Interagency Cooperation – Building capacity to manage domestic abuse (IMPRODOVA Project)

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Abstract

The cooperation of agencies as first responders to domestic abuse has attracted increased interests among researchers. Recent international guidelines, particularly the Istanbul Convention, prescribe such networking between law enforcement, local support agencies, social services, health care and other relevant professionals as a precondition for improved response towards crimes committed in families and intimate relationships. The article describes the urgency to combat domestic abuse by means of interagency cooperation, and continues with a description of the Istanbul Convention, and explains the basic dimensions of such cooperation, e.g., concerning referrals between responder agencies. The article concludes with a brief overview of present research activities in the field by a project carried out by 16 partners. The project 'IMPRODOVA' runs from 2018 to 2021 and is funded by the European Union Horizon 2020 programme.

Keywords: Domestic abuse, high impact domestic violence, Istanbul Convention, cooperation, IMPRODOVA project



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The necessity to fight domestic abuse

Within the last three decades, society and policing have become aware to the severe consequences of domestic abuse. Now, the impact on victim-survivors, family and community members has been recognised as a serious criminological problem. In some countries, domestic abuse even constitutes an individual criminal offence, for example in Portugal, Scotland, and Slovenia. Meanwhile, various national crime statistics refer to crimes committed in a family or a context of otherwise close relationship.

In Europe, one key factor for this change is the integration and implementation of the Istanbul Convention in 2011. The Istanbul Convention defines domestic violence² as "a violation of human rights…, a form of discrimination against women…, physical, sexual, psychological or economic harm or suffering to women…" (Council of Europe, 2011, Article 1 Sec. 3). The aim of the Convention is to provide protection and assistance to victim-survivors and to strengthen international cooperation. Likewise, the aim to actively fight domestic abuse has been emphasised by the United Nations Office on Drugs and Crime, which made statistical data on fatal incidents of abuse (year 2017; UNODC 2019a) available.

Altogether, 464,000 persons were intentionally killed worldwide, among them 89,000 because of organised crimes (19 percent) (UNODC, 2019b). The approximately 78,000 persons, who died of intentional homicide within a domestic context, were mainly females. When family members were perpetrators, 64 percent of victim-survivors were women. When intimate partners were perpetrators, 82 percent of victim-survivors were women. These findings underline the threat that girls and women are exposed to in specific family settings (UNODC, 2019a). The data indicate that the highest risk to be killed within a family context applies to women in Africa (19,000); yet in Europe, on average, daily more than eight women are killed by (ex-)partners or family members (UNODC, 2019b). Accordingly, experts consider domestic abuse as having features of an "epidemic" (e.g., Hegarty, 2011). Significant research has addressed the adverse effects of domestic abuse on victim-survivors (e.g., Ferrari et al. 2016, Sternberg et al., 1993), the psychology of the perpetrator (e.g., Kernsmith, 2005), the role of the police and the justice system (e.g., Burman & Brooks-Hay, 2018; Sun, 2007) as well as social work (e.g., Danis, 2003).

Consequently, it became clear that a cooperative response by various frontline responders is necessary to better contain or manage domestic abuse (e.g., Chatzifotiou, Fotou & Moisides, 2014; Webb & Scheicher, 2015). Below, I will outline what is considered as best



Although the term, "domestic violence" is used in the Istanbul Convention (Council of Europe, 2011) and the text focusses at some points on high impact domestic violence with potentially lethal outcomes, the term "domestic abuse" is preferably used in the text as it includes all forms of domestic abuse (stalking, coercive control, etc.) n line with the definition by Walby and colleagues (2017).

practice regarding interagency co-operation by the Istanbul Convention, what mechanisms contribute to the success of such cooperation, and how the European Union funded research project IMPRODOVA³ will be investigating this topic.

Interagency cooperation as requested by the Istanbul Convention

Tjosvold (1988) characterizes cooperation in the sense of a cooperative goal relationship by four features: (1) exchanging and combining information, ideas, and other resources; (2) giving assistance; (3) discussing problems and conflicts constructively; and (4) supporting and encouraging each other. According to the Istanbul Convention (Council of Europe, 2011), cooperation between various frontline responders of domestic abuse is a promising approach to manage and understand domestic abuse implying that much more and better cooperation is possible compared to current efforts. Reasons for this gap between current national efforts to control domestic abuse and the standards set by the Istanbul Convention (Council of Europe, 2011) are manifold: Legal constraints, institutional egoism, lack of capacity, experience and training, et cetera. Nonetheless, analyses of existing models of cooperation confirm that the advantages outweigh the costs as long as the victim-survivor's needs determine the focus of the cooperation (Jaffré, 2019).

