

BIJLAGE

Preventie van intergenerationeel geweld Nederland en EU

Verkenning van wat werkt

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Inleiding

In deze bundel staan de bijlagen die horen bij het rapport *Preventie van intergenerationeel geweld in Nederland en EU* geclusterd in drie delen.

Allereerst in deel 1 de bijlagen die samenhangen met hoofdstuk 1 en 2, uit het rapport, namelijk een verantwoording van de keuze voor de preventie projecten (Bijlage 1), de Nederlandse en buitenlandse experts die zitting hadden in de expertgroep, begeleidingscommissie en de twee Roundtables (Bijlage 2), en de risicofactoren die onderdeel vormen van het Pathway model (Bijlage 3). Het pathway model hebben we nader aangevuld met onder meer beschermende factoren in hoofdstuk 2.

Vervolgens zijn in deel 2 de beschrijvingen van de Nederlandse projecten geclusterd (Bijlage 4 tot en met 8). Eerst het project Mannen kom op! (Bijlage 4). Dit project heeft als doel het taboe op huiselijk geweld te doorbreken en richt zich specifiek op mannen. Het behoort tot het domein gemeenschap wegens de grote rol van vrijwilligers en gemeenschap in dit preventieproject. Voor het domein peers zijn de projecten STUK en Stay in Love beschreven. STUK betreft verschillende activiteiten (toneel, film, boek) door en voor jongeren en richt zich op het bespreekbaar maken van kindermishandeling en huiselijk geweld (Bijlage 5). Stay in Love is een lesprogramma voor jongeren van 12 tot 15 jaar gericht op het stimuleren van gezonde relaties en het voorkomen van gewelddadige verkeringsrelaties (Bijlage 6). Tot slot worden twee projecten beschreven op het domein van gezin, namelijk Voorzorg en De nieuwe toekomst. Voorzorg is een huisbezoek programma ter ondersteuning van laagopgeleide jonge, vaak alleenstaande, zwangere vrouwen, en onder meer gericht op het voorkomen van kindermishandeling en geweld in relaties (Bijlage 7). De nieuwe toekomst richt zich op vrouwen die een gewelddadige relatie achter de rug hebben en richt zich op een nieuwe toekomst door maatschappelijke participatie (Bijlage 8).

We sluiten af met deel 3 waarin vier Engelstalige landenrapportages staan geclusterd in Bijlage 9 tot en met 12: Verenigd Koninkrijk, Griekenland, Zweden en Spanje. In Bijlage 9 staan twee preventieprojecten uit Zweden; Men for gender equality dat zich richt op (aanstaande) vaders en Freedom from Violence dat zich richt op kinderen en jonge mannen. Het jongerenproject GEAR (Gender Equality Awareness Raising against intimate partner violence) uit Griekenland wordt beschreven in Bijlage 10. Dit is een lesprogramma voor middelbare scholieren gericht op gezonde relaties waarbij specifiek aandacht is voor genderongelijkheid. Bijlage 11 betreft een programmatische preventie aanpak uit Engeland, Safer Together Early Intervention Service. Het doel van dit breed opgezette project is gericht op het vroeg aanbieden van hulp aan vrouwen die slachtoffer zijn van geweld in de relatie en hun kinderen, gericht op herstel, onafhankelijkheid en het voorkomen van geweld in de toekomst. Tot slot wordt in Bijlage 12 ingegaan op de Spaanse wetgeving gericht op een holistische en gecoördineerde aanpak van geweld tegen vrouwen en kinderen, waarbij aandacht is voor preventie, straffen en bescherming (de 3 P's: prevention, punishment and protection).

DEEL 1

Algemene en methodologische bijlagen

1 *Inventarisatie en selectie beloftevolle projecten*

1.1 *Selectie Nederlandse projecten*

Na een eerste inventarisatie op basis van beschikbaar eerder Nederlands onderzoek konden in totaal 131 projecten worden geïdentificeerd. Op basis van uitsluitingcriteria is die inventarisatie terug gebracht tot 40.

Uitsluitingcriteria waren:

- Het project was afgerond of nog niet gestart.
- Te weinig informatie over het project voorhanden.
- Het project was nog in ontwikkeling.
- Het project was te algemeen gericht op opvoedingsondersteuning, het aanpakken van problemen op verschillende leefgebieden bij multiprobleemgezinnen, eigen kracht, of vergroten weerbaarheid van jongeren en onvoldoende op de preventie van of het doorbreken van geweld.
- Het betrof een crisisinterventie, therapie- of behandelprogramma.
- Het project betrof de problematiek van seksuele vrijheid en seksuele dwang, waaronder voorlichtingsprogramma's over loverboys.
- Het project betrof een specifieke vorm van kindermishandeling, zoals meisjesbesnijdenis of het shaken baby syndroom.
- Het project ging om juridische hulp.
- Het project betrof een training of handreiking, richtlijnen of protocollen voor professionals.
- Het ging om projecten voor kleine doelgroepen zoals asielzoekers, of om problemen die slechts in kleine groepen voorkomen, zoals eergeweld en huwelijksdwang.

De resterende groep van 40 projecten kon worden onderverdeeld naar niveau van preventie en doelgroep: en zijn vervolgens beoordeeld op basis van de criteria doel/doelgroep, mate van empirische ondersteuning en van effectieve implementatie.

Afgaande op de beschikbare (summiere) gegevens bleken weinig projecten (expliciete) aandacht te hebben voor machtsverschillen, emancipatie of seksespecifieke verschillen. Uitzonderingen zijn: *Sleutels voor verandering*, *Voorlichting huiselijk geweld aan Turkse vrouwen* en het Rotterdamse project *Veilig Thuis*. Projecten die zich richten op migrantengroepen hebben doorgaans een insteek op empowerment. Ook het programma *Veilig, Sterk en Veilig* lijkt aandacht te hebben voor machtsverschillen en verschillen tussen de seksen. Aandacht voor afname van genderongelijkheid en meer gelijke verdeling van arbeid en zorg komt in geen enkele projectbeschrijving voor, hoewel *Sleutels voor verandering* hier misschien een uitzondering op vormt.

Als het gaat om mate van empirische evidentie ter ondersteuning dan is *Let op de Kleintjes* een veelbelovend project; *Stevig Ouderschap* en *Memosa* zijn in het buitenland effectief bewezen. Ook *Uit de schaduw van de ander* is geëvalueerd en effectief gebleken, evenals het project *Kindermishandeling Voorkomen*, gericht op Ghanezen. Er zijn enkele projecten met een handboek of methodiekbeschrijving maar vooralsnog zonder evaluatie, zoals *Sleutels voor verandering*, *Voorlichting huiselijk geweld aan Turkse vrouwen*, en *Signs of Safety*.

Wat betreft mate van implementatie: de meeste projecten hebben een geringe regionale reikwijdte. *Let op de kleintjes* is een project dat op verschillende plekken in Nederland draait. Dit geldt ook voor *Signs of Safety*.

Uitgaande van de in de projecten omschreven doelen voldeden weinig projecten geheel aan de vereiste criteria voor het onderhavige onderzoek (de vier terreinen van (opvoedings)ondersteuning van moeders, vaders en kinderen en community-gerichte ondersteuning).

Wat betreft emancipatie besteedden sommige projecten aandacht aan versterking van weerbaarheid van vrouwen (empowerment), maar nauwelijks aan verschillen tussen meisjes en jongens, vrouwen en mannen, moeders en vaders. Aandacht voor het mogelijke verband tussen geweld, en verdeling

van arbeid en zorg tussen de ouders was nergens in projectbeschrijvingen te lezen, hoewel een enkel project daar in de praktijk wel aandacht aan besteedde.

