



EMPROVE! Empowerment for improvement
Successful Intervention and Prevention against domestic violence
Project No. 2016-1-IE-01-KA204-016906

improve empower

The Report on the Desk Research and Needs Analysis on Domestic Violence

Project Partners:

Exchange House Ireland (Ireland)

CATRO (Bulgaria)

die Berater (Austria)

BUPNET (Germany)

Magenta Consultoria Projects (Spain)

ANUP International (Romania)

Social Innovation Fund (Lithuania)



Contents

1.	Introduction to the EMPROVE! Project.....	3
2.	Introduction to the Report on the Desk Research and Needs Analysis on Domestic Violence	4
2.1.	Desk Research.....	4
2.2.	Needs Analysis on Domestic Violence	5
3.	Results from the interviews with professionals.....	6
3.1.	Profile of the sample group	6
3.2.	Summary of the answers from the interviews with professionals and overall conclusions	10
3.2.1.	Challenges and obstacles faced by professionals when working with survivors of domestic violence	10
3.2.2.	Training and Support for Professional Staff working in the field of Domestic Violence	16
3.2.3.	Suggested Improvements or Support, Professionals would like to Receive	19
3.2.4.	Professionals' Main Goal and their suggested Key Competencies needed in the work with DV survivors and to empower them.....	22
3.2.5.	Professionals View of Training Received by other Front-line Staff and Prevention	27
3.2.6.	Obstacles Faced by Survivors.....	30
3.2.7.	Support which needs to be offered to survivors	33
3.2.8.	Experience in work with Online Platforms.....	35
3.2.9.	What EMPROVE! training program should contain in order to be attractive for professionals .36	
3.2.10.	What would be needed to be included in the EMPROVE! training to empower survivors according professionals from project partner countries	37
4.	Results from the focus groups with DV survivors.....	40
4.1.	Summary of the answers from focus groups with DV survivors and overall conclusions.....	40
5.	Results from the focus groups with Front-line service provider for the Traveller community (Ireland)	47
6.	Overall conclusions from the research and recommendations for improvements	49
7.	Annex 1.1: Research Tools templates: Interview Questions with Front-line Staff	53
8.	Annex 1.2: Research Tools templates: Focus group with DV survivors	55
9.	Annex 1.3: Research Tools templates: Best practices research template	57



1. Introduction to the EMPROVE! Project

The Project EMPROVE! seeks to increase the level of empowerment of women, survivors of domestic violence (DV) through improvement of:

- THE SUPPORT: the level of the counselling services and training offered to DV survivors through increased capacity of counsellors
- THE PREVENTION of DV with special series of events for key stakeholders and police staff, medical workers etc. who should be able to recognise first signs of violence, even if the potential victim hasn't spoken about it openly
- THE NETWORKING MECHANISM of all important stakeholders in the fight against DV
- THE POLICY MAKING on regional, national and transnational level in regard of DV prevention and intervention

EMPROVE! addresses directly the following target groups:

- Counsellors, tutors and mentors working with DV survivors
- Supporting functions-volunteers, NGO Staff, social workers in hospitals, police, employers;

The final beneficiaries of the EMPROVE! project are survivors of domestic violence with focus on female survivors.

In line with the Erasmus+ Strategic Partnership activities, the project EMPROVE! implements and tests innovative practices in the field of training, developing an innovative link between Gamification and classical Learning Management Systems.



2. Introduction to the Report on the Desk Research and Needs Analysis on Domestic Violence

During the Project EMPROVE! implementation Project partnership conducted the Best practices *Desk Research and Needs Analysis On Domestic Violence*.

The Report of the Desk Research and Needs Analysis on Domestic Violence contains a summary and analysis of the qualitative study, therefore is based on the conducted in-depth interviews and findings from the Focus Groups, gaps identification in both intervention and prevention of DV and presents *Best Practices Brochure* which is published as a separate document in the project website as the result of *Desk Research*.

The purpose of the report is to act as the foundation of the project, not only for awareness raising but also for the materials developed within the project.

2.1. Desk Research

Best practices desk research - conducted by all partner organisations investigates and identifies the best practices in intervention and prevention of Domestic violence. The desk research is done by each partner for their own country as well for 1 more European Country, which does not participate in the project as well in the USA. Overall 29 good practices from these countries are presented: Austria, Bulgaria, Ireland, Italy, Lithuania, Germany, Netherlands, Sweden, Switzerland, Portugal, Romania, Spain, the UK and the USA.

Best practices are summarised in the Best Practices Brochure as the result of Desk Research and presented as a separate publication, designed in the printable version and available on the project website (www.emproveproject.eu).

This unique *Best Practices Brochure* gives a quick overview on impressive good practices in the fight against domestic violence in:

- Training/counselling tools, programmes;
- Support measures and services for the survivors of DV;
- Models/approaches used in the counselling of the survivors of DV;
- Training tools and programmes for professionals working with DV survivors;
- Networking practices;
- The measures of prevention of DV;
- Awareness raising campaigns;
- The measures to work with perpetrators.

Best practices desk research template could be found as Annex 1.3: Research Tools templates: Best practices research template.



2.2. Needs Analysis on Domestic Violence

It is qualitative study, which focuses on gaps identification in the intervention and prevention of DV.

This qualitative study gathers from both counsellors and DV survivors the advices and experiences as well as the biggest challenges in the field of DV in order to respond to their needs properly with the upcoming capacity building measures of EMPROVE!

In the report on the Needs Analysis on Domestic Violence there are presented findings from:

1. Qualitative study - interviews with professionals working in the DV field;
2. Qualitative study - Focus Groups with DV survivors;
3. Focus group with front –line staff working in an Education & Training Service with members of the Traveller community in Ireland – (this part is additional to the research and the project)

1. **Interviews** with crisis centre personnel/counsellors in NGOs, who work with DV survivors and define: main challenges they face in their job to support the DV survivors, what support do they get to perform their job and what support do they still need.

The templates and questions for the in-depth interviews (see Annex 1.1: *Research Tools template: Interview Questions with Front-line Staff*) were prepared and translated into each partner language and the in-depth interviews were performed in each partner country - that is: Austria, Bulgaria, Germany, Ireland, Lithuania, Romania and Spain.

Overall partners conducted 37 interviews. This is more than expected return rate was (30) for all participating countries. All partners prepared the national reports which are summarized in this common report.

2. **Focus groups** with survivors of domestic violence in order to identify their needs and to match them in the EMPROVE! Training program and social platform

The templates and questions for the focus Groups (see Annex 1.2: *Research Tools template: Focus group with DV survivors*) were prepared. The Focus groups were conducted in Lithuania, Spain and Romania. In the project it was expected that there will be conducted only one Focus group per partnership, therefore the two additional focus groups bring higher informational value of our qualitative study. Partners prepared the national reports which are summarized in this common report.

3. **Focus group** with front –line staff working in an Education & Training Service with members of the Traveller community in Ireland.

A focus group was conducted with three front-line staff working in an Education & Training Service with members of the Traveller community in Ireland. The staff were all female, qualified and experienced professionals in the field of education.

The aim of this research was to identify if these staff face issues of domestic violence as part of their work with students. To find out what experience and/or knowledge they have in this area. If they would they partake in the EMPROVE training and use the gamification platform when it is available.

Findings from **Needs Analysis on Domestic Violence** will be presented further in this report.



3. Results from the interviews with professionals

3.1. Profile of the sample group

In total through all partnership 41 interviews with front line staff working to support survivors of DV were conducted with 33 different organisations/agencies in seven project partner countries. There were 6 male and 35 female respondents.

Bellow there are described sample groups in each country:

Austria: 4 Interviews were conducted

All interviewed persons were women working for Austrian crisis intervention centres – in south-eastern part of Austria (1 from Pannonia, 3 from Styria – working in different regional offices). The Austrian "Gewaltschutzzentren" (=Crisis intervention centres) are national acknowledged centres for the protection of victims of domestic violence. They act on behalf of the Austrian Federal Ministry of Internal Affairs and the Austrian Federal Ministry of Health and Women affairs. The main aim of the supporting work is the counselling of victims of DV, to improve their security and to empower them to reach a self-regulated life free of violence. Main offices of crisis intervention centres are located in every Austrian federal state and they operate in a close network with the police, family – and youth court, social welfare, etc.

Bulgaria: 3 Interviews were conducted

Whole Bulgarian sample consists of female counsellors, which is overwhelmingly the gender of all professionals working with DV survivors. The answers provided are based on the experience and expertise of the interviewed people in the following fields (presented in a summarized form to keep the anonymity of the sample as requested):

- Psychological work in the national police structures.
- National Representation for DV Prevention of the Norway Grants.
- PhD and scientific background.
- Individual counselling in the field of Domestic Violence.
- Providing of support on a hotline for children consulting and emergency signals for domestic violence.
- Coordinating an Empowerment Programme for DV survivors.

Germany: 4 Interviews were conducted

The four interviewees were conducted with women who represent support services in the field of DV. These are all based in Göttingen.

Organisation which participated in the research:

1. Regional Helpline "Frauen-Notruf": Counselling and professional centre for sexual abuse and domestic violence. Feminist organisation with more than 25 years of experience, staff has psychological, pedagogical and juristic exams and is trained in trauma short therapy; working in the city area of Göttingen.

The Notruf is a core actor in networking on local level: all stakeholders in the field know them – and the other way round. They also offer training courses for various target groups: women and children suffering from DVF, perpetrators, police, schools etc.



2. The women's shelter in Göttingen: Apart from sheltering, they offer face to face training in the rural area of Lower Saxony and have had good experience with quizzes and interactive games. Their developed material that could be useful for developing the EMPROVE-training.
3. The "Therapeutische Frauenberatung", an NGO which offers counselling for women successfully developed training for medical staff in hospitals. Health topics considering domestic violence have been implemented as part of the quality management. The staff can be trained very successfully but there is a need for continuous training.
4. The "Kinder- und Jugendtelefon": Helpline for children & youngsters; founded in 1988; acting under the roof of the Bundesarbeitsgemeinschaft der Kinder- und Jugendtelefone – "Nummer gegen Kummer", founded more than 30 years ago in Wuppertal.

Ireland: 9 Interviews were conducted

Interviews were conducted with front-line staff working in the areas of social work, child protection, family support, addiction counselling and a women's refuge. The aim was to identify the training, knowledge, skills and experiences of the staff working directly with people who are currently experiencing domestic violence or survivors of domestic violence. To explore the obstacles, they face, their key competencies, and the resources they use. It sought to identify what their source of support is and their suggestions for the development of the EMPROVE! training programme and the gamification platform.

Organisation which participated in the research:

1. Family Support and Crisis Intervention Team: Front-line Service for the Traveller Community.
2. National Children and Family Agency Organisation.
3. Women's Refuge Centre.
4. National Police Force.

Lithuania: 8 Interviews were conducted, all with women professionals working in the field of DV.

4 institutions participated in the research:

1. **Kaunas county women crisis centre** is specialised help centre for Kaunas city; <http://www.kamkc.lt/en/>. Founded in 2011, the Kaunas county women crisis centre was providing help for women and families in crisis. From 2014 year - works as specialised help centre and provides consultations for women survivors of domestic violence as well as for men in Kaunas city. Services provided: by phone, face-to-face, by skype, e-mail, anonymously by internet. Specialists working in the centre: psychologists, social workers, layers.
2. **"Women help women"** - Performs functions of specialized help centre for survivors of domestic violence in Jonava, Kėdainiai, Ukmergė; <http://moters-pagalba.lt/>. Services provided: psychological consultation, legal advice, consultations of social worker. In line they have Help line for women, mediation services, support group for those, who experience loss, personal development workshops, workshops for organisations in crises intervention.
3. Association **"Women's activity centre of Marijampole country"**. Performs functions of specialized help centre for survivors of domestic violence in Marijampole district;



<http://marmvc.webs.com/>. Services provided: psychological consultations, legal advice, information, mediation.

4. Association “**Alytus country Women's Crisis Centre**”, Performs functions of specialized help centre for survivors of domestic violence in Alytus. Services provided: psychological consultations, legal advice, information, education and empowering.

Romania: 7 Interviews were conducted

ANUP-International interviewed 5 professionals from the DGASPC (see below), 1 social worker from the Episcopate Slobozia and Calarasi, and 1 police subcommissary from the General Inspectorate of the Romanian Police.

Organisation which participated in the research:

1. Directia Generala de Asistenta Sociala si Protectia Copilului Ialomita (DGASPC–Ialomita) – **General Directorate of Social Assistance and Child Protection of the Ialomita County**

2. Centrul de Primire in Regim de Urgenta pentru Victimele Violentei in Familie - **Emergency Centre for Victims of Domestic Violence.**

This emergency centre belongs to the DGASPC. The Centre is operating since 2007, offering services in the county of Ialomita. In Romania there are 42 DGASPC, in each of the 42 territorial counties, as governmental social services belonging to the Ministry of Labour and Social Protection dealing with social assistance and child protection. They deliver services for victims of domestic violence: social work, counselling, accommodation, food, primary health care within the Ialomita county situated in the south eastern part of Romania.

Spain: 6 Interviews were conducted. The Spanish sample consists of 5 female and 1 male counsellors.

