> Yes <input type="checkbox"/> No ▪ Other communication difficulties 	<p>Type and nature of crime #27</p> <ul style="list-style-type: none"> • Note the type and nature of crime: <ul style="list-style-type: none"> <input type="checkbox"/> Human trafficking <input type="checkbox"/> Hate crime <input type="checkbox"/> Organized crime <input type="checkbox"/> Violence in close relationship <input type="checkbox"/> Gender based violence <input type="checkbox"/> Sexual violence <input type="checkbox"/> Child abuse of exploitation <input type="checkbox"/> Terrorism
<p>Vulnerability #28</p> <ul style="list-style-type: none"> • Ask the victim to have a look at the form to verify the information and assess for difficulties in reading at the same time. 	<p>End of Part I #29</p> <ul style="list-style-type: none"> • Assess the information. • If there is no need to proceed with the next part finish the conversation with the closing flash cards #63 - #71 • Ask the victim to read and sign the form.

<p>Start Part II #30</p> <ul style="list-style-type: none"> • Explain to the victim that you will now discuss for more details of his/her situation/event • Avoid repeating the same questions, if needed use follow up questions to clarify or verify. 	<p>Start Part II #31</p> <ul style="list-style-type: none"> • Pose (some of) the following questions as appropriate • In any order that seems more suitable, not necessarily successively. • In conversational manner.
<p>Opening Part II #32</p> <p>– Now I would like to discuss with you some more details about what happened and / and your current situation.</p>	<p>Opening Part II #33</p> <p>– It will really help to better understand what happened / What kind of protection needs and support might be useful for you.</p> <p>– Will that be ok with you?</p>
<p>Q1 – Injuries #34</p> <p>– Earlier you mentioned that [he/she] hurt you. What kind of injuries did you suffer?</p> <p>– Has this ever happened before? [if yes] How many times?</p>	<p>Q2 – Fear #35</p> <p>– I can only imagine how difficult all these must have been for you. How are you feeling? (<i>allow for spontaneous expression of fear</i>)</p> <p>– It is common for some people to feel frightened after this kind of events. How do you feel?</p>



<p>Q3 – Support System #36</p> <ul style="list-style-type: none"> – Is there someone you can contact if you need anything? – Do you have any friends or relatives who can support you? – How about any community members? 	<p>Q4 – Isolation #37</p> <ul style="list-style-type: none"> – Is there someone you can contact in case you need something? – From what you told me, it appears that there are not many people in your life you can trust to help you? Is that right?
<p>Q5 – Depression #38</p> <ul style="list-style-type: none"> – Would you say that you have lost interest in most things? – That you are not able to enjoy things you used to like? – That you feel down or depressed? 	<p>Q5 – Suicidal Ideation #39</p> <ul style="list-style-type: none"> – Did you ever think that you would be better off dead? Have you ever wished you were dead? – Did you ever want to harm yourself? Injure yourself? – Have you ever thought about suicide?
<p>Q6 – Contact with suspect #40</p> <ul style="list-style-type: none"> – How often do you speak with [him/her]? – When was the last time [he/she] tried to contact you? / Has [he/she] tried to contact you? – Have you been in touch since the incident? 	<p>Q7 – Intimidation #41</p> <ul style="list-style-type: none"> – How is [his/her] behavior towards you now? – Have you felt scared when you are with him? – Has [he/she] tried to intimidate/ threaten you in any way? – What did [he/she] do?

<p>Q8 – Living with suspect #42</p> <ul style="list-style-type: none"> – You mentioned earlier that you live... Who do you live with? /Do you live alone? /Does [he/she] live in the same house with you? – Does [he/she] come by often? – Does [he/she] stay over often? 	<p>Q9 – Financial issues #43</p> <ul style="list-style-type: none"> – Do you have common finances? – Any conflict over financial issues? – For example, do you have any common debts? – Are you both owners of the same property? Share any business or property?
<p>Q10 – Conflict over children #44</p> <ul style="list-style-type: none"> – Do you ever have any differences / fight about your children? – Do you have any conflicts about your children? – Has [he/she] ever forbid you to see the children? 	<p>Q11 – Violence against others/pets #45</p> <ul style="list-style-type: none"> – Sometimes when people disagree / when we get angry things become heated. Has this ever happened? – Has [he/she] ever been aggressive /violent to someone else? Or harmed a pet maybe? – How is [his/her] behavior with the children?
<p>Q12 – Access to documents/money #46</p> <ul style="list-style-type: none"> – Who is usually in charge of the household money and any other important business? – Do you have access to your personal documents? How about your money? Who else might has access? 	<p>Q13 – Freedom to move #47</p> <ul style="list-style-type: none"> – How is your daily routine at home? Do you ever feel pressured or confined? – For example, are you able to move around or leave the house whenever you want? – How does [he/she] reacts when you leave the house?