De uiteindelijke voorselectie van Nederlandse projecten is aan de begeleidingscommissie voorgelegd. Daaruit zijn de volgende interventies gekozen en voor nadere analyse geselecteerd naar de drie domeinen gezin/gezinsleden; peers/school en community

Gezin/gezinsleden:

1. *Op de rails*, systeembenadering gericht op pleger en slachtoffer; eigen kracht en machtsongelijkheid naar sekse en generatie, versterken netwerk van gezinsleden (nog geen evidence).
2. *VoorZorg* is een evidence based huisbezoekprogramma ter ondersteuning van laagopgeleide jonge, vaak alleenstaande, vrouwen die zwanger zijn van hun eerste kind, met een verhoogd risico op opvoedingsproblemen en huiselijk geweld.
3. *Ouderschap begint eerder dan je denkt*: schenkt specifiek aandacht aan rolpatronen in de methodiekbeschrijving en het soortgelijke *Memosa*: dit is een evidence based programma gericht op het terugdringen van partnergeweld bij (zwangere) vrouwen met aandacht voor het versterken van de sociale redzaamheid van de vrouw. Deze projecten sluiten aan bij dergelijke projecten UK (zie volgende paragraaf).
4. *De Nieuwe Toekomst*, een vervolg op 'Doorbreek geweld, praat erover' van de NVR. Dit is gericht op het vergroten van maatschappelijke participatie, bijvoorbeeld door het vinden van opleiding en (vrijwilligers)werk. Er is een samenwerking met de FNV.
5. *Als ik haar was* is gericht op allochtone slachtoffers van partnergeweld. In de voorlichtingsbijeenkomsten (mbv film) is aandacht voor genderverschillen. Ook wordt samengewerkt met organisaties op het terrein van arbeid en scholing.
6. *Let op de Kleintjes*, 'Hé kijk mij nou' en vergelijkbare projecten (evidence based) gericht op (jonge) kinderen die getuige waren/zijn van geweld thuis, met aanbod voor ouders met hetzelfde doel.
7. *Signs of Safety*, een systeem gerichte aanpak die landelijk (verschillend) wordt ingezet.

School/peers:

1. *Stay in Love* is gericht op het voorkomen van geweld in relaties bij middelbare scholieren (enige evidence, nationaal en internationaal, beschikbaar). Dit sluit aan bij het project GEAR uit Griekenland.
2. *STUK*: jongeren delen hun ervaringen onder andere door workshops op school en via theater; vooral gericht op het doorbreken van zwijgen over geweldservaringen en het verwerken ervan (nog geen evidence).

Community:

1. *Publiekscampagne voor jongeren WE CAN YOUNG*. Deze campagne gaat in op genderverschillen en er wordt gewerkt met changemakers.
2. *Sleutels voor verandering* heeft nadrukkelijk aandacht voor verschillen tussen de seksen. Het is gericht op bijeenkomsten met mannen en bijeenkomsten met vrouwen. Er is een handboek voor professionals en vrijwilligers die debatten voor de mannen (van drie bijeenkomsten) organiseren en weerbaarheidstrainingen voor de vrouwen.
3. *Trias Pedagogica*: debatten onder vaders van niet-westerse afkomst, gericht op vaderbetrokkenheid bij de opvoeding.
4. *Vertrouwenspersonen Huiselijk Geweld (VHG) Malburgen*, bewoners uit minderheidsgroepen uit de wijk Marburgen in Arnhem zijn opgeleid tot vertrouwenspersonen om wijkbewoners bij te staan in het doorbreken van het taboe rondom huiselijk geweld en zij kunnen begeleiding van bestaande hulpverlening tijdig inzetten
5. *Mannen Kom Op!*: werkt met een preventieteam van vertrouwenspersonen die specifiek bezig zijn met preventie van huiselijk geweld gericht op mannen vanuit een wijkgerichte benadering

Er zijn uiteindelijk zes interventies geselecteerd voor een methodiekbeschrijving. Dit zijn: VoorZorg en Nieuwe Toekomst (Gezin), Stay in Love en STUK (Peers), Mannen Kom op! en Vertrouwenspersonen Mal-

burgen (Community). Deze methodiekbeschrijvingen kwamen tot stand door documentenanalyse, verdiepende interviews met betrokkenen en expertmeetings met vertegenwoordigers van de andere voor nadere analyse genoemde interventies binnen hetzelfde domein. Vertrouwenspersoon Malburgen is uiteindelijk niet beschreven wegens gebrek aan voldoende materiaal, en omdat dit project niet meer werd uitgevoerd. Daarnaast is later in het project besloten We Can Young mee te nemen in de analyse van relevante projecten op het domein jongeren omdat dit project niet werd afgerond, maar juist extra financiering kreeg voor drie jaar. Bovendien voldeed het bij uitstek aan het criterium 'aandacht voor gender'.

1.2 Selectie Europese projecten

Op basis van de in 2010 verschenen Europese studie naar wetgeving en beleid in de aanpak van geweld tegen vrouwen en kinderen en geweld o.b.v. seksuele oriëntatie (Kelly, Hagemann-White, & Römken, 2010), is een secundaire analyse gemaakt ter inventarisatie van preventie projecten.

Een van de conclusies uit deze Feasibility Study uit 2010 die voor het onderhavige onderzoek van belang is, is dat primaire preventie een relatief onderontwikkeld beleids- en interventieterrein was. Wel hadden diverse landen maatregelen genomen op het snijvlak van bescherming en preventie (secundaire of tertiaire preventie). Hoewel de meeste landen overeenstemmen in de visie dat de veilige en gezonde ontwikkeling van het kind het centrale criterium dient te zijn bij beschermende (of preventie-)maatregelen, verschillen EU-landen sterk in de mate waarin ze dat uitvoeren. De resultaten van de EU-studie onderstreepten het belang van het meer structureel inrichten van beleid en wetgeving, en het structureel financieren van preventievoorzieningen, alsook het inrichten van kinderschermingsvoorzieningen met (meer) gekwalificeerde hulpverleners. Vanuit het oogpunt van verplichtingen die door de meeste EU-lidstaten zijn aangegaan in het kader van internationale mensenrechtenverdragen is dit ook passend (o.a. Het Verdrag van de Rechten van het Kind, het VN Vrouwenverdrag ter uitbanning van alle vormen van discriminatie). Meer in het algemeen was de mate waarin wetgeving en beleid enerzijds en de hulpverleningspraktijk anderzijds op elkaar zijn afgestemd sterk wisselend. In het algemeen bleek dat in de meeste EU-landen grote afstand bestond tussen maatregelen en interventies ter bescherming van kinderen enerzijds en vrouwen (en/of) ouders anderzijds. Deze waren nauwelijks of niet geïntegreerd of op elkaar afgestemd. Ook de emancipatiegerichtheid in interventies tussen de EU-landen wisselde sterk op enkele uitzonderingen daar gelaten (zoals Spanje) (Kelly et al., 2010, 179-210).

De algemene inventarisatie en de selectie van beloftevolle praktijken in EU-landen bestond uit vier fases:

1. Secundaire analyse bestaande landengegevens EU

In het huidige onderzoek hebben we op basis van de landengegevens uit de Feasibility Study een eerste analyse gemaakt voor een Europees overkoepelend overzicht van wetgeving, beleid en veelbelovende praktijken op het gebied van het doorbreken van intergenerationele overdracht van geweld. Dit is gebeurd aan de hand van drie hoofdthema's:

- Nationale wetgeving: Wat is in de lidstaten aan nationale wetgeving gerealiseerd op het terrein van geweld tegen kinderen en/of partnergeweld waar kinderen vaak als getuige slachtoffer van zijn? Wordt specifieke wetgeving gehanteerd of enkel generiek (straf-)recht?
- Wetgeving en/of beleid specifiek gericht op preventie van geweld tegen kinderen en/of partnergeweld: Is in het land aandacht voor het doorbreken van intergenerationele overdracht van geweld? Indien er preventiegerichte wetgeving of beleid is, is hier dan ook sprake van één of meer van de invalshoeken van waaruit we in deze studie werken, te weten die van mensenrechten, emancipatie en preventie van (intergenerationele overdracht van) geweld?
- Veelbelovende projecten: worden projecten gerapporteerd in de verschillende lidstaten die betrekking hebben op het doorbreken van intergenerationele overdracht van geweld?