Organisation which participated in the research:

- Intermunicipal Centre of Social Services: they offer social services of primary care in the Principality of Asturias. These services include development of preventive activities against exclusion, promoting social integration of individuals and groups, covering of needs and foster social participation among other activities.
- Asturian Government: The Asturian Women's Institute is the body of the Government of the Principality of Asturias responsible for making effective the principle of equality between women and men, promoting and promoting the participation of women in all areas and eliminating any form of discrimination.
- Infiesto Health Centre (public employee): this organisation provides education for health in pregnancy, also coordinates a reflection group for responsible maternity and paternity and co-responsibility. They carry out workshops on the program “no ogres or princesses” at schools, related with the affective and sexual education. Also, they do trainings to the rest of professional in the area of health and the own ones of the centre.
- Women's Advisory Centre of the City Council of Mieres: this organisation provides specific legal advice to victims of gender violence, and, also, it acts as responsible for the casa and monitoring the measures put in place by the Administration for the support, welcome and comprehensive recovery of the victims. They coordinate with



other agencies involved in the case (related to employment, health, social services, etc.) as well.

- Asturian Federation of Councils: they coordinate a project financed by the Ministry of Economy and Employment of the Government of the Principality of Asturias. They carry out actions for Professional Guidance for Employment and Self-Employment Assistance, which provides employment counselling and advice for self-employment, to all those enrolled in the Offices of the Public Employment Service of the Principality of Asturias.
- Welcome Network of the Homeless House of Mistreated Women (Red Cross): this organisation provides accommodation, accompaniment and support in the recovery process to women victims of gender violence as well as her sons and daughters.



3.2. Summary of the answers from the interviews with professionals and overall conclusions

There are provided summary of the answers from the interviews in different countries below and overall conclusions made in accordance with the defined questions for interviews.

3.2.1. Challenges and obstacles faced by professionals when working with survivors of domestic violence

Austria

In general one can say, that the crisis intervention centres work with women who are - at that point - more victims of domestic violence, than survivors, it is the aim of the intervention centres to guide, to consult and to support these women to become survivors.

Concrete challenges mentioned by the interviewed persons:

In the work with survivors of DV the following obstacles and challenges are mentioned by the interview participants:

- Risk assessment.
- To build a relationships full of trust.
- A vast theoretical knowledge and psychological know-how and sensitivity is required in this job.
- Challenges – due to the individual situation of the women: the trauma they have experienced and the challenges for the professional (coaches, counsellors) to deal with these experiences and to support the women to find her way out of this vicious circle. Often victims feel that they are responsible for their own situation. They have still feelings for the perpetrators – which makes it often more difficult to help them out of the relationship. For the women the main challenge is to overcome role models they stick to.
- Structural Challenges – like **cooperation and networking with other public institutions connected to the case.** Even if the topic of domestic violence is now embedded in the basic qualification and training of police staff, the feeling of the interview persons is that there could be done more. Especially in further education and training of the police, domestic violence is not one of the main topics. This could be improved.
 - The court or other offices of public administration. As it was mentioned before: the staff working there is more focused to deal with the perpetrators and often need more awareness and understanding for the victims/survivors situation.

Bulgaria

In general, as the interviewed people have shared, there is a lack of structure and unified standards and ethical norms for the professionals working with DV survivors. In this specific field there is an increased turnover of personnel, where many young people are attracted to begin their career as psychologist there, but are at the same time facing the challenge of mainly having to be trained through learning on the job.

Specific challenges mentioned by the interviewed persons:

The challenge of starting the job

- Domestic violence training – in the framework of European training.
- Training by the colleagues.
- Information from Animus' database.
- "Empowerment manual".
- No officially structured procedure – it requires proactivity for researching the subject, reading and looking for support/shared experience.



The challenge of understanding the client

- STEPPING INTO THE SHOES OF THE CLIENT: Role plays with the trainers/counsellors needed so that they put themselves in the client's position and their problems.

Challenges ON THE JOB

- It is impossible to work with the inner-world of the client, isolated from the challenges in the outer world.
- If the basic needs of the client are not satisfied, the counsellor cannot work on the higher-level needs (Maslow) – e.g. in the case of DV victims that do not have electricity or food.
- The shock of the survivor when entering the crisis centre is also a challenge - the environment changes significantly.
- Working 'on the field' is also very important AND challenging.
- Working with the families of the survivors.
- The challenge of the different cultural backgrounds.
- Some survivors tend to prefer jobs, that seem to be easy and this makes the process even more complicated.
- Empowering does not mean solving the client's problem, but rather finding the solutions and helping them discover them on their own.

Germany

- Networking and cooperation: Generally at local and regional level the relevant organisations working in the support chain for victim and survivors of domestic violence have a good network, but there is still a need to continuously manage and control the process.
- Financing: Although a positive development can be recognised on the national level (legislation, national action plan) stagnation or regression is also visible in certain federal states of Germany regarding allocation of budget or implementation of concrete measures. Based on the national action plan, there is a plan to allocate budget on a national level to support important activities for survivors of domestic violence. As in other European countries, there is an ongoing discussion about special services for specific target groups of survivors of domestic violence such as migrant women and women with disabilities.
- Training: From the interviews can be derived that there are many training opportunities for victims and survivors of domestic violence as well as training programmes for professionals, but often they are too expensive for small and low funded NGOs, which are mainly involved in the supportive chain. There is lack of training among certain group of professionals: it seems that there are some target groups that are difficult to enrol in DV related training. As a result these lack the necessary competences to deal adequately with the victims.
- Support system: With the implementation of the new Action Plan II in 2007 the government expects the 16 federal states to further develop their programmes and actions for combating violence against women and to improve the cooperation and collaboration at federal level. As Germany is a federal state some stakeholders who are involved in the intervention fall within the remit of the state or the federal states, whereas others fall within the remit of the municipalities etc. The Action Plan II is a good starting point, because it gives the political basis for improving the current situation which still shows many deficiencies in the support system for combating domestic violence.
- Risk assessment: There are no official risk assessment tools that are applied as a general rule in Germany, but there are different approaches applied by professionals during the intervention and prevention of domestic violence, for example by the police. It is very common to use checklists combined with indicators for assessing the risk of re-assault. E.g. the Ministry for Family, Seniors, Women and Youth offers on its website the BIG26 checklist as well as a pattern to establish an individual safety plan that victims of DV can use to get themselves and their children to safety – The basis for this safety plan was taken from the »Separation Safety Plan« of the Metropolitan Nashville Police Department and thus is not a national one. The increased use of risk assessment has focussed unduly on victims, although



it is the perpetrator who poses a risk. It would be necessary to shift the attention more on the perpetrators as the "risk carrier."

- Staying in the violent relationship: The women often feel guilty and blame themselves for the violence they have suffered from. They tend to stay in the relationship as they believe that the act of violence will not happen again - even if they have experienced more than one cycle of violence. They need often several attempts to actually leave the perpetrator. For the professional this can lead to frustration and negative feelings as a result for the unsuccessful intervention.

In a nutshell this means:

- There is room for improvement when it comes to networking and cooperation among the various involved stakeholders.
- Training is available but sometimes too expensive for small NGOs.
- Some target groups are difficult to get involved in training, even though they would urgently need it in order to deal adequately with women victims of DV.
- Risk assessment is an ongoing issue, as not general tools and methods are provided.

Ireland

The main challenges faced, included accommodation issues, specifically re-housing survivors and/or trying to find them a place in a domestic violence shelter or refuge. Survivors still living with the perpetrator, this may be due to having children, still being in love with the perpetrator, accommodation issues, or normalisation or acceptance of their situation. This was discussed as an issue that can occur when survivors have grown up as a child in a home with domestic violence. It may then form a part of their adult life as they accept this situation as normal.

Professionals stated that the survivor may have post-traumatic stress disorder or other forms of ill mental health due to their experiences. Building trusting relationships between the professional and the client was also a reoccurring theme.

This included family violence whereby other members of the family would partake in violence against the survivor. A theme that arose within the focus group for staff working with Travellers, also conducted in Ireland. A mistrust of services, power dynamics and gender roles within relationships, and a lack of communication when violence has re-occurred within the home.

Challenges included:

- Child protection.
- Accommodation.
- Still living with the perpetrator.
- Unwilling to leave the home.
- Post-traumatic stress disorder & ill mental health.
- Normalization of domestic violence.
- Building trusting relationships with professional/front-line staff.
- Admitting they're in a violent relationship.
- The couple getting back together.
- Being a male staff member working with female survivors.
- Lack of communication between services and the need for a standardised system in Ireland.
- Wanting somewhere safe to stay but not willing/ready to reflect on their experience or situation.
- Fear of speaking out; fear of partner, especially within Court system.
- Children being exposed to psychological, emotional, and physical abuse.
- Unwilling to leave the home and needing a 'statement of complaint'.
- Mistrust of services; refusal to seek support.
- Lack of communication and informing staff of new attacks.
- Addictions.
- Cycles of abuse.
- Women from homes where they witness domestic violence as children.



- Low self-worth and low self-confidence.
- Lack of other services.
- Lack of affordable counselling.
- Mental illness not supported.

Lithuania

- The challenge is related to the fact that Specialised Help Centres (SHC) do not provide overnight accommodation services, and in the case of DV women do not have the secure place to stay. DV survivors need secure place to stay, and there is the problem, as mostly there is no shelters for DV survivors in Lithuania (except Vilnius, Klaipeda and Kaunas region).
- Frequent challenge - is inadequate work of police officers, and in relation to that there is low confidence of clients in state institutions.
- Judges/prosecutor do not look seriously at the problem of violence;
- Lack of qualification and tools: professionals (social workers, policemen) should have specific tools and models of intervention: they should know what is the process of the work, what exactly they need to talk about; be able to recognize signs of violence.
- There is tolerance and justification of violence in a society and this is typical for victims of violence as well.
- The lack of networking and willingness to cooperate with each other between different institutions working in the field of DV violence.
- There is lack of external supervisors, support.
- Availability/accessibility - there is the problem that SHC cannot be reached by all clients who want to get help. Although SHC consultants work mainly by phone, there are people who would like to get help as well personal consultations face-to-face. But they do not have the possibility to reach the help centre by themselves (they live in remote/rural areas). Staff of SHC also does not have the opportunity to reach those clients.
- There is the lack of the unified understanding/treatment of domestic violence in all relevant institutions.

The challenges related to the situation of the DV survivor:

- Addictions.
- Poverty.
- Psychological problems.
- There is the common tendency between the DV survivors to forgive the perpetrator, and this is the problem as repeated violent behaviour is frequent.
- Their low motivation to change the situation and refusal to apply for help and be protected. In order to provide the help to these clients, there is the need to be able to persuade them, motivate them that the help is necessary, as often these clients tend to behave defensively and to hide their problems. These are the cases when the perpetrators are the adult sons or life partners of women. There is closed circle, as the DV survivors forgive perpetrators. Then violence persists.
- Distrust of the DV survivors: people tend do not trust governmental institutions -they are afraid, because they are always waiting for the punishment.
- The lack of self-esteem of DV survivors, or taking over the role of victim; symptoms of syndrome of battered women.
- Low emotional intelligence; fear, shame, fear of publicity.
- Perpetrators and victims lack the skills how to deal effectively within the conflict situation in the family. It is therefore necessary to learn how to communicate properly, manage their emotions and solve everyday problems and disagreements.
- Often a woman occurs in difficult situation (socially, financially and emotionally) and then financial support is needed.

Romania

- Lack of support services for victims of domestic violence (shelters for victims with reduced



capacity), their hosting in the centres is too short.

- The complexity and gravity of the situation in which the survivor of DV is.
- In some cases, lack of support from family of origin (e.g. the victim's brother encourages the abuser's behaviour, claiming that the woman deserves to be abused).
- Lack of consistency from the victim (the victim does not sustain its aggression claim or its hosting application), based on a lack of self-confidence and trust in authorities.
- Lack of integrated services.
- Factors that may cause victimization of women: fear, uncertainty, erroneous beliefs about life couple, distorted perception of herself and of reality.
- Very often, the DV survivors have low education (minimum 8 classes) and low qualification or do not have professional qualification that would allow her to integrate into the labour market and which is needed in order to create an independent status for herself.
- Dependence from the abuser.
- Poor implementation of legislation regarding the perpetrators.
- Lack of counselling centres for perpetrators.
- Most women subjected to violence in the family space do not admit it for fear of social stigma or lack of knowledge about their rights. (Victims of abuse considered their life as being normal and she is not asking for help; husband is aggressive, but "he is a good father to children or it is good for them to grow up with both parents"- the victims say).

Spain

The greatest challenge perceived by these professionals is to improve the economic situation of the victim. In this sense, professionals intend to support the victim for the achievement of basic resources. In other words, improving the employability of DV survivors, helping to get a house and guiding them in the application for financial aid. In addition, they consider that it is very important to improve the internal and external resources that survivors have to cope with their psychological needs.

Specific challenges mentioned by the interviewed persons:

- Boost survivor's motivation to work.
- Try to show positive attitude to the survivors. Try to show a positive attitude, show them that we believe in them and have our full support. Know what to say in each moment. In reference to this, it would be advisable to encourage empathy and be careful not to hurt the feelings of the survivors.
- Encourage the survivors to participate in social activities.
- Detect the specific needs of each survivor.
- Management of self-emotions.
- Give survivors their own space.