Furthermore, the Istanbul Convention stresses the prevention of secondary victimisation and an inter- or multi-agency approach of fighting domestic abuse. It is claimed, for example, that a "holistic response to violence against women" should be offered in a "way of effective co-operation among all relevant agencies, institutions and organisations" (Council of Europe, 2011, Art. 7 Sec. 2). In Article 18 Section 2, these stakeholders are explicated as

"all relevant state agencies, including the judiciary, public prosecutors, law enforcement agencies, local and regional authorities as well as non-governmental organisations and other relevant organisations and entities, in protecting and supporting victims and witnesses of all forms of violence...,including by referring to general and specialist support services...".

The coordinated approach should target victim-survivors and perpetrators, children and the wider social environment (Council of Europe, 2011, Art. 18 Sec. 3). Ideally, protection and support services would be "located on the same premises" (Council of Europe, 2011, Art. 18 Sec. 3). Additionally, all involved parties should receive professional training on how to cooperate within a coordinated multi-agency approach (Council of Europe, 2011, Art. 15 Sec. 2).



³ www.improdova.eu

Necessarily, the wording of such conventions need to be in a normative mode, and partly appellative. Therefore, national or cultural impediments to its practical execution have to be neglected in the formal text. This could encourage activists and practitioners to welcome the Convention's urge to alter traditional behavioural patterns and stereotypical roles for women and men, and eradicate the idea of women's inferiority (see Council of Europe, 2011, Art. 12 Sec. 1). In the field, both frontline professionals and domestic abuse researchers encounter a very different reality of gender relations. Traditional ideas and attitudes seem to be narrow, if not entrenched. The likelihood of Istanbul Convention requirements to be actually implemented constitutes the contradictory nature of, "law in the books" and "law in action". Istanbul Convention's postulations may come true when we apply a wider horizon, because they are justified and indispensable in terms of human rights, civil society, and the protection of females.

Interagency cooperation as an approach to control domestic abuse

The Istanbul Convention (Council of Europe, 2011) presents the ideal situation of how cooperation between various frontline responders in cases of domestic abuse should be presented; the advantages of such cooperation depend on the communication between the parties.

Firstly with respect to Tjosvold's (1988) definition mentioned above, the parties to the cooperation need to base their cooperation on a shared objective. When they have a shared understanding of the goal and act accordingly, similar attitudes toward a subject will be more likely to occur. On a general level, this could be the condemnation of abuse in any form. As fewer conflicts about the overall mission in fighting domestic abuse will less likely divert their energies, divergent parties will be more motivated to work with each other (cf. Kravets & Zimmermann, 2012; Mohr & Spekman, 1996). This unity also has a positive effect to the external, for example, to clients: If all parties agree, that belittling, bashing or controlling of the spouse is inacceptable behaviour, then, in a given situation, victim-survivors and perpetrators have increased chances to accept this view and learn what appropriate and inappropriate behaviour is.

Secondly, on the part of each involved institution, to agree on a shared goal and to work towards achieving this goal requires a common understanding of each other's approaches, including options and constraints that determine the partner's frontline response. If this understanding is achieved, the parties can better assist victim-survivors of domestic abuse by referring them to other agencies whose expertise is suitable for addressing the victim-survivors' needs. Victim-survivors regard this as good service and often as tremendously helpful (Allen, Byebee & Sullivan, 2004; Westbrook, 2009).



Thirdly, referrals to other stakeholders (i.e. those who are engaged in controlling domestic abuse and its effects) are only done in a convincing way when the parties to the cooperation trust each other. Thus, referring a victim-survivor to another agency signals to the victim-survivor that an agency x trusts an agency y. Therefore, the victim-survivor should also trust agency y (Ferrin, Dirks & Shah, 2006). This is evident, for example, when a victim-survivor first goes to a shelter and the shelter-staff encourage the victim-survivor to report the case to the police.

Fourthly, referrals to agencies of cooperation is even more effective to support victim-survivors of domestic abuse, when all partners are prepared to serve as the starting point of an intervention and are open to assist each victim-survivor of domestic abuse. Accordingly, Hagemann-White (HAIP, 2017) states:

"The chain of intervention is perhaps best imagined as a ring with many doors, which can be entered or left at any point, and which is also internally connected by many crossroads. It is crucial that the chain (as an offer) is not interrupted, but has connection possibilities at every point, which are mediated by the facilities. The principles of maintaining confidentiality and strengthening the self-determination of those affected remain intact despite all cooperation".