2. Verzamelen aanvullende EU-gegevens

De tweede methodische stap van dit onderzoek bestond uit het actualiseren van de gegevens uit fase 1. Het betrof hier een actualisering naar jaar (van 2010 naar eind 2013) en naar aantal lidstaten van de EU (het toevoegen van Kroatië in het landenoverzicht). Hiervoor zijn binnen elk van de 28 EU-landen meerdere Nationale Experts benaderd. Aan een ieder is de vraag voorgelegd om een kort overzicht te geven van de nieuwe ontwikkelingen (vanaf 2010) in wetgeving en beleid en veelbelovende projecten in het eigen land te identificeren.

Op basis van de beschrijving van de geactualiseerde wettelijke kaders, de beleidsmatige kaders en van de veel belovende interventies in de 28 EU landen komt in een aantal opzichten een overkoepelend EU beeld naar voren.

Wettelijk kader

- Een deel van de EU-lidstaten heeft in het wetboek van strafrecht niet expliciet iets beschreven over geweld in huiselijke kring als strafbaar feit. In de EU landen waar wel wetgeving is op het terrein van geweld in het gezin, is de wet gericht op de aanpak van daders en in sommige gevallen de bescherming van slachtoffers. Het overgrote deel van de EU lidstaten heeft nog altijd geen specifieke wetgeving op het terrein van preventie van kindermishandeling, partnergeweld en/of doorbreken van intergenerationele overdracht van geweld.
- Verschillende Nationale experts melden dat in hun land meer consensus is over de noodzaak van de aanpak van geweld tegen kinderen dan over de aanpak van partnergeweld. Dit was ook geconstateerd in de Feasibility Studie uit 2010. Kennelijk is er sinds 2010 nog niet veel veranderd op dit punt.
- Sinds 2010 is in meerdere landen de wetgeving rond geweld tegen kinderen uitgebreid omdat 'getuige zijn van geweld' als vorm van geweld en dus als (directe) victimisering wordt erkend. Dit zou aanknopingspunten kunnen bieden voor de ontwikkeling van preventie projecten gericht op het doorbreken van de intergenerationele overdracht van geweld. Dit is echter nog niet terug te zien in het aantal gerapporteerde preventieprojecten sinds 2010.

Beleidsmatig kader

- In een deel van de EU-landen is wel (een voornemen tot) beleid op het terrein van huiselijk geweld en kindermishandeling. Er wordt dan gesproken over de aanpak van huiselijk geweld (genderneutraal en generiek), soms over de aanpak van partnergeweld en kinderen als getuige van partnergeweld of in sommige gevallen over de aanpak van geweld tegen vrouwen (genderspecifiek, maar niet generatie specifiek).
- Over de hele EU gezien valt op dat nog steeds in bijna geen enkel land een koppeling wordt gemaakt tussen beleid over geweld tegen vrouwen en beleid over geweld tegen kinderen. Dit bleek reeds het geval in 2010 en de secundaire analyse bevestigde dit. Ook uit de meer recent verzamelde data blijkt dat de intersectie tussen deze twee domeinen niet in overkoepelend beleid wordt gevat binnen de EU lidstaten.

Preventie

- Zowel uit de secundaire analyse van de situatie in 2010 als in de actualisering van 2013 komt naar voren dat beleid en wetgeving in de meeste EU landen nog altijd met name gericht zijn op repressie jegens plegers en bescherming van de slachtoffers. Daarbinnen betreft het voornamelijk wetgeving die zich richt op strafrechtelijk aanpak en vervolging van plegers en op bescherming van slachtoffers (via opvang of in context van vervolging).
- Preventie van partnergeweld en geweld tegen kinderen is nog weinig in beeld. In sommige EU landen is preventie wel erkend als essentieel in de aanpak van huiselijk geweld. Maar dit aspect is nog altijd in weinig landen geïmplementeerd. Laat staan preventie gericht op doorbreken van intergenerationeel geweld, sekse specifieke preventie, preventie gericht op emancipatie/arbeid en zorg combinatie.

3. Vaststellen van de prioriteitslanden

Als derde stap zijn zogenoemde prioriteitslanden vastgesteld waar, in aansluiting op de eerste algemene actualisering in stap 2, een diepere verkenning van de ontwikkelingen en het benoemen van veelbelovende projecten heeft plaatsgevonden.

De voorselectie van veelbelovende projecten die zich lenen voor een verdiepende case-studie uit de 28 EU landen is gebaseerd op zowel inhoudelijke als politiek-geografische criteria:

- Het project (wetgeving, beleid en/of interventies) is specifiek gericht op preventie, bij voorkeur primaire of secundaire preventie.
- In het project wordt aandacht besteed aan de intersectie in geweld tegen kinderen en partnergeweld.
- Het project biedt een mogelijke parallel met een Nederlands project en is daarmee geschikt voor een meer toegespitste concrete vergelijking over (nationaal specifieke) condities die van invloed zijn op de uitvoering en daarmee ook op de internationale toepasbaarheid.
- Projecten dienen een redelijke geografische spreiding binnen de EU te representeren met het oog op het verkennen van uiteenlopende wettelijke, sociale en politiek-culturele factoren die het slagen van projecten beïnvloeden.

Op basis van de (kwaliteit en kwantiteit) van de actualisatie, en lettend op geografische spreiding binnen de EU, zijn in eerste instantie tien landen benoemd tot prioriteitslanden: Bulgarije, Duitsland, Griekenland, Groot-Brittannië, Hongarije, Kroatië, Nederland, Oostenrijk, Spanje, Zweden.

4. Verdiepende update over veelbelovende projecten

Aan de nationale experts in de geselecteerde prioriteitslanden is vervolgens gevraagd om de situatie anno 2014 in de lidstaat in kaart te brengen aan de hand van een vooraf vastgesteld format met vragen over:

- Ontwikkelingen of veranderingen sinds 2010 op drie niveaus: wetgeving, beleid en preventie.
- De mate waarin het wettelijke kader aandacht heeft voor één of meer van de invalshoeken, te weten die van mensenrechten, emancipatie en preventie van (intergenerationele overdracht van) geweld.
- De mate waarin het beleidskader aandacht heeft voor één of meer van de invalshoeken, te weten die van mensenrechten, emancipatie en preventie van (intergenerationele overdracht van) geweld.
- De mate waarin preventie aandacht heeft voor één of meer van de invalshoeken, te weten die van mensenrechten, emancipatie en preventie van (intergenerationele overdracht van) geweld.
- Veelbelovende projecten met aandacht voor één of meer van de invalshoeken, te weten die van mensenrechten, emancipatie en preventie van (intergenerationele overdracht van) geweld.