Obstacles that can occur in work with DV survivors

- Administrative locks. In many cases, the public administration presents obstacles that make difficult the work with the survivors. In reference to access, request, implementation or development of projects, aids, services, etc.
- Survivors' reluctances to participate
- Lack of economic means. In many cases, the economic resources received are not sufficient to carry out the necessary actions for DV survivors.
- Little time to dedicate to each meeting. That is, there are times when there is an increase in the number of DV survivors requesting help. On these occasions, the working time is not enough to attend to them correctly.
- Loneliness at work. The people who work with DV survivors can often feel they are the only ones struggling to combat this problem and help the survivors. This is due to the lack of cooperation offered by certain sectors, which, together with the great workload they are able to bear, can feel lonely.
- Make the survivor see the problem she has.



Overall conclusions:

Thus, in general, we may state that in all countries which participated in the research, the following most frequently mentioned obstacles and challenges faced by professionals when working with Survivors of Domestic Violence could be classified accordingly:

Structural challenges such as:

- Accommodation issues, specifically re-housing survivors and/or trying to find them a place in a domestic violence shelter;
- Networking and cooperation with other public institutions like the court or other offices of public administration.
- Financing
- Support system
- Lack of training among certain group of professionals;
- Risk assessment
- Lack of communication between services and the need for a standardised system;
- Time resources.
- Lack of other services
- Lack of affordable counselling
- Lack of qualification and tools;
- There is lack of external supervisors, support;
- There is the lack of the unified understanding/treatment of domestic violence in all relevant institutions;
- Poor implementation of legislation regarding the perpetrators;
- Lack of counselling centres for perpetrators.

Challenges related to the field/job itself:

- Working with traumatised women;
- A vast theoretical knowledge and psychological know how and sensitivity;
- To build a relationships full of trust;
- Boost survivors motivation to work;
- Show empathy and positive attitude to the survivors;
- To improve the economic situation of the victim;
- Being a male staff member working with female survivors.

Challenges related to the individual situation of the women:

- The complexity and gravity of the situation in which the survivor of DV is.
- Still living with the perpetrator; or getting back into the violent relationship.
- Lack of consistency from the victim (the victim does not sustain its aggression claim or its hosting application), based on a lack of self-confidence.
- Admitting they're in a violent relationship.
- Fear of speaking out; Fear of partner, especially within Court system.
- Children being exposed to psychological, emotional, and physical abuse.
- Working with the families of the survivors.
- Poverty.
- Addictions.
- Low motivation of DV survivor to get help; reluctances to participate.
- Lack of communication and informing staff of new attacks.
- Distrust of the DV survivors to public institutions.
- Factors that may cause victimization of women.
- Women from homes where they witness domestic violence as children.
- Low self-esteem and low self-confidence of DV survivors.
- Low education and low qualification of the victim.
- Dependence on the abuser.



Other:

In some cases, lack of support from family of DV survivor or the culture supporting violence; tolerance and justification of violence in a society and this is typical for victims of violence as well.

3.2.2. Training and Support for Professional Staff working in the field of Domestic Violence

Austria

All interviewed persons highlight the good preparation to work in their job and the number of possibilities for further qualification. Regular supervision and inter-vision is offered inside the organisation to support the team.

The main support is networking with other institutions working in the field – there are a number of organisations and initiatives in Austria.

Very good networks with the public administration, police, courts.

The “Gewaltschutzakademie” www.gewaltschutzakademie.at offers special training and qualification for professionals working in the field of DV.

Bulgaria

- All interviewed professionals have found their own way of entering the field of work.
- No unified standards.
- Libraries with guidelines available but require proactivity and self-discipline from the professional to be found and explored.
- The available guidelines are often hard to look up into – long files, complex structure.
- There have been and there currently are different running EU funded projects on the topic that are useful for the professionals in the field.
- One of the interviewed people has gone through a training developed by Animus Association, based on experiential learning.
- List of partner organisations on various projects is a valuable asset.
- List of past trainings on the topic and how to implement these in the future (building on previous experience).
- Examples of case studies with various clients and the specific ways the counsellors approached them and solved them – A COLLECTION FROM ALL COUNTRIES.
- A very useful resource is the shared support from more experienced colleagues.

Germany

The preparation and training of staff members in the four institutions is very good. All interviewees confirm that they and their colleagues have studied (pedagogic, psychology, law etc.) and have been qualified adequately. They also mention that there are a number of training offers for further qualification in the field. Regular supervision for all staff members is a must.

Ireland

There was a clear diversity in the level of training undertaken by front-line staff and in the support they receive, working with survivors of domestic violence. It was evident that a lack of routine or standardised training, even within the same field such as social work, may present as an obstacle when staff are addressing a case. As they may come with a different professional perspective than a colleague based on their training received. The front-line professional in the refuge, the Garda and family support staff did not receive the same level of training as social workers despite their continuous work in this area. All professionals interviewed showed interest in receiving more training



and access to resources.

A strong network of support between colleagues arose as the main support received by social workers and family support workers. They also outlined supervision with their manager or an outside professional as another support received. A strong support network was not reflected by the other professionals interviewed.

The refuge staff member, despite having the most contact with survivors in comparison to other professionals, received only a 1 day induction in her role. Their access to supervision was only available on their days off work.

Training Received (Formal or Informal):

- Workshops (Women's Aid & Safe Ireland)
- Conferences
- Specified training in the United Kingdom
- Modules or topics undertaken as part of degree programme
- Hands on experience and advice from colleagues
- European funded project on domestic violence (Sunia Geel 1 & 2)
- 1 day induction course at refuge
- Role play (Garda training)
- Family Law workshops
- Professional Development with TUSLA (Child & Family Agency in Ireland)
- Placement in a refuge
- Conferences
- First aid
- Children's First training

Support Received by Professional Staff:

- Supervision
- Team/colleague support network
- Training & workshops
- Team meetings
- Duty system (1 staff on duty to manage system each day)
- European projects (Sunia Geel 1 & 2)
- Peer support
- Tusla Training
- Resources from Women's Aid
- Case Management
- Chief Executive Officer (manager of social work service)

Lithuania

All interviewed persons stated that they and their colleagues are professionals (psychologists, social workers, lawyers) and have had trainings in the field of DV. Some of them have huge experience working in this field (10-20 years).

Some of the interviewed persons mentioned that there are lot possibilities for trainings in the field, but others would like to have more possibilities. Consultants are actively involved in self-learning, looking for information and answers by themselves.

Support Received by Professional Staff:

Mainly there were mentioned financial support by Ministry of Social Security and Labour of Republic of Lithuania, and local municipalities (projects funded by these institutions). Premises are provided by municipalities.

There is the need for more funding in order to provide consultations for clients who need more support.

As the *most useful* there were mentioned: financial support, sharing of experience between the institutions, trainings in the field.

Romania

Support Received by Professional Staff:

- Support from the authorities (DGASPC, ANES-National Agency for Equal Chances, and



NGOs), through information materials, courses.

- Participation in international projects and access to information materials developed in this context for victims of domestic violence.
- Having a well-trained multidisciplinary team that supports the work.

The most useful:

Desirable would be the establishment of joint teams of intervention / support for victims of domestic violence by creating mechanisms of immediate response for victims.

- Grants are useful in this area to establish social services or activities for these cases.
- The existence of an online platform for professionals and victims of domestic violence, in which they can consult various materials, it can be debated among specialists, but also between them and the victims.
- Forming groups - victim support.
- The possibility of accessing a program of national interest in order to improve the activity of the Centre.

Spain

Interviewees with the professionals have showed that they are from the social field (social workers, lawyers, psychologists, etc.) and they have been trained in the field of Gender Violence. Most of the interviewees have access to different trainings offer by particular and public institutions, such as master degrees in GV and equality, courses, seminars, training in GV from de Asturian Women's Institute, trainings in GV for the bar association and trainings in gender perspective and gender violence from the administration.

The support comes from the networks with institutions as Asturian Women's Institute (Instituto Asturiano de la Mujer), from Women's Advisory Centres, from Employment offices, the local Police, City councils and External resources (associations, social services, health services, etc.).

Support received and most useful:

- From Instituto Asturiano de la Mujer (IAM)
- From Women's Advisory Centres
- From Employment Offices
- From the local Police

Overall conclusions:

Training possibilities and Support for Professional Staff working in the field of Domestic Violence is different in partner countries. There is good *preparation* to work and the number of *training* offers for further qualification in the field in Austria and Germany. Interviewed professionals in Lithuania as well stated that professionals have had specialised trainings in the field of DV and some of them have huge experience. There are lot of possibilities for trainings (but some would like to have more). Interviewees with the professionals in Spain have showed that they have been trained in the field of Gender Violence. Most of the interviewees have access to different trainings in the field. In Bulgaria all interviewed professionals have found their own way of entering the field of work. There are no unified standards in. Different running EU funded projects on the topic are useful for the professionals in the field. There was a clear diversity in the level of training undertaken by front-line staff and in the support they receive, working with survivors of domestic violence in Ireland. It was evident that a lack of routine or standardised training, even within the same field such as social work, may present as an obstacle when staff are addressing a case. As they may come with a different professional perspective than a colleague based on their training received. All professionals interviewed showed interest in receiving more training and access to resources.

Regular supervision and inter-vision is offered inside the organisation to support the team in Austria. Regular supervision for all staff members is a must in Germany. In Lithuania professionals have inter-visions, but there is lack of external supervision. Consultants as well are actively involved in self-learning, looking for information and answers by themselves in Lithuania.



The support mentioned in researched countries differ:

In Austria the main support is networking with other institutions working in the field – a number of organisations and initiatives.

In Spain the support comes from the networks with institutions as Asturian Women's Institute (Instituto Asturiano de la Mujer), from Women's Advisory Centres, from Employment offices, the local Police, City councils and External resources (associations, social services, health services, etc.).

Support Received by Professional Staff in Romania is support from the authorities (DGASPC, ANES- National Agency for Equal Opportunities, and NGOs), through information materials, courses; as well participation in international projects and access to information materials developed in this context for victims of domestic violence; Having a well-trained multidisciplinary team that supports the work.

In Lithuania as the *most useful* there were mentioned: financial support, sharing of experience between the institutions, trainings in the field.

In Ireland a strong network of support between colleagues arose as the main support received by social workers and family support workers. They also outlined supervision with their manager or an outside professional as another support received. But there is not so good situation in other institutions for other professionals.

In Bulgaria a very useful resource is the shared support from more experienced colleagues.

3.2.3. Suggested Improvements or Support, Professionals would like to Receive

Austria

There might be some requirements **to improve networking and cooperation**. Some of the interview persons mentioned:

- In the cooperation with the police - but especially with other public institutions and courts - the role of the victims is often neglected. The focus is on the perpetrator and respective persons (lawyers, judges, police staff etc.) often show a lack of empathy and sensitivity when interacting with victims of domestic violence. In this field more awareness rising about the specific role of these victims/survivors would be necessary in order to treat them with more respect and empathy.
- Especially in rural areas there is the need for institutions which offer support and work with perpetrators.
- The increasing number of cases of DV in migrant/refugee environment is a challenge (resources for translation, intercultural issues and legal framework).

Bulgaria

The following **resources were identified as necessary** and relevant for the counsellors working with survivors:

- Networking with other professionals and also with other relevant stakeholders and institutions in the process of supporting DVs survivors
- Having the opportunity to share your experience and to have your approach confirmed by other experienced professionals
- To have a COMMUNITY of people, working in the field
- Unified Working Standards
- More opportunities for experiential learning – to step into the shoes of the survivors through role plays and other exercises
- Mutual support
- Intuitive database of tools
- Awareness of the limits of the counselling process – what is achievable and what is NOT, by whom and at which stage.



- A holistic approach and knowledge about Empowerment
- National policies for the Family Values (that care for the roots of prevention of domestic violence) (IO6)

Germany

- Further training is needed for dealing with different ethnic groups. Interviewees mentioned that, with the newly arrived high number of refugees in Germany, there is an increase in cases of domestic violence. The institutions lack resources and also competences such as intercultural communication. On the other hand, there is a need for making refugees and migrants familiar with services and legal framework in the field of DV.
- Interviewees state that there is still a general lack of awareness in society about domestic violence and the dynamics in partnerships where domestic violence exists. Still a lot of myths prevail.
- Certain target groups are very difficult to enrol in training. Two interviewees stated that they have experienced that relevant target groups such as prosecutors or judges are difficult to enrol in training offers dealing specifically with partner violence, thus making it difficult to overcome myths, prejudices and ignorance to better support women victims of partner violence and to break sustainably the cycle of violence.
- In the rural area the offer for professionals is rather little – here blended learning applications would be an ideal offer.

Ireland

It was suggested that a formalised or standardised system and pack would improve the support system and the responses by professionals when working in domestic violence. A pack with set out resources and a specific model that staff should take when dealing with a situation was highlighted as a way that would improve the care received by survivors and the communication and expertise of staff in this area.

Support/Improvements Outlined:

- Domestic violence training
- Informal counselling skills
- Consistent training across the staff team (to use the same model)
- Refresher training courses
- Pack with scenarios, exercises, healthy relationships, manual etc.
- Well supported network system
- Team de-brief
- Self-care or mindfulness
- Efficient standardised systems
- Specific 'how to implement' guidelines from the Istanbul Convention
- Network base

Lithuania

There is the need for improvements:

1. There is a lack of shelters for DV survivors in Lithuania. This is needed in order to prepare for the changes in their life (at least half a year period is needed). In some towns there is no even the shelter for person to stay immediately after the DV was experienced. There is the problem with social housing if DV survivor would like to separate from the perpetrator, then it would be the problem as the queues are too long.
2. There is lack of financial support in order to fund the work of the professionals working in this field: psychologists, lawyers in order to fully meet the needs of DV survivors. As well the funding is needed to reach the clients in remote areas.
3. There is the lack of sharing the information between police and SHC.
4. There is the lack of supervisions from the external consultants/professionals as supervisions usually are provided among the colleagues.
5. *Prevention:* Some of the interviewees mentioned that there is the need for better prevention of



DV. Work with DV survivors should be an integral part together with preventive work.