<p>Q14 – Previous threats/violence #48</p> <ul style="list-style-type: none"> – Has this ever happened before? – How many times has this happened before? – Has [he/she] ever said that/ tried to hurt you? 	<p>Q15 – Use of weapon #49</p> <ul style="list-style-type: none"> – You mentioned earlier that you were injured. How did it happen? – Has [he/she] ever used an object to hurt you? A weapon maybe? – Does [he/she] own any kind of weapon?
<p>Q16 – Previous complaint #50</p> <ul style="list-style-type: none"> – Have you ever contacted the police about something similar before? – Have you filled any complaints against [him/her] before? – How the case evolved? 	<p>Q17 – Escalation #51</p> <ul style="list-style-type: none"> – You mentioned earlier that things used to be better between you. How/ when did this change? – Was there any recent change in the intensity of the incidents? – Has it always been like this? – How long ago all these started? – Has the frequency of the incidents increased lately?
<p>Q18 – Others at risk #52</p> <ul style="list-style-type: none"> – Are you perhaps afraid that [he/she] might harm someone else? – Do you think [he/she] could hurt someone else? – Has [he/she] ever threaten to hurt someone else? 	<p>Q19 – Threats by others #53</p> <ul style="list-style-type: none"> – Has anyone else tried to threaten you in any way? – Has anyone else perhaps make you feel afraid or at risk?

<p>Q20 – Identifiable suspect #54</p> <ul style="list-style-type: none"> – Have you seen [him/her] before? – Was this the first time you saw [him/her]? – How many times have you seen [him/her] before? – Do you think you will be able to recognize [him/her]? 	<p>Q21 – Child suspect #55</p> <ul style="list-style-type: none"> – Could you tell how old [he/she] was? – Do you know [his/her] age?
<p>Q22 – Access to weapons #56</p> <ul style="list-style-type: none"> – Do you have any weapons at home? – Is it possible that [he/she] might get access to a weapon somehow? 	<p>Q23 – Previous offence #57</p> <ul style="list-style-type: none"> – Has anything similar happened before? – Has [he/she] ever been convicted for an offence against you?
<p>Q24 – Outstanding court orders #58</p> <ul style="list-style-type: none"> – Has [he/she] ever had any trouble with the law or the police before? – Do you know if there are any outstanding orders against [him/her]? 	<p>Q25 – Serious offence #59</p> <ul style="list-style-type: none"> – Has [he/she] ever been arrested? – How about any previous convictions? – What was it about?

<p>Q26 – Drugs/alcohol #60</p> <ul style="list-style-type: none"> – Have you ever complained to [him/her] about his drinking habits? – Does [he/she] ever drink too much? – Has [he/she] ever used any drugs? 	<p>Q27 – Mental health #61</p> <ul style="list-style-type: none"> – Does [he/she] have a history of serious illness? Physical or mental? – Has [he/she] ever visited a mental health professional? – Was [he/she] ever hospitalized due to this? – Has [he/she] ever been given any medication about a mental health issue?
<p>Q28 – Suicide #62</p> <ul style="list-style-type: none"> – Has [he/she] ever mention any intent to harm himself? That [he/she] wished he was dead? – Has [he/she] ever tried to harm himself in any way? 	<p>Summary & Additional information #63</p> <ul style="list-style-type: none"> – To sum what we have been discussing... – Does that sum it up? / Is that right? – Looking back at what we've been talking about, what else might be added? / Anything we might have missed? / Are there any important facts that we haven't covered?
<p>Need for support #64</p> <ul style="list-style-type: none"> – Just a final and important question. Is there any kind of support that you would like to receive during the criminal proceedings? <i>(provide and explain the available options and involve them in the process)</i> 	<p>Next steps – future arrangements #65</p> <ul style="list-style-type: none"> – What is going to happen next, is it that... – If anything comes up, you can always reach [me/us] in this number if you have any questions, or if anything changes. How does that sound?