Het is evident dat deze criteria van verschillende aard zijn en soms op gespannen voet met elkaar staan. Zo zijn er bijvoorbeeld meer veelbelovende projecten in West-Europese landen dan gemiddeld genomen in de nieuwe EU-lidstaten. Op basis van bovenstaande criteria kunnen de 28 EU landen grofweg verdeeld worden in drie groepen:

- Landen die niet voldoen aan de inhoudelijke criteria: er zijn geen veelbelovende projecten geïdentificeerd. Er is geen sprake van een wettelijk noch een beleidsmatig kader waarin preventie een rol heeft. Uit de secundaire analyse, noch uit de update door de nationale experts zijn projecten genoemd die vanuit de drie perspectieven als veelbelovend kunnen worden getypeerd.
- Landen die enigszins beantwoorden aan de criteria: er zijn weliswaar veelbelovende relevante projecten maar ze raken niet helemaal de kern van het doel in dit onderzoek (preventie van intergenerationele overdracht). In de landen voldoen de gevonden projecten nog niet aan hier gehanteerde onderzoekscriteria maar bieden wel aanknopingspunten voor uitwisseling tussen de landen.
- Landen die tot op zekere hoogte voldoen aan de criteria. In de landen voldoen de gevonden projecten niet voor 100% aan alle criteria maar de rapportage van de ontwikkelingen en veelbelovende projecten geven wel aanknopingspunten voor uitwisseling tussen de landen. Een voorbeeld hiervan is bijvoorbeeld Spanje dat een interessant wettelijk en beleidsmatig kader heeft. Ondanks dat dit meer tertiaire preventie is, is het wel interessant om te bekijken wat Nederland hiervan kan leren. Na overleg tijdens de expertmeeting, en op grond van bovenstaande afwegingen, is gekozen voor bestudering van beloftevolle projecten in de volgende vier landen: Spanje (accent op beleidspreven-

tie), Griekenland (accent op preventie via peers/community), Groot-Brittannië (preventie gericht op kind/gezin/moeders) en Zweden (preventie gericht op mannen/jongens via de vaders/kinderen).

2 *Lijst van betrokken deskundigen*

Expertteam (december 2013; februari 2014)

Arno van Dam	<i>Klinisch psycholoog, GGZ Westelijk Brabant</i>
Sietske Dijkstra	<i>Lector huiselijk geweld, Avans</i>
Anneke van Doorne-Huisink	<i>Emeritus hoogleraar sociologie, Vrouwenraad</i>
Marieke Ruinaard	<i>Beleidsmedewerker, Blijf-groep</i>
Peter van der Linden	<i>Bestuursvoorzitter stichting Ipscan (International Society for prevention child abuse)</i>

Begeleidingscommissie

Saskia Keuzenkamp	Movisie / Vrije Universiteit Amsterdam (Voorzitter)
Ico Kloppenburg	VNG
Els Kors	Gemeente Den Haag
Lian Smits	Kompaan en de Bocht
(plaatsvervangster Marloes van der Sande)	
Claudia Lucardie	Ministerie VWS
Mieke Pollman	Ministerie VWS
Margreet Zeemering	Ministerie SZW
Danielle Kretz	Ministerie SZW
Anita de Groot	Ministerie OCW

Roudtable 1

Experts

Lorraine Radford	University of Central Lancashire, United Kingdom
Marianne Hester	University of Bristol, United Kingdom
Kiki Petroulaki	European Anti-Violence Network (EAVN)
Asa Cater	Örebro University

Researchers

Hanna Harthoorn	Atria Women's Institute, the Netherlands
Renée Römkens	Atria Women's Institute, the Netherlands
Katinka Lünemann	Verwey-Jonker Institute, the Netherlands
Trees Pels	Verwey-Jonker Institute, / VU University, the Netherlands
Jodi Mak	Verwey-Jonker Instituut, the Netherlands
Majone Steketee	Verwey-Jonker Institute, the Netherlands (second day)
Maxine van Bommel	Verwey-Jonker Instituut, the Netherlands (minutes)

Roudtable 2

Experts

Lorraine Radford, University of Central Lancashire, United Kingdom
Nicky Stanley, University of Central Lancashire, United Kingdom
Kiki Petroulaki, European Anti-Violence Network (EAVN)
Bettina Steible, Universitat Autònoma de Barcelona, Spain
Kjerstin Andersson Örebro University Sweden, Sweden

Researchers

Renée Römkens	Atria Women's Institute, the Netherlands
Jamila Mejdoubi	Atria Women's Institute, the Netherlands
Majone Steketee	Verwey-Jonker Institute, the Netherlands
Eliane Smits van Waesberghe	Verwey-Jonker Instituut, the Netherlands
Jodi Mak	Verwey-Jonker Institute, the Netherlands
Trees Pels	Verwey-Jonker Institute, / VU University, the Netherlands
Maxine van Bommel	Verwey-Jonker Institute, the Netherlands

3 *De beschrijving van de risicofactoren in het Pathway Model*

(Uit: Hagemann-White, C., Kelly, L. & Römken, R. (2010). Feasibility study to assess the possibilities, opportunities and needs to standardise national legislation on violence against women, violence against children and sexual orientation violence, Chapter 5.)¹

Factors conducive to violence against women, violence against children and sexual orientation violence

There is a consensus across research and theory that interpersonal violence is multi-factorial and arises through the confluence of interacting influences at different levels. Reflecting this knowledge, the available research evidence was compiled and main factors extracted. In the following, the **factors at play in the model of perpetration** are summarized and briefly explained; for more background see the research review.

Macro level refers to overall cultural, historical and economic structures of a society. Persistent gender inequality and failure to recognize children's and LGBT rights belong here, as do attitudes devaluing women and/or children and imposing normative regimes for gender and sexuality. Development and influence of the media permeate society on all levels. The law is a macro factor that defines some acts of violence as more serious, while treating others as not deserving of sanction, and establishes the responsibilities of agencies and the rights and claims of victims to redress and support.

1. "DEVALUING WOMEN" represents the material and cultural subordination of women, gender inequality of power, and patriarchal ideas of femininity and of sexuality, underpinned by normative beliefs about the proper spheres of women and men, the societal value of these spheres, and the legitimate relative power balance between women and men in each sphere. They include values for sexual and for family relationships that idealize women's compliance with men's wishes and needs, and thus give the appearance of legitimacy to men imposing their will on women.
2. "MASCULINITY" serves on the macro-level as keyword for the hierarchical power and recognition of normative heterosexual masculinity, generating pressure to conform to masculine standards; it includes social recognition of claims and rights for men, but at the same time, defining norms that men must fulfil. Features of such masculinity are variously described, including concepts such as heroism, the ability to face up to and overcome fear or pain, and sexual conformity, meaning heterosexuality and successful sexual performance.
3. "CHILDREN'S STATUS" refers to persisting traditions in which children are not recognized as the holders of fundamental rights and are expected to submit to expectations and demands of adults. In this, children retain some elements of a legal and cultural status as property of the parents or families, and as subordinates to those responsible for their education or care. Children are also perceived as naturally weak and vulnerable and as not having a real capacity to know what they want or need or what is good for them.
4. "MEDIA VIOLENCE" characterizes the availability and socially accepted use of media that present violent actions as rewarding and successful, while sexualizing violence and portraying women and/or children as available and vulnerable sexual objects. The impact of the media, and more recently, the internet and interactive video games, on interpersonal violence is controversial, but the media are clearly a powerful influence on the culture, through the constant representation of acts of violence and their linkage to sexuality and to images of gender. Research links sexualized violence in the media to increases in violence towards women, rape myth acceptance and anti-women attitudes.

¹ Report http://www.europarl.europa.eu/eplive/expert/multimedia/20110405MLT17038/media_20110405MLT17038.pdf. Annexes: <http://www.tilburguniversity.edu/research/institutes-and-research-groups/intervict/research/apfslannex.pdf>

5. “IMPUNITY”: Failure of the law to prohibit or sanction violence or to ensure protection, legal systems that confer (e.g. by exceptions) rights to the use of coercion, control or violence. The concept of impunity is used in international discourse on violence against women more broadly to characterize state inaction, both in not holding perpetrators accountable and in permitting power relations and structural conditions of discrimination to remain in place. To sharpen the focus on policy measures, this factor represents the absence of legal provisions.

Meso level refers to the larger institutions or organisations that regulate social life and within which individuals and families negotiate their lives. Norms and values about subordinate or compliant behaviour for women or children are on the meso level when specific to a community or milieu. This level also includes presence or absence of a consistent policy, as well as the rules, procedures and (lack of) resources for agencies that could or should supervise, intervene, offer help or enforce sanctions.