Evidently, not every agency managing a case is the most suitable in meeting the needs of a victim-survivor or his/her family and friends. However, as long as these persons are not rejected, but welcomed openly and referred to the most suitable agency, the idea of the intervention chain is actualized.

Fifthly, team research shows that the best approach for solving complex tasks is realized when all partners share all knowledge they have of a certain case (e.g., Wittenbaum, Hollingshead & Botero, 2004). Accordingly, when several stakeholders with complementary expertise and knowledge cooperate on such a basis in supporting victim-survivors of domestic abuse, such inter-agency cooperation will be effective. Consequently, better decisions and faster responses regarding the support of a victim-survivor of domestic abuse are achieved via open communication (Tjosvold, 1988). However, finding the best possible solution is often difficult, if any party withholds communication due to mistrust or suspected intimidation by another party. Nonetheless, in numerous cases the need to withhold information is caused by a victim-survivor who chooses to continue to being anonymous and not to press charges. In such circumstances, the parties are only able to discuss the case in an impersonal way.

Finally, finding a positive solution for safeguarding and supporting a victim-survivor requires a rapid response, which becomes more easily achievable when interagency communication is built on cooperation. The sooner victim-survivors are comprehensively as-



sisted by frontline responders, the better are chances to avoid family and partner conflict escalation to high impact domestic violence (Feld & Straus, 1989).

Although not explicitly mentioned above, perpetrators of domestic abuse are expected to benefit from a network of cooperating agencies in similar ways.

Research plan for the IMPRODOVA Project

Scope of IMPRODOVA

Overall, it becomes clear, that a significant cooperation between different agencies working on the frontline of domestic abuse relies specifically on established lines of communication and trustful relationships. This rationale is also the starting point of the IMPRO-DOVA project (May 2018 – April 2021) funded by the European Union under the Horizon 2020 call. As the acronym IMPRODOVA stands for "Improving Frontline Responses to High Impact Domestic Violence", the main goal is to investigate human factors shaping institutional responses to domestic abuse. Among the various frontline responders, police organizations should be one of the major sources of support for victim-survivors of high impact domestic violence (HIDV). Yet, according to the World Health Organization (WHO, 2005), between 55 and 95 per cent of victim-survivors of domestic abuse never seek assistance from formal services including the police since there is a perceived or actual inadequacy of police response (e.g., Butterworth & Westmarland, 2015). Consequently we encounter the subjective public perception that police officers are accused of being insensitive to victim-survivors' concerns. However, the low overall number reported by WHO conceals the wide variety of response rates in different circumstances, where police response and victim-survivor support agencies have managed to provide adequate and easily accessible support to victim-survivors of HIDV. Also across Europe, there are positive examples of good practices.

IMPRODOVA thus focusses on improving and integrating responses of police, social work, non-governmental organisations and other stakeholders who are frontline responders in domestic abuse cases to increase reporting of domestic abuse. In this sense, IMPRODOVA is designed to provide solutions for an integrated response to high impact domestic violence (HIDV), based on comprehensive empirical research of how police and other frontline responders (e.g. medical and social work professionals) respond to domestic



abuse in eight European countries⁴. The project priorities are to deliver recommendations for policy, data collection, risk assessment and training for European police organizations, medical and social work professionals to improve and integrate institutional response to HIDV. The aim is to create a positive feedback loop, which will increase reporting rates of HIDV to police, and the medical profession, community and social work practitioners who act as the frontline responders.

IMPRODOVA has two main components, which are, firstly, the analysis of current institutional responses to HIDV, and secondly, the development of effective solutions for improving those responses.

General work plan and methodology of IMPRODOVA

The project consists of five non-management related work packages: (1) Contextualising the frontline response; (2) Exploring the frontline response; (3) Integrating the frontline response: Development of IMPRODOVA toolkits; (4) Assessing the IMPRODOVA toolkits; (5) Dissemination, communication and exploitation. Work pages (1) to (4) constitute a progressive totality, whereas work package (5) is running through the whole project.