Preventive work should be done with:

- Youth - starting from kindergartens, schools. Prevention should concentrate on the family models as well as women rights, gender equality.
- Families – it is important to work with families and to form the right attitudes and encourage them to apply for help when it is needed in order to deal with crises in a family.

6. The *early intervention* is very important as well – to work with crisis situations in the families.

7. The *programs aiming to help DV survivors to integrate into the labour market* are much needed as these women usually are economically dependent on their husband and they need support.

Romania

There is need for the changing of attitudes and the improving of local intervention.

- It is a necessity for the support of local authorities for the victims in preventing and combating DV, in solving cases of DV.
- The lack of a coherent and workable regulatory framework, lack of uniform working practices, insufficient development of services, lack of specialists.
- Conducting a national program for training specialists involved in prevention of DV and in providing services for victims (social workers, psychologists, legal advisers, doctors, policemen, judges, priests).
- Funding for organising events promoting nonviolence and activities / actions of support for people facing domestic violence to overcome the crisis.
- Increase the number of places for victims in emergency centres.
- Improvement / specialization of personnel who come into contact with victims of domestic violence.

Spain

Support needed:

- Economic funds.
- Coordination with other professionals and colleges.
- Specific trainings in the field of DV. For example, one training about How to make requests from government, or about the emotional intelligence of DV survivors.

Overall conclusions:

As we can see the professionals working in the field outlined a lot of necessary changes that should be made in order to improve the services for DV survivors. The suggestions vary from changing attitudes, improving the trainings for professionals and services to DV survivors.

We can see similar issues as well different suggestions, relating to the country situation.

Summarised improvements suggested by the professionals:

- In the cooperation with public institutions, courts, etc. more awareness rising about the specific role of these victims/survivors would be necessary in order to treat them with more respect and empathy (AT).
- There is lack of institutions which offer support for DV survivors and work with perpetrators (AT, DE, LT) in rural areas
- In Austria and Germany there is the challenge related to the high number of refugees. Further training is needed for dealing with different ethnic groups. With the newly arrived high number of refugees, there is an increase in cases of domestic violence. The institutions lack resources and also competences such as intercultural communication.
- There is still a general lack of awareness in society about domestic violence and the dynamics in partnerships where domestic violence exists. Still a lot of myths prevail (DE).
- Certain target groups are very difficult to enrol in training, such as prosecutors or judges are difficult to enrol in training offers dealing specifically with partner violence.

The following **resources were identified as necessary** and relevant for the counsellors working with survivors (Bulgaria), but actual in other countries as well (Lithuania, Spain, Ireland, Romania):

- Networking with other professionals and also with other relevant stakeholders and institutions in the process of supporting DV survivors.



- Mutual support.
- External supervisions.
- Unified Working Standards. It was suggested that a formalised or standardised system and pack would improve the support system and the responses by professionals when working in domestic violence (IE).
- Database of tools.
- Specific trainings in the field.
- Financial support.

There is lack of shelters for DV survivors in Lithuania and Romania.

There is the need for better DV prevention. Work with DV survivors should be an integral part together with preventive work. Preventive work should concentrate on: Youth and Families.

There is need for the changing of attitudes and the improving of local intervention. The lack of a coherent and workable regulatory framework, lack of uniform working practices, insufficient development of services, lack of specialists (Romania).

3.2.4. Professionals' Main Goal and their suggested Key Competencies needed in the work with DV survivors and to empower them

"Empowerment does not mean solving the client's problem, but rather finding the solutions and helping them discover them on their own (Bulgaria)".

"Empowerment is to encouraging clients to solve their problems, to make them believe that they can defend themselves and solve their problems (Lithuania)"

Austria

Main goals:

- Main goal: help women to reach a life free of violence;
- To support them in a psychological way, to help them to deal with their emotions and their fears;
- To strengthen their consciousness;
- To support them in case of a trial.

Competences needed for the counsellors:

- To offer guidance and provide trust
- Legal know-how
- Psychological know-how
- Communication
- Empathy
- Sensitivity
- To respect these women
- To provide support
- To provide empowerment
- Networking competence
- To be open-minded
- To show appreciation

Bulgaria

Main goals:

- To transmit the convincing feeling that the survivors have their rights since the clients often have an internalised limiting belief of a feeling of guilt.
- To be able to see the reality of their Client from her perspective and recognise the opportunities to leave this current reality in order to enter a new, healthy one.
- From a psychological point of view, to be able to identify any deficiencies of relevant



internal (and external) resources and to help in finding possible ways to fill these gaps.

- To know and to be able to encourage a process of self-delegation and internal focus of control in the Clients.
- Ability to work on multiple 'layers' – emotional, behavioural, cognitive and even physical;
- Transmit and increase the feeling that they have control over their lives.

Competences necessary for the counsellors:

- Empowering and inspiring
- Devotion and motivation to get to the core of the problem
- Internal need to work on this matter
- Ability to identify the RESOURCES of the client
- Emotional Intelligence
- Emotional Regulation
- Knowledge on Personality psychology
- Empathy
- Proactivity
- Flexibility
- Trust in the Client
- Individual approach towards every client
 - Every woman enters the process with different EXPECTATIONS about the approach that she should receive;
 - Ability to identify the specific GOAL of the client in the process of counselling;
- Giving the Client the feeling of Equity
- Active listening
- Handling emotional dependency

Germany

Main goal of the work with survivors of DV:

- Risk assessment and risk management.
- Establish a safety plan with the women and their children.
- Provide ad-hoc support in case of acute risk (e.g. shelter).
- Inform on available services.
- Support women in dealing with their emotions and fears.
- Support women and empower them to make decisions on their way out of the violent situation.
- Provide (information on) resources, where necessary (housing, childcare, health services etc.).

Key competences that are needed to work with DV survivors and to empower them:

The list does not include the obvious professional competences such as legal knowledge, psychological know how, competences in trauma therapy etc. but refer to the competences that each professional dealing with DV survivors should have:

- Empathy
- Active listening skills
- Communication skills
- Respect
- Ability to empower
- Networking competences
- Building trust
- Open mindedness
- Sensitivity
- Intercultural awareness and competences
- Appreciation
- Assertiveness
- Ability to be non-judgemental

There is a need for regular updates above all when it comes to e.g. legal aspects – changes in the



legal framework might entail a need for changing the intervention practice. Also, interviewees confirm that they keep themselves updated and regularly meet with other professionals e.g. in round tables or networking meetings in order to exchange on good practice, approaches, discuss high risk cases, identify gaps in terms of support or processes, and find common approaches to close these.

Ireland

All professionals highlighted the need to assess the safety of the survivor and their children, identify immediate risks and to use 'Safe Plans' as part of their work.

Key competencies outlined including listening skills, empowerment, building trust, compassion, respect and supporting the survivor in terms of their individual needs.

Main Goals Included:

- Asking the survivor what their goals are.
- Assessing safety.
- Empowerment.
- Strengthening self-confidence.
- Listening and supporting them.
- Identifying immediate risks.
- Housing support.
- Custody and access support (for their children).
- Referring and engaging them with other services.
- Supporting positive change.
- Supporting them to find their solutions.
- Medical assessments.
- Identifying future risks.
- Improving the quality of their life.

Key Competencies needed for the counsellors:

- Informed of services and supports
- Confidentiality
- Listening skills
- Risk assessment
- 'don't cause more harm'
- Local knowledge of services and supports
- Gaining trust
- Good communication skills
- Empathy
- Advocacy
- Non-judgemental
- Believe their story
- Be calm
- Outlining 'this is my role and these are my boundaries'
- Task centred empathy
- Respect
- Positive regard
- Compassion
- Open Minded

Lithuania

The main goals when working with DV survivors:

The main goal is –to reach life without violence.

- To help women during the crisis; to empower them to overcome crisis.
- To enable clients to change their behaviour and attitudes towards violent relationships.
- To help women understand their situation and take appropriate decisions.
- Analysis and understanding of DV survivor emotional state.



- To provide services - according to the situation, needs and possibilities.
- To educate people about their rights, to make them aware of their value as a human being, to form an attitude that any form of violence is unjustified violation of their rights.
- Educate people, what is violence, how to recognize signs of violence. To look for the best solution for each individual.

Basically: Empowerment, providing information and support.

Key competences needed to empower survivors of DV

- Respect for each person
- Communication skills
- Risk and situation assessment
- Listening skills
- Empathy
- A sincere desire to help people
- Communication and conflict resolution skills
- Knowledge in the field of DV
- Legal knowledge
- Psychological knowledge
- The understanding of DV survivors' emotional state and their needs.

Romania

The main goals when working with DV survivors:

- Providing immediate and medium-term protection of the victim
- To be aware for the survival of DV of her situation and identification of measures needed to overcome this situation.
- Removing the victim of traumatic environment and removing the aggressor.
- Enabling the victim's personal resources in order to take the decision (empowerment).
- Facilitating access to all services

Key competences needed to empower survivors of DV

- Empathy, experience in working with survival
- Medical counselling to exit from the suffered shock Providing support
- Active listening, observing customer focus, providing information.
- Professional knowledge (psychology of the victim and the aggressor, the legal framework, institutions and specialists involved in a network),
- Communication competences;
- Specific competences for social workers.
- Taking the victim's complaint and guide her to services/ institutions to ensure its support and protection.

Spain

The main goals when working with DV survivors:

- To help overcome the economic difficulties
- To help the survivors to enter the labour market
- To make them recognize the problem and see themselves as survivors rather than victims
- To overcome the guilt
- To help them break up the relationship with their abuser and, if that is the case, move out the common home
- To create a comfortable space for the survivors to express themselves
- To make them feel listened and valued
- To empower them and increase their self-esteem

Competences necessary for the counsellors:

- Active listening



- Assertiveness
- Empathy
- Proactivity
- Trustworthiness
- Emotional Regulation

Overall conclusions:

Although the main goals presented by the interviewed persons are described in different words, mainly in all researched countries the professionals working in this field focuses on the same goals:

The main goals when working with DV survivors:

The main goal is: to help women reach life free of violence;

- Risk assessment and risk management.
- Establish a safety plan with the women and their children.
- Provide ad-hoc support in case of acute risk (e.g. shelter).
- Inform on available services.
- Support women in dealing with their emotions and fears.
- To help women during the crisis.
- Support women and empower them to make decisions on their way out of the violent situation.
- To enable clients to change the behaviour and attitude towards violent relationships.
- Provide (information on) resources, where necessary (housing, childcare, health services etc.).
- To make them recognize the problem and see themselves as survivors rather than victims.
- To support them in case of a trial.
- Listening and supporting them.
- To overcome the guilt.
- To empower them and increase their self-esteem.
- Referring and engaging them with other services.
- Transmit and increase the feeling that they have control over their lives.
- To help overcome the economic difficulties.
- To help the survivors to enter the labour market.

Key competences that are needed to work with DV survivors and to empower them:

(all competences which were listed in partner reports):

- Empathy (7)
- Active listening skills (6)
- Good Communication skills (5)
- Legal know how (4)
- Psychological know how (4)
- Building trust (4)
- Respect (4)
- Ability to empower and inspire (3)
- Open mindedness (3)
- Emotional Regulation (3)
- To provide support (3)
- Networking competences (2)
- Sensitivity (2)
- Appreciation (2)
- Assertiveness (2)
- Proactivity (2)
- Ability to be non-judgemental (2)
- Local knowledge of services and supports (2)
- Trust in the client/ Believe their story (2)
- Competences in trauma therapy



- The understanding of DV survivors' emotional state and needs
- Conflict resolution skills
- Intercultural awareness and competences
- Confidentiality
- Risk assessment
- Advocacy
- Positive regard
- To offer guidance
- Compassion
- Devotion and motivation to get to the core of the problem
- A sincere desire to help people/Internal need to work on this matter (motivation)
- Ability to identify the RESOURCES of the client
- Emotional Intelligence
- Knowledge on Personality psychology
- Flexibility
- Individual approach towards every client
- Giving the Client the feeling of Equity
- Handling emotional dependency
- Counselling to help exit from the suffered shock
- Specific competences for social workers.

3.2.5. Professionals View of Training Received by other Front-line Staff and Prevention

Austria

In terms of **prevention** the interviewed professional think that there should be more training and qualification for other groups of profession – especially in the **health sector** and in **schools**. Topic should be made free from taboo – people don't want to talk about DV and they don't want to be confronted with the topic. On the other hand victims feel ashamed to talk about it – they often do not go to the hospital but to their **family practitioner**. Especially this professional group should be trained better – as well as their assistants. Another group that definitely would need more qualification in working and interacting with victims/survivors of DV are **judges and lawyers**. The interviewed persons think that further training for employers on this topic is very risky and delicate: on the one hand because there a relationship of dependency and on the other and they might not be interested to be responsible for a very private issue of their employees.