6. “FAILED SANCTIONS” - Failure of agencies to set limits or implement sanctions despite existence of legal norms and agency duties. Research studies on rape, sexual harassment and intimate partner violence provide evidence that men see themselves as more likely to engage in VAW, and actually do re-offend more often, when they perceive or experience that it has no negative consequences for them. This factor should be understood broadly to include all (in-)action by responsible agencies that set limits to violence, such as insisting that parents accept help in order to raise a child without abuse.
7. “HONOUR CODES” - Community or collective enforcement of honour, shame and subordination based on gender, xenophobia, fundamentalism, or tradition. The term “harmful traditional practices” in UN documents can be questioned, since practices harmful to women such as wife abuse and rape have long been part of the dominant cultures of Europe. Honour codes create an expectation of approval by families, or within communities whose members immigrated from outside the EU, and permit justification with reference to traditions or laws in countries of origin, based on control of women for the perceived good of the collective. Traditions and cultural values may be invoked as excuses for personally motivated acts of violence, or used to cover material motives such as immigration permits. Subgroups within the majority population may also employ a concept of honour to enforce a rigid gender regime.
8. “HATE GROUPS” - Organized social groups promoting intolerance or hate as well as aggressive action. Although such groups can arise locally on the micro-social level, they do the greatest harm when they connect to larger organized networks such as right-wing extremist political parties or movements and their organizations, ideological networks that propagate notions of a mission to cleanse society of danger or evil attributed to homosexuals, ethnic minorities and/or other out-groups. In this context, gender and sexual norms are not ideals so much as imperatives to be defended and enforced, and there are often links to racism. Those who do not fit or conform to the norm are also, however, seen as legitimate and easy prey for aggressive impulses.
9. “ENTITLEMENT” - Norms generating assumptions, for example, of men’s rights over women, supported by social beliefs in male entitlement to sex and services from women. This rests on societal patterns of gender inequality, dominant masculinity and devaluing women. Entitlement also can be perceived as the right to do as one likes with one’s own children. Different forms of violence are linked to different substantive concepts of entitlement. Subjectively, the perpetrator’s experience is often one of not being respected or of being powerless, but the underlying premise is that an intimate partner/ husband/father/ mother/ authority figure has the right to unquestioned acceptance of demands.
10. “DISCRIMINATION” - Gender-based discrimination is embedded in social organisations such as workplaces or educational institutions, including the definition of relatively privileged territories reserved for (heterosexual) men. Depending on the area of violence being examined, it can be primarily discrimination against women, or discrimination against anyone who does not fit the heterosexual mould and can be suspected of a “deviant” sexual identity or orientation (LGBT).

Toleration of discrimination in organisations of all kinds creates a permissive environment for harassment.

11. "POVERTY POCKETS" - High concentrations of poverty and social exclusion create environments of depleted resources and often high rates of crime, in which violence - for example, on the streets or in schools - becomes an everyday experience. Research indicates that being poor or having a low educational level do not in themselves lead to violence. Living in a neighbourhood or region in which material resources, access to education and to regular employment or to cultural resources are very low, and in which social exclusion, racism or discrimination prevail, contributes to violence in everyday life and in families.

Micro level refers to dynamics and formations of the face-to-face group: peer groups, close relationships in the immediate family or household, the classroom or workplace as a site of day-to-day interaction. These can reinforce or mitigate the effects of ontogenetic factors. It is on this level that general social norms are translated into expected or socially approved practices. Thus, while gender stereotypes have historical and cultural roots, their impact on the perpetration of violence is most clearly recognisable when they shape perceptions of what is "normal" in the way men, women and children think and behave.

12. "STEREOTYPES" - Gender-unequal values and norms in family or immediate social networks, including personally endorsed gender-stereotyped perceptions of what men and women, girls and boys, good mothers and their children "naturally" are or should be like. In modern societies there is a considerable range of variation in permissible genderrelated values and norms, but the face-to-face context of interaction specifies what is accepted, admired, considered abnormal or actively sanctioned. Peer groups and families as well as social environments can maintain or revitalise stereotypical thinking about gender and sexuality and form pockets of resistance to modernity.
13. "OBEDIENCE CODE" - This factor characterises established and recognized methods of coercive discipline and strict normative expectations of obedience from children, and these are traditionally different for daughters and sons. Traditionally, the obedience code also applied to wives, but while traces still can be seen, it is no longer widely accepted as an explicit code in much of the European Union, although here, too, there are "pockets of resistance" to modernization.
14. "FAMILY STRESS" - Multiple sources of stress for and in families are clustered together in this factor: social isolation; depleted resources; high family conflict and low family cohesion; intra-familial escalation of conflict processes. Indicators of family stress appear regularly as significant variables in the research on child maltreatment, but some part of intimate partner violence, especially in the form of situational couple conflict, is related to an accumulation of stress factors.
15. "REWARDS" - A wide variety of sources of satisfaction and perceived rewards for violence are included: the meaning differs depending on the form of violence in focus. Rewards can be social recognition and admiration (for example for having proven oneself a man), simple profit or material gain, the satisfaction of having silenced an irritating family member and gotten one's way, sexual or other kinds of pleasure. "Conducive contexts" offer rewards for practicing dominance or control. Rewards are one clear motive behind economically profitable forms of violence such as trafficking or child sexual exploitation. But for some, the acts of violence are themselves rewarding, as when sexual aggression lets the perpetrator feel powerful and in control.
16. "OPPORTUNITY" - This factor covers context conditions that facilitate the use of violence towards selected target persons, including ease of access to potential/vulnerable victims. Rewards and opportunity are often flip sides of the same coin, but this is also an independent factor: knowing that an act will have no consequences, or that there will be no resistance, can in itself lead to using the means that are easily at hand. A number of experimental studies on sexual coercion have found that many young men, when offered an imaginary scenario in which rape or sexual harassment

would have no consequences for them, said that they would take advantage of the situation. Opportunity can also consist in doing what peers or colleagues also do and expect.

17. **“PEER APPROVAL”** - Peer-groups (especially in adolescence) supporting anti-social behaviour or violence and reinforcing hostile masculinity and aggression constitute a factor at this level. While childhood experiences predispose boys in particular to aggression, peer-groups in adolescence that practice and reinforce antisocial behaviour have been found to mediate the development into sexual aggression as well as violence within the family (both intimate partner violence and child abuse). Several studies have found that men’s likelihood of perpetrating sexual assault co-varies with the level of rapesupportive attitudes among their peers.

Ontogenetic level can also be called the “life history approach”; it includes those factors in the biographies of individuals that contribute to a disposition to resort to violence or even to find satisfaction in violence. Empirical research on violence against women and violence against children typically measures characteristics of individual in their development and personal environment. Much of this research identifies correlations but cannot provide explanations. Longitudinal studies are useful for developing grounded hypotheses about causal links.

18. **“POOR PARENTING”** - Growing up in families that are unable to offer basic care and secure attachment; “unskilled parenting” summarizes a range of deficits, including those resulting from a parent’s own history of maltreatment or abuse. Longitudinal studies suggest that neither having witnessed violence in the home as “model” for imitation, nor suffering direct violence from a parent is a robust predictor of later own use of violence. Unskilled parenting may inhibit or damage the basic emotional security and the images of relationships that a child acquires, as well as damaging the capacity for empathy.
19. **“EARLY TRAUMA”** - Early exposure to violence in the home, to an abusive father-figure, or to other (sexual or nonsexual) abuse of trust, as well as other traumatic childhood experiences fall into this category. Additional conditions must be added for childhood exposure to violence to translate into a propensity to use violence actively. Violence in the family of origin, often both witnessing abuse of the mother and experiencing maltreatment, raises the probability of antisocial behaviour patterns, especially among boys. Girls are more likely to grow up believing that no-one can or will protect them, and some of them may later be unable to protect their own daughters.
20. **“EMOTIONS”** - Negative childhood experiences damage the basic capacity for attachment, but emotional disturbances can also arise from other sources. There is considerable research evidence showing correlations between the use of violence and personality dysfunctions, including emotional dysregulation, empathy deficits, inability to handle aggression and depressive-avoidant tendencies. Severe psychopathology is not included in this model, as it has a much more general impact on anti-social behavior and is not specific to the forms of violence linked to inequalities of gender, sexuality or age.
21. **“COGNITIONS”** - Poor or hostile social information processing, cognitive distortions, strongly inadequate perceptions of children, women, LGBT or those different from self. Batterers have been described as living in a “bubble” in which the perspective of a partner never enters into the perpetrator’s perception of reality. Cognitive and affective inability to understand a child’s behavior often triggers maltreatment. Hostile attribution patterns - a disposition to assume that what others do or say is intended to provoke or show disrespect - can be already present or can follow from failing to understand child development. Cognitive distortions acquired during adolescent sexual socialization support notions that conflate coerced sex with consensual sex, and establish contempt for homosexuality as the norm.