Due to the complex nature of such a large-scale, multi-faceted research project, a detailed description of the methodology can only be presented in a reduced way. The general research approach of IMPRODOVA is to combine different methodologies to move between macro policy analysis, micro field-studies and the development and validation of practical tools and guidelines integrated in a synthesizing approach towards better-harmonized European approaches to HIDV. Throughout the various work packages, four themes will be investigated: National and organizational level policies regarding domestic abuse, statistical data on domestic abuse, HIDV risk assessment, and frontline responder trainings on the handling of domestic abuse cases.

The rationale and methodology behind the work packages is, first, examine the nominal situation regarding these four themes (work package 1). Within the first work package, IMPRODOVA researchers will conduct a complex and multi-dimensional *comparative* analysis, reviewing statistical data, national and organizational level policies, strategies,



⁴ The IMPRODOVA consortium represents eight European countries: Austria, Finland, France, Germany, Hungary, Portugal, Scotland/UK, and Slovenia. The project is coordinated by the German Police University in Münster (DHPOL). The project consortium includes police organizations, research institutes, universities, NGOs and police education institutions: Bundesministerium für Inneres (BMI, Austria); Vienna Centre for Societal Security (VICESSE, Austria); National Institute of Health and Welfare (THL, Finland); Poliisiammattikorkeakoulu (POLAMK, Finland); Centre de Recherche de l'Ecole des Officiers de la Gendarmerie Nationale (CREOGN, France); Centre National de la Recherche Scientifique (CNRS, France); European Research Services GmbH (ERS, Germany); Police Berlin (PB, Germany); FORESEE Research Group (FORESEE, Hungary); Westfälische Wilhelms-Universität Münster (WWU, Germany); Ministry of Internal Administration (ISCPSI, Portugal); University of Maribor (UM, Slovenia); Ministry of Interior, General Police Directorate (MPS, Slovenia); Scotland Police (PS); and University of Glasgow (UoG, Scotland).

and the implementation of international guidelines at national levels across the IMPRO-DOVA partner states.

Then, the real situation is examined via field research (work package 2) searching for good practices. Whereas all four themes are investigated in work package 1 by means of document analysis, their practical meaning will be investigated in work package 2 by means of fieldwork collecting data via semi-structured interviews. Through *in-depth fieldwork* following an ethnographic research approach, the research team will investigate to what extent and how recommendations are currently met. As main result of the fieldwork, actual practices on national regional, local and organizational level will be compared against the baseline of international guidelines.

Based on the outcome of our analyses a comprehensive range of implementable strategies for advancing and improving frontline responder collaboration with regard to the before mentioned four themes will be *developed* (with work package 3), *tested and evaluated in pilots* (within work package 4).

Intended output of the IMPRODOVA project

IMPRODOVA proposes the following outputs as key solutions to critical issues in domestic abuse policing:

- Policy-making recommendations for HIDV. Recommendations will be realistically applicable / implementable by European law enforcement agencies and other frontline responders to ensure on-going development of responsive and realistic domestic abuse policy.
- Recommendations for comparable survey research that would extend and complement existing Eurobarometer and other domestic abuse data. Such surveys should include citizens' and practitioners' experiences and perceptions of domestic abuse, and how these affect citizens' feelings of insecurity and practitioners' welfare at work in order to build a responsive evidence base for ongoing practice improvements.
- Recommendations for police responding to domestic abuse cases. These recommendations will be sensitive to multicultural and gender issues, and to the ethical challenges, psychological stress, and specific safety risk exposure of law enforcement agencies entering the private sphere in which domestic abuse occurs.
- Recommendations and models for the efficient ways to organize inter-agency cooperation between the police, medical and health care services, social work and NGOs.
- Training material designed to improve competencies for frontline responders to better deal with DV cases, support victim-survivors, hold perpetrators accountable, and enhance the cooperation across multiple agencies.



- Shared European approaches and an integrated risk assessment module for HIDV. The
 risk assessment toolkits will be based on and validated against the needs and requirements expressed by European practitioners.
- Awareness raising among teachers, social workers, health care workers and citizens
 about the destructive consequences of domestic abuse, and about the importance
 of consolidated efforts against abuse. This will foster a shared identity and goal in
 defining and addressing domestic abuse, and improve the sense of European citizens
 that Europe is an area of freedom, justice and security.

Through these outputs, IMPRODOVA will contribute to medium and long-term professional and societal impacts to curtail domestic abuse, improving the security of citizens while protecting their fundamental rights. The composition of IMPRODOVA consortium, combined with its two-phased approach can produce a sustainable and long-term impact in research, training, operations and policy in relation to domestic abuse.

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