Bulgaria

- A holistic awareness rising approach is necessary – schools, kindergartens, police, hospitals, employers.
- The society must start speaking OPENLY about the topic, because it is still perceived as TABU.
- OPEN dialogue is necessary – if people get familiar with examples of other DV survivors, they would start reframing their way of thinking and start believing that one might have been a victim, but one could also move out of this role and build a new life.
- Role models and open storytelling necessary.
- Information on the topics:
 - How does violence emerge – one is not born an abuser. Passed on from generation to generation.
 - How to recognise the victim of domestic violence.
 - How to TALK to them.
- Information for the HR Departments in organisations and its distribution among the organisation.
- Test “Am I informed enough?”, “Am I a victim?”



Germany

- According to the interviewees not all professionals that deal potentially with victims of DV are specifically trained – e.g. not all health care professionals might recognise signs and symptoms of DV and thus do not (re)act accordingly, nor do they communicate accordingly with the victim (e.g. in cases where the women do not reveal that their injuries result from physical violence, that is.). The same applies e.g. to the youth welfare office – these professionals do not deal with cases of DV at the first place but, of course, they can have abused children or women among their clients and do not recognise them. This means that those professionals that do not deal with cases of DV at the first place, but are potentially in contact with them, often lack a general awareness of the phenomenon. They would need awareness training on signs and symptoms, general communication skills as well as knowledge on the available service in their community in order to be able to address the victim there.
- For employers and the society as a whole there is still need for awareness raising.
- **Prevention:** Due to the prevalence of the problem, certain groups and institutions are likely to be confronted with cases of domestic violence. It is very likely that school and kindergarten teachers are confronted with cases of child abuse or of domestic violence. The same applies to general practitioners, professionals in health services and hospitals, employees in the youth welfare office or social offices as well as trainers in sport associations etc. It would be very useful to raise awareness for the topic and convey the message to these groups that they do not need to intervene themselves – they even should not intervene themselves, as this might put them at risk – but they should know where they could get support from instead of turning a blind eye to the situation.

Ireland

Most of the people interviewed were not sure of the specific training undertaken by other professionals or other front-line staff in domestic violence. They stated that it can depend on an individual's own efforts and interest in the area. There was consensus that more communication and networking between services and professionals would be beneficial. This may be done through a national framework and engaging with more local supports such as community development organisations.

Lithuania

Trainings for other front-line staff or service providers (employers, police and hospital staff) are necessary on the themes: how to recognize violence, how to communicate with the DV survivor and where to apply for help.

It would be very useful for police officers to have a specific tool - plan for actions in the case of DV. The appropriate behaviour and the ability to establish appropriate contact with the participants of the situation of DV is very important. The respectful behaviour is very important. Police officers are the first dealing with DV cases and they need specific training on domestic violence. The trainings needed:

- How to behave in order to protect the DV survivor's self-esteem.
- An in-depth briefing/active listening skills and the involvement of DV survivor in decision-making.
- Risk assessment
- Psychological resilience.
- Appropriate behaviour with DV survivor, communication skills.
- Community Engagement.
- Confidentiality.

There is the problem that often police officers lack knowledge about domestic violence. Police officers do not respond to other than physical violence. In these cases woman's complains about psychological violence stays underestimated.

The next professionals, who deal with DV cases, are investigators: there is lack of investigators, mostly there are young researchers, with heavy workload and little experience, thus their



competence is not yet high. Some of them do not even know some of the provisions of the law. The investigators as well need the specific trainings in this field:

- Knowledge in legislation.
- Risk assessment.
- Psychological knowledge.
- Communication skills.

Romania

In Romania DV was a taboo, we were not accustomed to discuss about it. But in the last 20 years we develop services in all 42 counties, certainly not enough, especially in the rural areas. We have an updated European legislation linked to equality of gender, human rights. But we cannot speak about a specific legislation for **prevention of DV**. The legislation and services are improving permanently.

So, some topics to be improved:

- Updating information / knowledge / skills / abilities must be made permanent, both in terms of legislation, but also in terms of identifying sources of funding to develop existing services and setting up new services.

For example, at the moment there are DV services for victims, but not for people surviving crisis, or for abusers

- Each of the institutions to intervene to prevent and combat DV knows their scope of action, but requires training designed to intervene in domestic violence (on causes, types of expression, intervention, etc.)
- Training in psychology of the victim
- Introducing even in schools this very sensitive topic through games.
- case studies;
- Exchange of experience.
- Skills and competences in violence mandatory at a minimum of quality standards in the field.
- In terms of cooperation between institutions that have to do prevention the preparation of these institutions is not at the best level, this notion is quite recent in the organizational culture.
- For employers, police, hospitals, they do not seem to be prepared in this matter.

Spain

Challenges in terms of prevention

- Invest in both formal and informal education of children against gender violence and gender inequality. It is important to start with prevention in the early stages of the individual's life, as this is where the gender stereotypes and gender inequalities begin to forge and internalize. In this sense, it is necessary to invest time and money in the co-education of children, sensitizing them on gender inequality and violence.
- Invest in both formal and informal education of families against gender violence and gender inequality. Families are the first of the socializing agents of childhood, through which children learn the values of society. If the family is not sensitized in terms of gender inequality and violence, it may be that the education of these children is not equal. In addition, the family is one of the social supports of the survivors of DV so it would be advisable that they were formed in these aspects.
- Implement violence against women law. Although the law has been in force since 2004, it would be useful to promote its application, since in many cases it is not properly implemented.
- Fight gender stereotypes
- Specific training for public employees and employers on gender equality and gender violence. As for public employees, they currently have very little training in this aspect, which reduces the possibilities for these people to know how to act if they encounter a case of gender violence. As for the employers, *it is necessary that they receive training* in this line so



that they know how to apply equality policies on employment.

Overall conclusions:

According to the professionals, participated in the interviews in researched countries, there is the need for more training and qualification for other groups of professionals dealing with DV: *policemen; judges and lawyers, investigators.*

Due to the prevalence of the problem, certain groups and institutions are likely to be confronted with cases of domestic violence (schools and kindergarten teachers; to general practitioners, professionals in health services and hospitals, employees in the youth welfare office or social offices as well as trainers in sport associations etc). Those professionals often lack a general awareness of the phenomenon. They would need awareness training on how to recognize violence (on signs and symptoms of DV), how to communicate with the DV survivor as well as knowledge on the available service in their community in order to be able to address the victim there.

It would be very useful to raise awareness on the topic and convey the message to these groups that they do not need to intervene themselves – they even should not intervene themselves, as this might put them at risk – but they should know where they could get support from instead of turning a blind eye to the situation.

Topic should be made free from taboo – people don't want to talk about DV and they don't want to be confronted with the topic. On the other hand victims feel ashamed to talk about it – they often do not go to the hospital but to their *family practitioner*. Especially this professional group should be trained better – as well as their assistants.

The society must start speaking OPENLY about the topic. OPEN dialogue is necessary. Role models and open storytelling necessary and information.

In terms of prevention a holistic awareness rising approach is necessary – schools, kindergartens, police, hospitals, employers. It is very important to:

- Invest in education of children and families against gender violence and gender inequality.
- Fight gender stereotypes.

3.2.6. Obstacles Faced by Survivors

Austria

Problems for survivors to find their way back into "normal" life:

- Economic/financial dependency of their former partners/husband
- Lack of mobility
- Lack of self-esteem
- Fears to change the situation
- "What do the others say?" (the opinion of the family, neighbours, social environment has a high influence)
- Continuous harassment of the perpetrator
- They feel guilty
- To leave the dynamic of the violent relationship

Bulgaria

- Emotional traumatic bonding with the abuser – A long process of dependency and developed habits and beliefs. In such cases of emotional bonding, the whole cognitive pattern is dependent on emotions.
- A built-up feeling of prestige and perfectionism – a significant saboteur. Due to this feeling, the Clients cannot accept what happened to them so they get defensive and they are in denial.
- The prejudice that their husband must be around for a lifetime and divorce is something bad



(rooted in the cultural specifics of some nations).

- Low capacity/lack of skills and habits for handling everyday life, illiterate.
- Low/missing computer literacy.
- Passive attitude.
- Lack of self-esteem.
- Isolation.
- "Learned helplessness" – institutional past and a vicious circle, encouraging the learned helplessness.
- A lack of structure in their daily routine.
- Alcohol abuse at times as well as other addictions.

Germany

- Lack of self-esteem
- Feeling of guilt and blaming themselves for the situation
- Lack of resources
- Lack of mobility
- Isolation
- Taking the children away from the father
- Lack of coping strategies
- Fears to change their situation and the one of their children
- Fear of continuous harassment of the perpetrator
- Losing their ties and relationships

Ireland

Obstacles faced by survivors when trying to get back to their lives included; accommodation, finances, post-traumatic stress, and caring for their children. On a personal level, it was suggested they may also face feelings of 'they're not worth anything else', having no other choices, low self-esteem, and an acceptance that violence or abuse is 'just the way it is'. Survivors may also face issues due to self-medication, flashbacks, lack of support in caring for their children, and the fear of 'community perception' (within the Traveller community).

Lithuania

- Usually DV survivors face the challenge that there are no possibilities to live separate from perpetrator. DV survivors need secure place to stay, as there is the need to move away from the perpetrator. For example, in Kaunas, in Marijampole there is no place for women where to stay. Some towns have such shelters (Vilnius, Klaipėda, Kaunas region) - it depends on the municipality). There are shelters for children in Kaunas, but there is no place to stay for women. It is difficult to rent a flat as women lack financial resources.
- DV survivors need to adapt to the new situation, and for that at least half a year period is needed (to register to the labour market office, to find a job, handle social benefits, to register children to school, kindergartens).
- DV survivors experience lack of finances and situation of unemployment. They need the job or social benefits in order to gain financial stability and independence.
- Lack of education and competences, some women do not have a specialty/profession or even if they have it - usually they have lack of work experience as they have been unemployed for a long time.
- Alcohol addiction.

Romania

- Victims of violence emerge hardly in identifying housing and jobs. Outside services developed by DGASPC, **very few support services** for victims of DV are available.



- Training places for children.
- Issue of psycho-emotional behaviour.
- Financial support, counselling, social counselling, legal advice.
- **Lack of support from extended family / or absence of a family.**
- **Lack of integrated services addressed to survivors of VD (accommodation, therapy, training, employment).**
- **Concrete support - implementation of national programs addressed exclusively to survivors and to develop long-term integrated services for them.**
- **The suggestion from interviewed professional was that “it would be necessary to develop a national program addressed to DV survivors who provide them service packages (home, skills for work integration, job, etc.)”.**

Spain

- Economic support.
- Employment.
- Autonomy both economic and psychological.
- Reconciliation with their relatives and friends. During the process of DV, many women are distant and isolated from their family and friends. After the break with the mistreatment relationship, the survivor may be afraid or troubled to reconcile with their loved ones.
- Insertion in the community social life.
- Lack of self-esteem.
- Instrumentation of children. In the DV it can be the case that the abuser uses children as a tool, either for the woman does not leave or for forgiveness.
- Overcome the stigma.
- Romantic love melancholy. DV survivors may experience feelings of nostalgia about their abusive relationship. This is due to the melancholy of “having something”, of having a stable relationship. In these cases, DV professionals should provide emotional and psychological support to eliminate that feeling.

Overall conclusions:

The main problems mentioned for survivors to find their way back into “normal” life are:

- Economic/financial dependency of their former partners/husband (5), there is the need for financial support.
- Lack of self-esteem (5).
- Difficulties to find accommodation in order to live separate from perpetrator (3).
- Unemployment (3);
- Lack of education, competences, they do not have a specialty/profession or even if they have it - usually they have lack of work experience as they have been unemployed for a long time (3)
- Isolation (3).
- “Learned helplessness” (2).
- Alcohol abuse at times as well as other addictions (2).
- Lack of mobility (2).
- Fears to change their situation and the one of their children (2).
- Feeling of guilt and blaming themselves for the situation (2).
- Fear of continuous harassment of the perpetrator (2).
- Challenge to leave the dynamic of the violent relationship / Emotional traumatic bonding with the abuser.
- The prejudice that their husband must be around for a lifetime and divorce is something bad (rooted in the cultural specifics of some nations).
- Taking the children away from the father.
- Lack of coping strategies.
- Passive attitude.
- Post-traumatic stress.



- Lack of support in caring for their children.
- The fear of 'community perception' (within the Traveller community).
- Lack of support from extended family / or absence of a family.
- Overcome the stigma.

3.2.7. Support which needs to be offered to survivors

Austria

- Provide psychological support.
- Work on safety plans.
- Facilitate them to other supporting services (housing, training, childcare).
- Preparation, guidance and support in case of a trial.
- Empower them.
- Work with them so that they trust in themselves, improve their self-esteem.
- More opportunities and funding for psychotherapy is necessary!

Bulgaria

- Supporting the development of the following competences
 - Working towards breaking this vicious circle of violent events;
 - Working on their needs and values;
 - Self-delegation
 - Self-respect
 - Self-awareness and confidence in their own strengths
 - Social and communication skills
 - Time management in terms of self-organising one's own day
 - Labour market knowledge
- Breaking limiting beliefs and self-sabotaging behaviours;
- Empowering them;
- Working on their self-esteem.
- More opportunities and funding for individual counselling and therapy are necessary!

Germany

- Psychological support.
- Risk assessment and management.
- Safety plan for the woman and their children.
- Refer to other services.
- Support in getting a restraining order or, more general, legal support.
- Support in pressing charges.
- Empowerment.
- Support in making decisions.
- Support in finding housing, training, job, childcare etc.
- Trauma therapy.
- Etc.