DEEL 2

Preventieprojecten Nederland

4 *Mannen Kom Op!*

De beschrijving is gebaseerd op:

- Projectplannen Mannen Kom Op.
- Trainingsmateriaal Mannen Kom Op.
- Digitale bronnen (websites, nieuwsberichten).
- Twee interviews: projectleider en vrijwilliger.

4.1 *Doelgroep*

Het project Mannen Kom Op richt zich op mannen die betrokken zijn bij huiselijk geweld als slachtoffer of als pleger. Het betreft zowel partnergeweld als bijvoorbeeld geweld van kinderen naar ouders. Het project is gericht op mannen van boven de 18 jaar, woonachtig in de regio Zaanstreek-Waterland: Edam-Volendam, Landsmeer, Oostzaan, Purmerend, Waterland, Wormerland, Zaanstad.

Preventie: Primair en Tertiair

Domein: Community

4.2 *Werkwijze*

Voorgeschiedenis

De GGD Zaanstreek-Waterland zag in het hulpaanbod voor huiselijk geweld al veel aanbod voor vrouwen en kinderen, maar (in hun regio) nog weinig tot niets voor mannen. Het taboe onder mannen om te praten over geweld in huiselijke kring is groot. Daarom is het project Mannen Kom Op geïnitieerd door GGD Zaanstreek-Waterland en de aftrap vond plaats op 10 april 2013. Mannen Kom Op wil het taboe voor mannen om over huiselijk geweld te praten verbreken. Geïnterviewde projectleider: *“Mannen komen niet bij de hulpverlening terecht. Daarom hebben we nagedacht over hoe we hen kunnen bereiken. Eigenlijk moet het niveau nog verder naar beneden gebracht worden. Voor vrouwen is die stap naar de hulpverlening al heel groot”*. Daarom werkt Mannen Kom Op met vrijwilligers die als vertrouwenspersonen fungeren. De doelen van Mannen Kom Op zijn: het taboe op huiselijk geweld doorbreken, het bespreekbaar maken, een aanzet geven tot het zoeken van hulp en zo mogelijk het voorkomen van (verder) geweld. Een groep vrijwilligers die vaak zelf te maken heeft gehad met huiselijk geweld staat voor mannen klaar. Mannen Kom Op stelt in haar informatiemateriaal 100% anonieme steun en hulp te bieden. De vrijwilligers zijn getraind om in vertrouwen en anoniem daarover met hen te praten. Zij zijn geen vervanging van de hulpverlening, maar proberen mensen eerder in actie te laten komen om iets te doen aan de situatie.

De interventie

Mannen Kom Op! biedt aan mannen, die op wat voor manier dan ook in aanraking komen met huiselijk geweld (dus zowel plegers en slachtoffers), een platform om, zonder te oordelen of dossiers op te stellen, hun verhaal te vertellen en hen te wijzen op de mogelijkheden om hun situatie te verbeteren. Het project wordt uitgevoerd door een team van vrijwilligers onder de vlag van de GGD Zaanstreek-Waterland. Het project bestaat naast de gesprekken van vertrouwenspersonen met cliënten uit een website, een facebookpagina en een twitteraccount. Er zijn PR materialen zoals flyers, bierviltjes en posters. Mannen Kom Op! is een preventieproject dat zich impliciet op mannen, maar expliciet op een hele community, richt. Geïnterviewde projectleider: *“Preventie betekent dat je er bij wilt zijn voordat*

de boel klappt. Dus je moet weten waar de boel kan gaan escaleren, en dat in een vroeg stadium. Maar dat is een heel breed vraagstuk. Dat betekent dat je kennis moet hebben van issues zoals verslaving, financiële nood en psychische problematiek. Concreet betekent dit dat je er voor iedereen met problemen moet zijn. Maar niet bij iedereen met problemen komt huiselijk geweld voor. Daarom willen we met dit project de mensen in de wijk bereiken. Niet alleen die mannen die geweld gebruiken of meemaken, maar iedereen. Want die mannen die te maken hebben met geweld, je weet niet precies wie dat zijn, dus wil/moet je iedereen bereiken. En we weten uit onderzoek dat het in alle lagen van de samenleving gebeurt. En aan iemands voorhoofd of voordeur kan ik niet zien of iemand tot die doelgroep behoort. Dus is binnen het project bepaald dat eigenlijk alle inwoners uit de regio tot de doelgroep behoren. Daarom zetten we in op primaire preventie. Door ons te richten op bewustwording in een brede doelgroep resulteert dat ook in het bereiken van directe slachtoffers van huiselijk geweld”. Het preventieteam huiselijk geweld is een team van negen vrijwillige vertrouwenspersonen, voorlichters en een PR groep. De vrijwilligers hebben trainingen gevolgd rondom agressief gedrag in huiselijke sfeer, communicatiestijlen en psychopathologie. Het preventieteam staat in nauw contact met een medewerker van het SHG (tegenwoordig Veilig Thuis). Indien de vertrouwenspersonen twijfel hebben over hoe te handelen dan kunnen zij hierover overleggen met de contactpersoon van de SHG (Veilig Thuis). De groep vrijwilligers komt eens in de zoveel tijd bijeen voor supervisie. De werkzaamheden van het preventieteam kunnen grofweg ingedeeld worden in bewustwordingsactiviteiten en de cliëntcontacten met de vertrouwenspersonen.

BEWUSTWORDINGSACTIVITEITEN: de vrijwilligers van het preventieteam gaan de wijken in en zoeken de wijkbewoners op. Deels samen met acteurs, deels zelfstandig. Door met wijkbewoners te praten over voor hun moeilijke onderwerpen wordt het gevoel van machteloosheid kleiner. Zo ontstaan mogelijkheden om de problemen op te lossen. De vrijwilligers geven ook informatie en helpen bij het zoeken naar de juiste hulpverlening. Kennis van de sociale kaart is essentieel voor de doorverwijsfunctie in het werk van de vertrouwenspersonen.

CLIENTCONTACTEN MET VERTROUWENSPERSONEN: de vertrouwenspersonen hebben telefonische gesprekken, soms hebben bellers ook behoefte aan lieflijke ontmoeting. De vertrouwenspersonen gaan ook wel eens een kop koffie drinken met de bellers. Voor de vertrouwenspersonen is het belangrijk om niet in de rol van de hulpverlener te gaan zitten, dat zijn ze namelijk niet. Ze proberen de bellers wel die kant op te bewegen: doorverwijzen en eventueel te ondersteunen door mee te gaan naar maatschappelijk werk of iets dergelijks. Maar de vertrouwenspersonen zijn alleen ter ondersteuning, niet voor langdurige maatjescontacten.

Het werkt bevorderend dat het vrijwilligers zijn. Vrijwilliger: *“Bijvoorbeeld we hadden een keer een cliënt die heftig reageerde op het onderwerp en die schold behoorlijk op zijn vrouw, en die zat met één van onze vertrouwenspersonen te praten en die zei vanuit zijn eigen rol: Je bent ook eigenlijk een klootzak. En toen begreep die cliënt wel wat hij bedoelde. De vertrouwenspersoon ging zitten op het niveau van de cliënt. Als hulpverlener kan je dat niet doen, als vrijwilliger wel”*.