Signposting #66	Their questions #67
<p>– In the meantime, these is the contact information of some services, that you might find useful. For example, you can contact them if you need any help, or if you would just like to talk to someone.</p>	<p>– Before we wrap up, is there anything at all you would like to ask me?</p> <p>– Do you perhaps have any other questions, or details you would like to discuss before we go?</p>
End of Part II #6	Thanks & positive note #70
<ul style="list-style-type: none"> • Assess the information • Identify any specific protection needs and other needs for support • Ask the victim to read and sign the form. • Use this opportunity to assess for any difficulties in reading. 	<p>– Thank you for having this conversation with me you really helped me understand what happened. I can only imagine how difficult this must have been for you, we will do our best to help any way we can.</p>
Victim's last word II #71	<div data-bbox="831 1349 987 1453" style="text-align: center;">  </div> <div data-bbox="991 1374 1230 1434" style="text-align: center;"> <p>Co-funded by the Rights, Equality and Citizenship Programme of the European Union</p> </div> <div data-bbox="911 1561 1385 1608" style="text-align: center;"> <h2 style="color: #00A68F;">PROTASIS Flash Cards</h2> </div> <div data-bbox="1198 1725 1437 1804" style="text-align: right;">  <p>PROTASIS Police Training Skills</p> </div>
<ul style="list-style-type: none"> • Make sure that you allow the victim the sense that they have the last word of the conversation <i>(Offer to shake hands)</i> 	

Annex 3

Practitioners' Checklist for Victim Referral

Practitioners' Checklist for Victim Referral

CHECK LIST	Suggested referrals
<p>Safety</p> <ul style="list-style-type: none"> <input type="checkbox"/> Does the victim live/stay in a safe place? <input type="checkbox"/> Is there a need for shelter or day-center? <input type="checkbox"/> Are there other family members who may face safety issues? 	<p>Shelters or day-centers</p>
<p>Medical care</p> <ul style="list-style-type: none"> <input type="checkbox"/> Does the victim need medical care? <input type="checkbox"/> Does the victim need long-term medical rehabilitation? 	<p>Hospitals, doctors</p>
<p>Emotional/Psychological support, Counselling</p> <ul style="list-style-type: none"> <input type="checkbox"/> Does the victim need psychological support or counseling? <input type="checkbox"/> Has the victim requested information on psychosocial support services? 	<p>Psychologists, Social workers, relevant NGOs</p>
<p>Legal Aid</p> <ul style="list-style-type: none"> <input type="checkbox"/> Does the victim need legal aid? <input type="checkbox"/> Is the victim represented by a lawyer? <input type="checkbox"/> Has the victim requested information regarding legal aid? <input type="checkbox"/> Has the victim requested compensation? 	<p>Lawyers, relevant NGOs</p>
<p>Communication needs</p> <ul style="list-style-type: none"> <input type="checkbox"/> Does the victim speak the national language? <input type="checkbox"/> Is the victim a foreigner and in need of a translator/ interpreter? <input type="checkbox"/> Does the victim face any communication difficulties? E.g. reading, hearing, speaking. 	<p>Translators, Sign language practitioners</p>
<p>Foreign victims</p> <ul style="list-style-type: none"> <input type="checkbox"/> Does the victim face any travel/visa/residency issues? <input type="checkbox"/> Does the victim speak the national language? 	<p>Embassies, translators</p>
<p>Financial aid</p> <ul style="list-style-type: none"> <input type="checkbox"/> Does the victim need financial aid? 	<p>Social welfare, NGOs</p>
<p>Other information</p> <ul style="list-style-type: none"> <input type="checkbox"/> Has the victim requested general information on support services for his/her case? 	<p>NGOs, Public agencies</p>