Lithuania

Competences that survivors lack and should be trained:

- Ability to recognise the violence.
- Emotional intelligence.
- To strengthen their self-esteem and assertiveness, ability to protect their rights.
- Knowledge about legislation.
- Social skills.
- Communication skills with children.



- Motivation to make changes in life - if woman makes an effort and she was not successful, the motivation decreases.
- Effective communication in pair, in family, conflict resolution skills in order to avoid violent relationships.

Support that need to be offered to survivors:

- Strong support is needed for such women to help/empower them to (re) enter labour market. There is the need to have the program and trainings for DV survivors in order to help them to integrate into the labour market.
- A person needs to have the information about the support the institutions provide and possibilities to apply for this support.

Romania

- Need of acquiring professional competences. There are no national training programs designed exclusively for DV survivors and the offer of training courses is generally poor at county level (free of charge courses organized by specialized institutions like Regional Agencies for Employability).
- Confidence in themselves.
- Efficient communication.
- Avoid conflicts (quarrels).
- Inability to establish its medium and long-term goals.
- No longer trust that they will succeed in life.

Spain

- Psychological support.
- Economic support.
- Empowerment.
- Development and Strengthening of Self-esteem and self-value.
- Social skills. It May be through training or in daily work with survivors.
- Acquisition of skills demanded by the labour market.
- Organization of the new daily life. After the break of violent relationship, the survivor must reorganize her daily routine, which will change in many ways.

Overall conclusions:

Support of the development of the following competences is needed:

- Working towards breaking the vicious circle of violent events.
- Working on their needs and values and goals setting.
- To strengthen their self-esteem and assertiveness, ability to protect their rights.
- Improving social and communication skills.
- Ability to recognise the violence.
- Work on safety plans.
- Facilitate them to other supporting services (housing, training, childcare).
- Empower them.
- Emotional intelligence.
- Motivation to make changes in life;
- Time management in terms of self-organising one's own day.
- Labour market knowledge.
- Knowledge about legislation.
- Communication skills with children.
- Effective communication in pair, in family, conflict resolution skills.
- Preparation, guidance and support in case of a trial.

More opportunities and funding for individual counselling and therapy are necessary!



3.2.8. Experience in work with Online Platforms

There is different experience of using e-learning, online platforms among professionals from partner countries. As well the need for using platforms in the work with survivors as well differs.

Austria

- Despite one single case when a person experienced e-learning during her studies, there is no experience in working with online platforms in their daily work among the interviewed persons.
- Some intervention centres offer online contact options but report that this form of communication is not used very often.
- There is no demand for using platforms in the work with survivors of domestic violence, since this work is based on personal relationship and face-to face interaction is a crucial element of their work. Apart from this using social media is a delicate topic – also linked to security aspects.

Bulgaria

- Generally awareness that the Client is always researching her problem on the internet and looking up for shared experiences.
- Already use Skype.
- Some clients have created online groups of shared interests as part of their counselling process.
- One of the interviewed shared that she has used a real computer game in the counselling process, to navigate the focus of her Client.

Germany

- The four interviewees reported that they have not used any e-counselling in their work. But they confirm that there are offers such as online chats or forums (<http://www.gewalt-los.de/chat/>) where e.g. victims of violence can exchange with others about their experience, or also online chat rooms where victims can meet with a counsellor, also anonymously if they wish.
- They reported that they have not used any e-learning or blended learning modules for further training yet. But as some of them were involved in the PACT project, they confirm that this was the first and only e-learning offer that they have actually used. They can see the benefits of e-learning or blended learning offers above all in rural areas where people would have to travel long distances. On the other hand, they state that the interaction with other learners is important. They do not see in how far pure e-learning could replace the human aspect in the training. Above all in the field of DV there is a strong need for exchange and discussion.

Ireland

- Specialists who were interviewed do not actively engage in using online platforms as part of their work. They mentioned different websites as resources and detailed printing information sheets or best practices for use with clients.

Lithuania

- Some professionals have experience of working with online platforms.
- The online platforms would be useful for professionals if: there would be the possibility to find the answers to the questions as fast as possible, and in that case the information about the legislation should be updated constantly.



Romania

- None of the professional did practice this type of information.

Spain

- General use of internet as a source of information and to communicate with the survivors by email.
- Use of the platform "Avisame Service" by one of the counsellors.

3.2.9. What EMPROVE! training program should contain in order to be attractive for professionals

Austria

In qualification and training for professional working in DV an online e-learning platform could be an option **but**:

- It has to be really interactive and flexible and quick responding – otherwise it will be useless.
- There is the risk that you will not use it, since it is "optional" and if there is no need to personal participation (like in face-to face training courses) then there is the danger of neglecting these training offers because of scarce time resources.

Bulgaria

- We should be able to express its importance in 3 sentences:
 - It takes a couple of clicks to find the materials;
 - It is beneficial because it saves time;
 - Gamification argument - useful motivation instrument.
- Many specialists do not have enough SPECIFIC GAMES AND METHODS to work with; the platform will include such.

Germany

- E-learning offers for professional working in DV could be an option if:
 - It can offer enough opportunities for exchange and networking among professionals – while keeping the privacy of the learners.
 - It can be accessed also in areas where the access to the Internet is restricted - in some areas (e.g. police, public institutions) Internet access is a real problem (security reasons).
 - It is attractive and offers an added value to existing offers that are available face-to-face.
 - It is easy and intuitively accessible and usable.

Ireland

- It was suggested that a potential app could be made to engage more staff and survivors with the future EMPROVE platform.
- The use of a 'hide screen' button was urged from all respondents to protect survivors while accessing any online information or platforms.
- To be practical, easy to ready and navigate, and offer support on a human level.
- It could have an emergency tool kit and specific steps that should be taken by professionals. It could consider issues such as alcohol and drug addiction as factors within domestic violence relationships and identify harm reduction techniques. The training programme may also include legal systems and group facilitation skills.



Lithuania

- The title (of the online training program) should be short and clear.
- It is important that such an e-learning platform would be in native language.
- It is important that the e-learning platform would be supervised by lawyer and psychologist in order to get the answers immediately.
- Information, where to apply for help – contacts in the country/region.
- The network of organisations active in this field.
- The possibility to share information with others.
- It is recommended to include to the e-learning platform the information about:
 - The practices in the fight against DV in other countries - effectively functioning examples.
 - The latest research that is relevant to this subject.
 - Innovations in legislation.
- There could be the space in the e-learning platform where professionals could share their experiences with other colleagues - the challenges they face, what helped most and jointly seek solutions.

It was suggested that there should be multiple levels of the training program - basic and then focusing on the specific areas.

Romania

- Interviewed professionals in Romania found it interesting for the specialists, but they consider that this way of empowering or professional improvement should contain case studies and small movies for specialists.
- All the interviewees mention **passive ways** of information, **not participative ones**. (This is one intervention from a professional about what "type of reference or training materials would you like to see available online": Guides. Brochures. Course support. Manual procedures, techniques and tools).

3.2.10. What would be needed to be included in the EMPROVE! training to empower survivors according professionals from project partner countries

Bulgaria

- The EMPROVE platform should offer prizes and recognition in order to MOTIVATE the survivors to use it – ideas to use vouchers for stores (with the sponsorship and support of these merchandisers) and other free gifts.
- Play a role in INFORMING the broad public – during the year there is only one Week Against Domestic Violence, not enough communication on the topic.
- Working with practically-oriented tasks which place the survivor in the active role – they think of possible strategies, solve problems, look for resources and support (being given guidelines on how to complete their tasks).
- It could include music and many pictures.
- Socialising functions and group activities.
- Intuitive access, similarity to the Facebook mechanics.
- Advertisements on Facebook – it is a social network, widely used among the survivors.
- Gamification scenarios that allow a user to work with the platform independently – great added value!
- CONFIDENTIALITY AND EASE of ACCESS – HIGH ANXIETY among the target group, they tend to escape if they sense a risk of getting caught.



Germany

- Human rights and gender equality.
- Prevalence of DV (they are not alone but the phenomenon is widely spread in all classes of society), some general aspect of DV and cycle of violence.
- Risk assessment and safety planning.
- Assessment of own needs.
- Reflection on own skills and competences.
- Job search tools.
- Active citizenship competences –enable them to take again actively part in societal life.

Lithuania

- There should be attractive design of the platform.
- There should be provided the examples/ stories of DV survivors who, have returned to the “normal” life successfully. The stories should be short, provided in a user-friendly style, the language used should be simple and clear.
- Everything should be very simple and understandable.
- Everything has to be explained in detail, step by step, specifically and clearly.
- All the information which is provided should encourage DV survivor and give her an understanding that everything is not as scary and difficult, and that the person is really able to cope with their problems, if she only will apply and receive the necessary assistance.
- In brief information should be provided about the law of domestic violence and where DV survivor can apply for help (contacts in all around the country); contacts of the specialized help centres, police, and medical examination.
- The possibility to write a question to an expert (lawyer, psychologist or other.), which would be answered as soon as possible.
- It is important the platform to be user-friendly, for example, people do not read long texts.
Recommendations to include:
 - Videos – which could broaden the understanding of the situation;
 - Possibility to share the stories;
 - Comments of the professionals.

Important/recommended themes for the survivors:

- Legal issues; knowledge of human rights;
- Psychological issues;
- The recognition of violent relationship; The forms of violence;
- How to react/ to act in such situations;
- Employment opportunities, training opportunities.

Ireland

Online Platforms Should Include for Staff and Survivors:

- Printable leaflets or programmes that can be used.
- Helpline numbers.
- Information on refuges and their respective rules for service users.
- Nearby amenities to refuges.
- Stories and scenarios.
- Information on different services.
- Case studies.
- Quizzes and tasks for survivors.
- 'Grey area statements'.
- Legal information.
- Services that are free and that have costs for service users.
- No violent or threatening images.
- Be comforting and non-threatening.
- Videos and auditory sections for those with literacy issues.
- Assessments.



- Step by step guide.
- Policy and procedures.
- Services by area and location (map).
- Peer led groups.
- Advice from other survivors.



4. Results from the focus groups with DV survivors

The focus groups with DV survivors were conducted in Lithuania, Romania and Spain. There were 3 focus groups through all partnership. The results are summarised below.

4.1. Summary of the answers from focus groups with DV survivors and overall conclusions

I. **The challenges faced by DV survivors on their way back to a “normal” life/return to working life and to independent life:**

There are such needs of DV survivors:

- To find the premises to live.
- To find a job.
- To acquire education, occupation or profession.
- Gain self-confidence; overcome fears to escape the violence relationship. To learn how not to get involved in the conflict. To learn to act differently, to change the understanding of the situation.
- To learn to take responsibility for themselves and start working. To dare to do what you want - be yourself.
- To recover psychological well-being.
- It is important to learn to recognize psychological violence, economic violence.
- To gain support from extended family.
- To get services for children.
- The need for services for aggressors (counselling centres) (in Romania).
- Correction of Law (only people who have been physically assaulted benefit from the protective order, not those who were abused emotionally / mentally) (in Romania).

'It is difficult to divorce the violent person because we experience the pressure to live within the family. Thus it is important - not to feel guilty; to disagree with humiliating treatment'.

According the research in Spain, in general, in the process of accessing working life and living an independent life, DV survivors strongly insist on the difficulty of having children in charge, that is, the problems of reconciling work and family life. On the other hand, they recognize that counselling and guidance by professional persons working in the field of gender violence (social services, specialized psychological care, employment counselling services of the public employment service), as it helped them to feel Supported, although they lament that with the passage of time these supports diminish.

II. **The support which DV survivors get:**

- Consultations in the Crisis centres, Help line for women.
- Legal counselling - assistance during the divorce.
- Psychological counselling provided for women and children as well.
- Social worker consultations.
- Food Bank services.
- Hosting in a specialized centres for victims of DV, order of protection.



Women are very satisfied with the assistance given. Particularly useful for them was a **self-help group**, which meets the women facing the same situation in life (Lithuania).

III. What additional support (counselling-mentoring-guidance) do women still need:

Quotations from the victims (Romania):

- "Although I left the centre for hosting DV victims, I still need and ask for psychological assistance for specific problems, legal assistance, at the DGASPC".
- "Even if I did not request hosting in a specialized centre, because I had where to stay, I received psychological and legal assistance."
- a reference person / mentor to support the person who has overpassed the crisis and to orient her on terms of social and professional integration (advice, information, relationships, referrals)

According the research in Spain, the supports DV survivors still need are those related to economic / labour support, to get a home and to lead a standardized life, especially those living in shelters.

IV. What would help women to feel better prepared for the next steps in their life:

Women feel that they are out of the labour market. Thus the trainings, consultations, information on what specialties are in demand would be helpful (career guidance) (LT). As well were mentioned (Romania):

- The possibility to gain professional qualification.
- Existence of a support group.
- Day care centre for children.

According the research in Spain, DV survivors assessing what they need to feel better all agree on psychological support, in addition to getting rid of the "battered woman label." Also, it is important to be heard by justice.

V. These trainings would be useful for women (they would like to get support with):

- Job search training;
- psychological training in self-confidence;
- Learning how to present themselves to the potential employer - how to prepare, what to wear during a job interview, what body language to use.(LT)
- Support to further attend professional courses - high school or post-secondary courses;
- Training courses in occupations that are now demanded on the labour market – sales workers, baby sitter, housekeeper, etc.(RO)

According the research in Spain, DV survivors would like to be trained, able to collaborate in helping other women not to go through the same situation as them. The main services for which you feel supported are those related to *social services, psychological support and civil guard*.