4.3 *Risicofactoren en Beschermende factoren*

Wat betreft de beschermende factoren op het niveau van de community gaat het om het betrekken van de gemeenschap, het bespreekbaar maken van (taboes op het terrein van) genderideologie en rollen en hun samenhang (bv gebrek aan zelfbeschikking vrouw, suprematie man) met geweld in afhankelijkheidsrelaties, het bespreekbaar maken van het (gendergerelateerde) legitimeren van geweld en van het taboe op hulp zoeken en geven bij geweld. Specifiek gaat het om sociale steun, het stimuleren van een open en niet-oordelend gesprek tussen cliënt en vertrouwenspersoon, laagdrempelige hulp en uitwisseling van ervaringen. Naar mannen toe zijn de beschermende factoren: gelijkheid naar gender, versterking van de zorgattitude, zelfreflectie en nemen van verantwoordelijkheid voor geweld, vaardigheid in communicatie over het geweld, verwerken van trauma/geweldservaringen in jeugd, doorbreken taboe van spreken over en hulp zoeken/bieden bij geweld, verandering in normbesef over toepassing van geweld in gezinsrelaties.

Link met emancipatie/gender:

De link met gender ligt in verschillende kenmerken van het project:

- De focus op mannen brengt een specifieke werkwijze met zich mee. Dit kan getypeerd worden door: status niet verliezen. Het gaat dan om het werken middels anonimiteit en geen dossieropbouw. Daarnaast is maatwerk door individuele gesprekken van belang.
- Het project speelt in op het taboe dat er voor mannen bestaat om te praten over moeilijke onderwerpen en/of toe te geven dat ze hulp nodig hebben. Zij ervaren schaamte en angst voor statusverlies indien zij als pleger of slachtoffer naar buiten treden.
- In de trainingen van de vrijwilligers wordt stilgestaan bij de genderdynamieken die een rol spelen bij huiselijk geweld.
- In de samenstelling van het team wordt gestreefd naar diversiteit

4.4 *Succesfactoren*

Het preventieteam huiselijk geweld zorgt ervoor dat huiselijk geweld voorkomen kan worden. Mannen en vrouwen in een relatie of gezin waar geweld voorkomt, voelen zich vaak ongelukkig en lopen met verschillende problemen rond. Zij weten niet hoe hun problemen kunnen worden opgelost. Omdat het geweld achter gesloten deuren plaatsvindt, denken zij dat dit een zaak van henzelf is en het zelf moeten oplossen. Het probleem is dat dit vaak niet lukt en zij zich machteloos voelen. De vrijwilligers van het preventieteam maken de problemen voor de mannen bespreekbaar. Zij zoeken de mannen op. Door met hen te praten over voor hun moeilijke onderwerpen wordt het gevoel van machteloosheid kleiner. Zo ontstaan mogelijkheden om de problemen op te lossen. De vrijwilligers geven ook informatie en helpen bij het zoeken naar de juiste hulpverlening. Er is nog geen onderzoek gedaan naar de opbrengsten van Mannen Kom Op maar de vernieuwende inzet van vrijwilligers in de aanpak van huiselijk geweld draagt daar volgens de betrokkenen zeker aan bij. Geïnterviewde projectleider: *“Passie bij de vrijwilligers. Iedereen doet het met een reden. Daar zit ook een persoonlijk verhaal achter. Iedereen wil er voor gaan. We zitten in hulpverleningsland in een kanteling: eigen kracht, etc. Beseffen steeds meer de meerwaarde van de vrijwilliger. In het begin dacht iedereen: dit onderwerp is te heftig voor de inzet van vrijwilligers. Maar het kan juist ook met vrijwilligers. In de aanpak van huiselijk geweld zit dit project aan het begin van de aanpak”.*

4.5 *Wat missen de betrokkenen nog?*

Voor de komende tijd gaat het project zich richten op de volgende ontwikkelingen:

- Meer bekendheid genereren voor het onderwerp en het bestaan van de vertrouwenspersonen
- Nu zijn onze acties en campagnes nog te vrijblijvend. Geïnterviewde projectleider: *“We zien bij omstanders schrikreacties. Mensen worden geconfronteerd met hun eigen situatie. Mensen zien hun eigen situatie terug of de situatie van de ouders terug of omstanders. Bij de straatacties hebben we met auteurs gewerkt. We kregen veel reacties, iedereen die op straat langs liep die zei er wel wat van. Iemand sprong van de fiets af, om er tussen te staan. Deze keer was het gericht op het krijgen van het gesprek, Maar nog niet ingespeeld op het iets doen met de reacties. Dat theater werkt goed, met acteurs op straat tussen winkelend publiek. Korte scènes, maar nu willen we werken aan meer diepgang. We zijn in gesprek met een amateurtheaterclub om korte scènes in te studeren naar de thema's die we net ook al noemde. Die in te studeren, en dan met de omstanders met tools aan de slag gaan. Om mensen meer inzicht krijgen in het beeld van hoe zit het bij mij? Waar kan ik er dan mee naar toe?”.*

5 *STUK*

De beschrijving is gebaseerd op:

- Ceulemans, A., Wyckaert, V. & Makine, A. (2011). Forumstuk Antwerpen. Onderzoek naar veranderingen van jongeren na hun deelname aan Forumstuk. Antwerpen: BZN Atlas.
- Stichting STUK. Eindverantwoording ACTIE ENTER 2013
- Stichting STUK. Actie ENTER 2 2014-2015.
- STUKBOEK
- Website: <http://stukonline.com/>
- Interview met coach/regisseur
- Interview met 4 meiden die filmpjes maken voor How to survive Pleegzorg, waarin zij toekomstige pleegzorgkinderen en gezinnen tips geven over het opgroeien in een pleeggezin.
- Interview met 2 meiden die deel uitmaken van het bestuur van STUK.

5.1 *Doelgroep*

De doelgroep bestaat uit jongeren (en volwassenen) die zelf ervaring hebben (gehad) met geweld en alle jongeren. STUK richt zich niet expliciet op bepaalde risicogroepen, maar op jongeren in het algemeen. Het is in eerste instantie bedoeld voor jongeren die zelf te maken hebben met een vorm van kindermishandeling, huiselijk geweld of seksueel misbruik. Het kan zijn dat zij dat zelf hebben meegemaakt of dat er iemand in de omgeving is die ermee te maken heeft en hen een onmachtig gevoel geeft. De eerste groep betreft dus de directe slachtoffers, de tweede groep de omstanders die ermee te maken hebben. De derde groep zijn alle andere jongeren. De vierde groep is de groep die in de toekomst met gezinnen en jongeren gaat werken.

Preventie: Primair en Tertiair

Domein: School/Jongeren/Peers

5.2 *Werkwijze*

Voorgeschiedenis

STUK is ontstaan vanuit de behoefte van een jongere die een theaterstuk wilde maken over kindermishandeling. Samen met de huidige projectleider en een regieleider heeft een tiental jongeren vervolgens een theaterstuk ontwikkeld. De jongeren van STUK werden geworven vanuit het werk dat de projectleider op dat moment met hen deed. Het theaterstuk is gebaseerd op de eigen ervaringen van de jongeren. Zij spelen een halfuur theater en gaan vervolgens met het publiek in discussie wat men aan kindermishandeling kan doen. STUK heeft in Nederland op allerlei scholen en in theaters gespeeld. Er zijn ook voorstellingen gegeven in België. Vervolgens is STUK workshops gaan geven aan jongeren en hulpverleners en hebben de jongeren lesmateriaal (dvd met o.a. het theaterstuk erop) ontwikkeld. In de workshops aan hulpverleners gaan de jongeren in op de weerstanden die hulpverleners tegenkomen om kindermishandeling te melden. Doel van STUK is allereerst informatie verstrekken: wat is kindermishandeling en huiselijk geweld? En wat kunnen mensen doen als zij er (zelf) mee te maken krijgen? Daarnaast heeft STUK tot doel om kindermishandeling en huiselijk geweld uit de anonimiteit en taboesfeer te halen. STUK wil mensen met elkaar in gesprek brengen over dit onderwerp en hen aan het denken zetten over wat zij kunnen doen tegen huiselijk geweld en kindermishandeling. Een ander

belangrijk doel is slachtoffers duidelijk maken dat zij zich niet hoeven te schamen voor wat hen is overkomen. Kern van STUK is dat activiteiten altijd een initiatief zijn van jongeren die zelf ervaringen hebben met geweld, of die het van dichtbij hebben meegemaakt. Zij voeren de activiteiten uit, al dan niet in samenwerking met en ondersteund door anderen.