VI. The main barriers preventing women from gaining employment or accessing the labour market:

- Internal: lack of self-confidence and self-esteem, being in the victim's role.



- External: there are difficulties with the child care - there is the lack of vacancies in the kindergarten - was mentioned by representatives from Romania as well Lithuania participants.
- Being long time away from the labour market. (LT)
- lack of jobs in the region we belong to (there are only small economic agents, the economy is not well developed);
- Lack of housing, may often determine not to find a job;
- Lack of the mandatory schooling centres to offer qualification or requalification required in the labour market. (RO)

VII. Which additional competences would help women to find work? The knowledge / skills / competences that women would like to develop further:

- Ability to use the Internet, computer literacy, English language skills.
- Initiative, willingness to work.(LT)
- Better communication skills with others - was mentioned by representatives from Romania as well Lithuania participants.
- To have self-confidence in myself;
- To learn to set goals, to develop myself further;
- To learn to control my feelings of sadness, anger, stress;
- Where and how to look for a job; how to fill out a CV and prepare to take part for an interview, how to introduce myself.

According the research in Spain, the competencies that DV survivors consider important in order to help them find work are *active listening, empathy, being empathic*. And something, very important is the *flexibility* to the public when you have a protection order, sometimes the companies and the monitoring staff themselves who put you in difficulties. On the other hand, they prefer to say at work their situation so that they do not inquire or speak behind their backs.

VIII. Do DV survivors feel discriminated by the society:

Yes, some of the women have experienced the discrimination because of gender and marital status. For example - they were asked during the job unreview if they have young children, what would they do if the children would be ill. (LT)

- Yes, there is still gender discrimination when dealing officially with the Police or at the
- Level of family, meaning at direct male relatives (father, brother); they believe that a woman deserves to be abused (it is a fact of nature!!!).
- In the case of a disabled child in the family, there is discrimination against his/her disability.

IX. The additional resources/services that women would find helpful? (For example: training on strengthening self-confidence, professional support from psychologists, career guidance, support from the social worker to you or your family member, support from lawyers, etc.)

- Trainings about the job search, interview with the potential employer.(LT)
- Everything that was mentioned above: training on strengthening self-confidence, professional support from psychologists, career guidance, support from the social worker to you or your family member, support from lawyers and etc. (LT and RO)
- Existence of a supportive family, career guidance;
- Post trauma counselling centre. (RO)



According to the research in Spain, in relation to resource and useful services DV survivors consider, there are varied opinions psychological support, therapy with other women in the same situation, family;

X. Do you think more knowledge about the legislation in general and in the DV in specific would help you to better cope with your situation? Please explain?

More knowledge about the legislation would be helpful because it is not easy to find such information:

- Information about the law -how it is functioning.
- What happens after DV survivor apply to the police.
- What kind of sanctions is applied to the perpetrator. (LT)
- It is important to know your rights and to use them - women should not suffer. Women do not know their rights, they are afraid. (LT and RO)
- Information about the services addressed to victims of DV, who is the resource person in the village, the emergency phone; (LT and RO)
- The steps needed to be followed when somebody is in a difficult situation. (RO)

According to the research in Spain, DV survivors consider that it is not important to have knowledge about legislation because there are associations of lawyers specialized in this subject. It would be useful to *inform DV survivors about their rights in relation to custody of their children*, because they have many fears of losing custody for denouncing, and feel unprotected.

XI. More knowledge about the active measures to prevent the DV would be helpful

- Would be helpful more knowledge about the services offered for DV survivors: information on availability of psychological counselling, lower, social worker assistance.
- Women who suffer - they are afraid and strongly frightened. Thus for them it would be helpful lectures, information on internet, stories of the other women which faced similar situations.
- First of all, it is important that a person would have the desire to help himself. (LT)
- for the surrounding persons (family, neighbours, community) it is important to know about prevention because it destigmatise the DV;
- it is important to run campaigns for children,
- It would be more important that at national level some active measures to combat DV would run, by:
 - a closer involvement of the authorities;
 - a harsher punishment of the aggressors and obligation for them to do therapy. (RO)

According to the research in Spain, in relation to prevention campaigns women say that little is being achieved, they should raise awareness and that the stereotypes mentioned in the campaigns are not being met.

XII. Have you ever experienced e-learning? Would you use a platform specifically developed for women like you? Under which conditions?

Some women have the experienced e-learning in Lithuania. They would use the platform specifically developed for DV survivors if it would be helpful.



- It is important to maintain confidentiality in order to feel safe.
- E-learning should be provided in the crisis centre because some women live with the perpetrator, and their e-mail is checked. (LT)

In Romania women have never experienced e-learning.

In Spain none of participated women have taken an online training course, but they consider it an advance in order to organize their times. It seems interesting and necessary the online platform that arises in this project, because if they see the need to be able to communicate with women who have been or are going through the same situation.

XIII. What women suggest what platform should offer:

- The possibility to share the experience with others, to communicate; the possibility to talk to someone in the same situation (RO+ LT);
- The stories of the other people, facing similar situations, in order to learn from them and get courage (RO+ LT);
- The platform can give us advice how to act, or not in specific situation, to avoid mistakes (RO)
- The information on how to get out of the circle of violence, how to deal with such a situation, where to apply for help; (LT)
- There could be the comments of the lawyer about the situation as well as the comments of the psychologist in the platform;
- The possibility/opportunity to get consultations of lawyer and psychologist is important.
- It would be useful to have as much knowledge on the subject as possible in the platform, because the more women become aware, the more they are able to defend themselves (LT).

XIV. What women would like to see in the EMPROVE training programme:

All these topics are important and answers in Romanian and Lithuanian groups are very similar:

- Legislation on preventing and combating domestic violence; -general rights and specific rights of victims of DV; in order to better know your own rights (RO + LT);
- active measures that are in place for preventing DV,
- **available support networks,**
- Map of public and private services at local, regional and national level to have access for a victim of DV;
- Psychological issues on the subject - definitions of violence; how to identify the perpetrator (LT)
- Job orientation/ job search training;
- List of available jobs at the county level, renewed weekly;
- List of free of charge qualification courses / retraining, the DV victims can access. (RO)

According the research in Spain women would ask to be in the platform and the advice they give us is to control the contributions of the participating people, which are positive things, to serve as psychological support.



XV. Most important skills and competences for women to develop in accordance to their ranking are:

Lithuanian group participants:

1. Assertiveness
2. Communication skills
3. Self-confidence
4. Goal Setting
5. Presentation Skills
6. Resilience
7. Stress Management
8. Self-Motivation
9. Flexibility

Romanian group participants:

1. Communication skills
2. Adaptability
3. Goal Setting
4. Risk assessment
5. Assertiveness
6. Conflict resolution
7. Job Search Strategies
8. Empowerment
9. Personal Safety
10. Orientation
11. Enthusiasm
12. Efficiency
13. Problem Solving skills
14. Resilience

Spanish group participants:

1. Adaptability
2. Assertiveness
3. Conflict resolution
4. Resolving skills
5. Negotiation skills
6. Stress management
7. Personal safety
8. Self-motivation
9. Time management
10. Flexibility.

The most frequently mentioned overall through all countries are these skills:

1. Assertiveness (3)
2. Communication skills (2)
3. Goal Setting (2)
4. Resilience (2)
5. Stress management (2)
6. Conflict resolution (2)
7. Self-motivation (2)



8. Flexibility (2)
9. Adaptability (2)
10. Problem Solving skills (2)

Other important skills also mentioned in different countries:

In Lithuania: Self-confidence; Presentation Skills.

In Romania: Risk assessment; Job Search Strategies; Empowerment; Personal Safety; Orientation; Enthusiasm; Efficiency.

In Spain: Negotiation skills; Time management.



5. Results from the focus groups with Front-line service provider for the Traveller community (Ireland)

Details of the Research Sample:

A focus group was conducted with three front-line staff working in an Education & Training Service with members of the Traveller community in Ireland. The staff were all female, qualified and experienced professionals in the field of education.

The aim of this research was to identify if these staff face issues of domestic violence as part of their work with students. To find out what experience and/or knowledge they have in this area. If they would they partake in the EMPROVE training and use the gamification platform when it is available.

Findings from the research:

1. Domestic Violence Training Received by Participants:

Participant 1:

Received two days training with an Irish specialised organisation; 'Women's Aid'.

This training included 'how to identify the signs, how to facilitate accessing support in a safe way. Safety plans and legislation – protection orders, emergency orders'.

Participant 2 & Participant 3 have not received any training in this area.

2. Have you suspected your learners (students) have been experiencing domestic violence?

All participants agreed with participant 2 stating 'most definitely'.

3. Have any of your students/learners presented with signs or symptoms of domestic violence?

All participants stated this was a regular occurrence. Domestic violence is talked about 'openly, like it's normal' and new service users coming in to seek information on education programmes 'would often disclose to you'. Both male and female service users would disclose their experiences of domestic violence and sometimes these may have been as 'children from a domestic violence relationships'.

4. Are your learners that present with signs of domestic violence engaged with other services specifically for domestic violence?

Participants have made referrals for their students to other services such as social work or domestic violence specific services. However, they agreed that this did not mean students were engaged with that service. 'They leave and come back' they spoke about the 'cycles' of engaging with services or experiencing domestic violence as a feature for their students. They also suggested that accommodation was a feature of some survivors re-entering the home with the perpetrator. This is due to having 'older boys, because they can't bring them to the shelters with them.' Therefore, meaning these older sons may be left homeless or separated from their mother and siblings.

Normality of Domestic Violence:



It was also suggested that the acceptance of domestic violence for many of their learners seemed 'almost normal' and a feature of their lives. However, this 'seems to be changing' with more people seeking support and entering refuges.

Extended Family Involvement:

For those experiencing domestic violence in this community there can be an additional difficulty, as in some cases the 'extended family of the perpetrator may get involved as well'. They 'are actively partaking in the violence themselves'. This includes female members of the extended family with 'mother-in-laws, sister-in-laws' getting involved in the abusive behaviour. This means, for the survivor, they may have more necessity to enter a refuge 'than if we were in the situation' as they are often living with or near their husbands' extended family as can be a cultural tradition for some families.

Lack of Awareness or Understanding

Participant 2 suggested that at times, for some women, they don't realise they're experiencing domestic abuse. It may be 'financial, emotional, or sexual' and they were not aware that these are forms of domestic violence or abuse because they were not being physically assaulted or harmed.

5. Do you think training or resources in this area would support you in your work?

All participants stated that it would be beneficial with participant 3 stating 'yes absolutely'.

6. Would you participate in training in domestic violence if it was offered?

Danger of Inappropriate Advice

Participants stated the need for training in this area as a lack of understanding and awareness may result in advice being offered that is not appropriate or safe for the survivor. Participant 1 said 'before my training, I would have told them to leave' she then outlined how 'an understanding of the process helps to protect the people making disclosures to you.' They require safe plans and need to be protected and given safe guarding. 'Research has shown again and again that 'that's when the murders happen. When people decided to leave, that's when they're at their most vulnerable.'

It was suggested that staff wanted to be supportive. However, without the appropriate training 'you don't feel you are in a position to advise them' – participant 2. Participant 3 agreed stating 'which is dangerous.'

7. Are you given any support when addressing issues such as domestic violence with your learners?

Participants are not given support such as structured 'supervision' or otherwise. They stated their only support 'is each other'.

Staff Wellbeing

Each participant suggested that there was a need for them receive domestic violence training. If one staff member was training to offer advice and support to others, it would be beneficial. Furthermore, their accounts of thinking about survivors outside of work hours may also highlight support is needed to protect staff's wellbeing. Participant 1 detailed how she would worry about a student and their situation and feel guilty that she was safe at home. 'It triggers you' – 'what would they give for the peace I'm taking for granted.'

Education Staff as First Point for Disclosures



Participants also suggested that the relationships they have with their students, built over time, mean that survivors may come to them first before seeking the support of a specific domestic violence service or social worker. 'They trust you and want to speak to you' – participant 2. 'We have built these relationships over a daily basis.' Participant 1 named this method 'the dress rehearsal' as their students will come to them, share their experiences, and 'listen to themselves and see how it sounds, before they go further.'

The need for training was highlighted again as participant 2 said 'it's important you're trained. You could be sending that person away with nothing [after a disclosure]. 'It leaves you [with an] awful guilt.'

Conclusion:

The aim was to identify if education staff face issues of domestic violence as part of their work with students. It was evident from the focus group that this was a regular feature of their work. They were placed in situations where their students disclosed cases of domestic abuse and violence. In addition, they disclosed to education staff before presenting to social workers or domestic violence specific services due to the trusting relationships they had built in their daily contact.

One staff member had attended a two-day workshop in domestic violence, the other two had received none to date. All three suggested they would be interested in attending training and would like additional resources to support their work in dealing with domestic abuse and violence cases.

The complexity of domestic violence for Travellers was highlighted in areas such as family units or accommodation structures that may need additional understanding and support when addressing or working with survivors, or perpetrator. This should be considered in the development of training and resources or materials.

6. Overall conclusions from the research and recommendations for improvements

1. Professionals working with survivors of DV face different challenges and it differs from country to country, depending on the conditions and possibilities for support provided, experience working in this field, as well as specific trainings available. In all countries which participated in the research, the main Challenges Faced by Professionals when working with Survivors of Domestic Violence could be classified as: Structural challenges; Challenges related to the field/job itself; Challenges related to the client situation. Main challenges mentioned during the research:

Accommodation issues:

As one of the main challenges mentioned are accommodation issues, specifically re-housing survivors and/or trying to find them a place in a domestic violence shelter. This is urgent in Ireland. There is lack of support services for victims of domestic violence in Romania: shelters for victims are with reduced capacity, their hosting in the centres is too short. There is lack of shelters for DV survivors in Lithuania.

Networking and cooperation

The issue of DV is complicated and multidimensional problem, and survivors of DV need assistant and involvement of different professionals from different institutions. The networking and cooperation is very important. There is a room for improvement in networking and cooperation among the various involved stakeholders in most of the researched countries:



Generally, at local and regional levels the relevant organisations working in the support chain for victim and survivors of domestic violence have a good network, but there is still a need to continuously manage and control the process in Germany. There is lack of communication between service providers in Ireland. There is lack of networking and cooperation between different institutions working in the field of DV violence in Lithuania. There is the lack of cooperation between by certain sectors in Spain. Improvement of networking with other professionals and other relevant stakeholders and institutions in the process of supporting DVs survivors is urgent in Bulgaria. There is very good networks with the public administration, police, courts in Austria.

Risk assessment

Risk assessment is a challenge as there are different approaches applied by professionals during the intervention and prevention of domestic violence;

The increased use of risk assessment has focussed unduly on victims, although it is the perpetrator who poses a risk. It would be necessary to shift the attention more on the perpetrators as the "risk carrier" (DE).

Training for Professional Staff working in the field of DV

Training possibilities and Support for Professional Staff working in the field of Domestic Violence is different in partner countries:

There is good preparation for work and the number of training offers for further qualification improvement in the field in Austria and Germany. This could be considered as good practice. Professionals mentioned lots of possibilities for trainings in Lithuania and Spain in the field of DV. In Bulgaria professionals are facing the challenge of mainly having to be trained through learning on the job. There are no unified training standards. More training opportunities are needed as well a holistic approach and knowledge about Empowerment. There is a need for the training of specialists involved in prevention and intervention of DV in Romania.

There was a clear diversity between the level of training undertaken by front-line staff and support they receive, working with survivors of domestic violence in Ireland. It was evident that a lack of routine or standardised training may be an obstacle when specialists are addressing a case as they may come with a different professional perspective than a colleague based on their training received.

*Regular **supervisions** are needed for professionals in this field.*

Regular supervision and inter-vision are offered inside the organisation to support the team in Austria. Regular supervision for all staff members is a must in Germany. This could be considered as good practice. In Lithuania professionals have inter-visions, but there is lack of external supervision. In Ireland professional also outlined supervision with their manager or an outside professional as another support received, but this is not always the case.

2. The professionals working in the field outlined a lot of necessary changes that should be made in order to improve the services for DV survivors. The suggestions vary from changing attitudes, improving the trainings for professionals and services to DV survivors. There are similar issues as well different suggestions, relating to the country situation.

In Austria and Germany there is the challenge related to the high number of refugees. Further trainings are needed for dealing with different ethnic groups. With the newly arrived high number of refugees, there is an increase in cases of domestic violence. The institutions lack resources and competences such as intercultural communication. On the other hand, there is a need for making refugees and migrants familiar with services and legal framework in the field of DV. Resources for translation are needed.

In the cooperation with public institutions, courts, etc. more awareness rising about the specific role of victims/survivors of DV would be necessary in order to treat them with more respect and empathy (AT, LT) as the staff working there is more focused on dealing with the



perpetrators and often need more awareness and understanding of the victims/survivors situation.

In Ireland It was suggested that a formalised or standardised system would improve the support system and the responses by professionals working in domestic violence.

The need for unified working standards was mentioned in Bulgaria and Romania as well. There is a need of changing the attitudes and of local intervention improvement in Romania: there is a lack of a coherent and workable regulatory framework, need of uniform working practices, insufficient development of services and lack of specialists.

There is a lack of services and in rural areas –the blended learning applications would be an ideal offer there (DE, LT).

3. According to the interviewed professionals there is a need for more training and qualification for other groups of professionals dealing with DV: policemen; judges and lawyers, investigators.

The first front line staff dealing with DV is police officers - they need specific training on domestic violence. Policemen lack knowledge of how to speak, to communicate with the DV survivor; they need knowledge on situation and risk assessment (LT, RO). The investigators need these specific trainings in this field: knowledge in legislation; risk assessment; psychological knowledge; communication skills (LT). Certain target groups are very difficult to enrol into training, such as prosecutors or judges (DE).

4. Recommended improvements for prevention

Due to the prevalence of the problem, certain groups and institutions are likely to be confronted with cases of domestic violence (schools and kindergarten teachers; general practitioners, professionals in health services and hospitals, employees in the youth welfare office or social offices as well as trainers in sport associations etc.). Those professionals often lack a general awareness about the phenomenon. They would need awareness training on how to recognize violence, how to communicate with the DV survivor as well as knowledge on the available service in their community in order to be able to address the victim there.

In general, there is still a lack of awareness in society about domestic violence and the dynamics in partnerships where domestic violence exists. Still a lot of myths prevail. The society must start speak openly about the topic, because it is still perceived as a taboo. Role models and open storytelling are necessary.

There is a need of better DV prevention. Preventive work should concentrate on youth and families - it is very important to invest in education of children and families, fighting against gender violence and gender inequality (LT, ES). The early intervention is very important as well – to work with crisis situations in the families (LT).

5. The research showed that DV survivors often face these obstacles and challenges to find their way back into "normal" life: economic/financial dependency of their former partners/husband; lack of self-esteem; unemployment; isolation; lack of education, competences, lack of work experience; lack of mobility; fears to change their situation and the one of their children.

6. It is very important to provide psychological support for survivors of DV as well as empower them by supporting the development of the following competences for the survivors: to strengthen their self-esteem and assertiveness, to be able to protect their rights; working towards breaking circle of violent events; ability to recognise the violence; stress management; working on their needs and values, goals setting; strengthening social and communication skills; conflict resolution; labour market knowledge; emotional intelligence; motivation to make changes in life and etc.



7. Although there is different experience of using online platforms among professionals from partner countries, interviewed persons found interesting and attractive the idea of using gamification e-learning platform in their work. The gamification platform could be used as the tool for the aim of empowerment the DV survivors, giving the possibility to reach more clients.

The idea of online training and counselling based on the Gamification approach is innovative and interesting tool, providing for the DV survivors and professionals, working in this field, new possibilities, space for communication, sharing the experience and possibility to gain new competences. It is additional support for DV survivors and possibility to acquire new skills and gain motivation for developing new possibilities through empowerment and self-motivation.

It was suggested that the online platform should be practical, simple, attractive, motivating, and user-friendly; there should be possibility to share with others.

7. Annex 1.1: Research Tools templates: Interview Questions with Front-line Staff

Template: Interview Questions with the professionals working in the field of DV

	Questions
1.	What challenges do you face when working with survivors of domestic violence?
2.	How were you prepared for your job to support the survivors (consider both formal and informal training)? / What formal/informal training have you undertaken in this area?
3.	What support do you get in your work now and by whom? (e.g. materials, funding, counselling, international cooperation, national bodies)? What resources or supports do you find most useful for your work?
4.	What support do you still need in your job? Where do you see the need for change/improvement?
5.	What is your main goal when working with DV survivor?
6.	What are the key competences and skills which help you to work with DV survivors and to empower them?
7.	What obstacles do you face in your work with the survivors?
8.	What competences and skills you still need to further develop in order to overcome these obstacles that you face in your work with the survivors?
9.	Do you have the need to update/deepen your skills/knowledge/competences in the field of prevention of DV? For example: legislations, National programmes, coping strategies, risk analysis, human rights, counselling and guidance etc.?
10.	Again, in terms of PREVENTION: what about other groups like employers, police, hospitals – do they seem prepared in this matter according to your experience? What skills/training do you think other front-line staff or service providers could benefit from in order to recognise DV and improve their support system for survivors of DV?
11.	What is the most important points/aspects in the work with survivors of DV? What advice or guidance would you share with others working with DV survivors?
12.	Please tell us which problems survivors who are on their way back to normal life generally have and which concrete support can really help them?
13.	What competences do survivors lack, where do they mainly need support?
14.	Have you ever used any online platforms, in support to your counselling process? (to bridge the time gaps between the counselling sessions for example) From your point of view, how could such online tools be beneficial?
15.	How should an e-learning platform look like and what should it be able to do, to be attractive for you and your colleagues?



16. What would an e-learning platform need, to be attractive for survivors who are on their way back to normal life?
17. Which advice can you give us to develop our training programme, what would you like to see in the EMPROVE training programme to help you and to empower the survivors?
What type of reference or training materials would you like to see available online?

From the competences listed below, which ones are most crucial specifically for a DV Survivor, thinking about the period of transition to work and better preparation for the labour market. Please identify the following skills or competencies survivors need support in improving. Please mark the most important ones, by selecting score from 1 to 5.

1 - meaning not important at all, 2 - meaning not important, 4 - important; 5 - meaning - very important for the DV survivor

Competencies	1	2	4	5
Adaptability				
Assertiveness				
Communication skills				
Conflict resolution				
Creative-thinking and Imagination				
Efficiency				
Enthusiasm				
Goal Setting				
Negotiation skills				
Networking skills				
Presentation Skills				
Problem Solving skills				
Resilience				
Risk assessment – knowing and being able to do risk assessment and implement the appropriate measures				
Self-awareness				
Self-confidence				
Self-Motivation				
Stress Management				
Teamwork and collaboration				
Time Management				
Empowerment				
Job Search Strategies				
Personal Safety				
Active Citizenship				
Flexibility				
Orientation				
Self-management				



8. Annex 1.2: Research Tools templates: Focus group with DV survivors

Template: Focus group with DV survivors

	Questions
1.	What challenges do you face on your way back to a "normal" life/return to working life and to independent life?
2.	What support (counselling-mentoring-guidance) do you get now? Which other service offers besides the ones mentioned before do you know of?
3.	What additional support (counselling-mentoring-guidance) do would you still need?
4.	What would help you to feel better prepared for the next steps in your life?
5.	What areas of education and training would you like support with?
6.	What, in your opinion, are the main barriers preventing you from gaining employment or accessing the labour market?
7.	Where do you find support/ which services support you?
8.	Which additional competences would help you to find work? Could you specify what knowledge / skills / competences you would like to develop further?
9.	Do you feel discriminated from society? If yes, in which way? Could you give us an example of a concrete situation?
10.	What additional resources/services would you find helpful? (e.g. training on strengthening self-confidence, professional support from psychologists , career guidance, support from the social worker to you or your family member, support from lawyers, etc.)
11.	Do you think more knowledge about the legislation in general and in the DV in specific would help you to better cope with your situation? Please explain?
12.	Do you think more knowledge about the active measures to prevent the DV in your town/country would help you? Please explain
13.	Have you ever experienced e-learning? Would you use a platform specifically developed for women like you? Under which conditions?
14.	We also plan to develop a really innovative online platform, where you could meet, interact and exchange support with other DV survivors. What would such platform offer? (Think freely, all ideas are welcomed!)
15.	What would you like to see in the EMPROVE training programme? For example: legislation so that you know better about your own rights, active



measures that are in place for preventing DV, available support networks, job orientation, other.

16. What do you think are the most important competences for you? Please select the 10 most important skills and competences:

Competences	Mark your selection
Adaptability	
Assertiveness	
Communication skills	
Conflict resolution	
Creative-thinking and Imagination	
Efficiency	
Enthusiasm	
Goal Setting	
Negotiation skills	
Networking skills	
Presentation Skills	
Problem Solving skills	
Resilience	
Risk assessment	
Self-awareness	
Self-confidence	
Self-Motivation	
Stress Management	
Teamwork and collaboration	
Time Management	
Empowerment	
Job Search Strategies	
Personal Safety	
Active Citizenship	
Flexibility	
Orientation	
Self-management	



9. Annex 1.3: Research Tools templates: Best practices research template

Best practices in the fight against DV: existing programs and measures

For the best practices desk research in the fight against DV we suggest you to select and describe best practices of: training/counselling tools, programmes, support measures for the survivors of DV, models/approaches used in the counselling of the survivors of DV; training tools, programmes for professionals (Counsellors, tutors and mentors) working with DV survivors, National programmes, existing networking practices (action groups of intervention: social workers, policemen, judges, educators etc.).

Categories: policy, training, labour market inclusion, tools, networking and cooperation

Criteria: relevant practices, impact, inspiration for us and our products – e.g. use of learning platforms, provision of adult learning, training of the front-line staff.

Template: Best practices desk research

Country	
Institution	
Year of good practice implementation and duration of the best practice	
Description of the best practice model/approach: <ul style="list-style-type: none"> • <i>Main goals</i> • <i>Resources needed/used</i> • <i>Funding</i> • <i>Actors/Team</i> • <i>Prior learning/training of staff needed for implementing this model/approach. methods used,</i> • <i>Obstacles</i> • <i>Achievements/impact</i> 	
Further information can be found at Web/Social Network/...	
Available images, graphs or photographs (Or screenshots - if it is an online tool)	
What impacts and/or successful	



outcomes have been identified for the target group through use of this best practice? <i>(could also include testimonials from participants)</i>	
What is the impact of best practice on final beneficiaries - survivors of DV?	
Success criteria	
How could this best practice or parts of it be expanded/ transferred?	
What can we learn from it – what does it tell us for our project	