De interventie

STUK begon met interactief theater en workshops en doet nu veel meer:

STUKVIDEO'S

Jongeren uit Nederland en Vlaanderen vertellen in (Youtube-)filmpjes over hun eigen ervaringen met huiselijk geweld, kindermishandeling, seksueel misbruik en geweld in opvoeding en relaties. Deze filmpjes hebben een ondersteuningsfunctie naar andere jongeren (die zelf of in de omgeving te maken hebben met geweld). Zij kunnen STUK gebruiken zodat zij zich niet alleen voelen, om met elkaar te praten over geweld in opvoeding en relaties, en om hulp te zoeken.

STUKBOEK

STUKBOEK is gemaakt door jongeren die zelf te maken hebben gehad met kindermishandeling (voorheen de STUKVIDEO'S). Het boek bevat zeventien verhalen van deze jongeren, zeven discussies tussen scholieren, cijfers, tips en de STUKQUIZ. Het STUKBOEK wordt gebruikt in workshops die jongeren geven. Stichting Kinderpostzegels heeft geld vrij gemaakt om de jongeren te trainen zelf de workshops te geven. Acht tot tien jongeren kunnen dat nu zelfstandig. Deze jongeren kunnen iets over hun ervaringen vertellen, laten filmpjes zien en doen de STUKQUIZ. Aan de hand van rode en groene kaarten ('is dit kindermishandeling ja of nee?') gaan de jongeren het gesprek aan met het publiek.

HOW TO SURVIVE PLEEGZORG

Vijf meiden geven in een film toekomstige pleegzorgkinderen en gezinnen tips over het opgroeien in een pleeggezin. De Hogeschool van Amsterdam (opleiding MWD) is van plan in het studiejaar 2015/2016 de film en workshops een plaats te geven in het lesprogramma. Deze zullen ook gebruikt worden in de trainingen voor aanstaande pleegouders. De workshops zijn bedoeld om toekomstige professionals in te laten zien dat zij ook het belang van het kind moeten betrekken. De jongeren vinden dat de manier waarop jeugdzorg handelt soms in tegenstelling is met de behoeften van pleegzorgkinderen. In de film behandelen zij onderwerpen die niet besproken worden en laten zij zien hoe pleegkinderen pleegzorg ervaren. De doelgroep die zij ermee willen bereiken wordt gevormd door pleegkinderen, pleeggezinnen en (toekomstige) professionals die met deze doelgroepen (gaan) werken. Doel is vanuit een positieve benadering de pleegzorg te verbeteren en pleegkinderen te vertegenwoordigen en ondersteunen bij hun vragen en behoeften en hen aanzetten hierover te praten.

ACTIE ENTER

ACTIE ENTER is ontstaan nadat jongeren vanuit STUK werden gevraagd om hun theaterstuk te spelen voor organisaties als Bureau Jeugdzorg. Ze waren destijds geschrokken van het feit dat professionals bang waren om over het onderwerp te praten. Beginnend professionals leren mishandeling en geweld te signaleren, hun eigen weerstanden kennen en in een team van professionals te organiseren. Doel is dat de aandacht voor kindermishandeling en huiselijk geweld standaard in het curriculum van relevante beroepsopleidingen wordt opgenomen. ACTIE ENTER vraagt scholen wat opleidingen al doen met het thema en wat zij aan (extra) ondersteuning kunnen bieden. Zowel vorig jaar als dit jaar is STUK - met financiële ondersteuning van Kinderpostzegels - een samenwerking aangegaan met de Hogeschool van Amsterdam (domeinen 'Maatschappij en Recht' en 'Gezondheid'). Voorbeelden van de acties op de Hogeschool van Amsterdam: aandacht voor het onderwerp in een themaweek (MWD), de ontwikkeling van het verdiepingsprogramma 'Geweld in opvoeding en relatie' (Fysiotherapie) en het lesprogramma 'Veiligheid' op te nemen in het curriculum (SPH), jongeren verzorgen de STUKquiz en Forumtheater aan studenten van MWD en SPH en vierdejaars studenten zijn aangesteld als vertrouwenspersonen voor medestudenten (SPH, MWD, HBO-V, CMV, Pedagogiek). ACTIE ENTER 1 betreft de samenwerking met de Hogeschool van Amsterdam. Bij ACTIE ENTER 2 zijn vervolgens meer opleidingen binnen deze hogeschool betrokken, alsook hogescholen en universiteiten elders in Nederland. ACTIE ENTER 3 zal zich alleen op alle Pabo opleidingen richten.

5.3 *Risicofactoren en Beschermende factoren*

Verwerking van slachtofferschap of getuige zijn van geweld staat bij STUK centraal. De jongeren vertellen er vanuit hun eigen ervaringen over. Als jongeren door STUK met hun ervaringen naar buiten treden, wordt er op dat moment altijd op ingegaan. Daarnaast wordt er bij alle activiteiten die STUK doet voor gezorgd dat het vangnet op school en andere instanties bij jongeren bekend is. Jongeren worden ook aangespoord om eerst over hun ervaringen te praten met iemand die zij in vertrouwen nemen. In het geval van ACTIE ENTER zijn er ouderejaars studenten die als vertrouwenspersoon fungeren voor andere studenten. Studenten hebben zo de keuze om met een volwassene of jongere als vertrouwenspersoon te praten. Als jongeren met hun ervaringen naar buiten zijn gekomen, laten ze de (na)zorg vervolgens aan de school over. In sommige gevallen vraagt de projectleider nog wel na hoe het hen is vergaan.

Als het gaat om meisjes, besteedt STUK aandacht aan hun eigen kracht en zelfvertrouwen. Meisjes zijn een rolmodel voor anderen doordat zij anderen vertellen over hun ervaringen. Bij forumtheater komt de economische zelfstandigheid van meisjes/vrouwen ook aan bod. Vanuit hun eigen ervaringen hebben de jongeren bijvoorbeeld een scène bedacht van een moeder die niet weggaat bij haar gewelddadige man, omdat zij verder geen inkomen heeft. Ook zaken als geweld in gezinsrelaties en het verwerken van geweldservaringen krijgen (bij jongens en meisjes) aandacht, doordat het publiek over scènes in discussie gaat en vragen over een scène stellen. Vaardigheid in communicatie komt bij meiden vanzelf aan bod, omdat meiden vinden dat erover praten een belangrijkere vaardigheid is voor het oplossen van geweld.

Gelijkheid is een onderwerp waar binnen STUK meer aandacht aan besteed kan worden. Het komt wel in scènes naar voren dat gelijkheid de norm is, maar de projectleider zou dat veel meer uit willen werken in de activiteiten. Ook de zorgattitude van jongens moet meer expliciet de aandacht krijgen. Bij activiteiten als Forumtheater en STUKquiz komt vaak naar voren dat de zorgattitude bij de meeste jongens niet goed ontwikkeld is. Wel ontstaat vaak discussie over zorg, omdat er altijd jongens in het publiek zitten die wel een bepaalde zorgattitude ontwikkeld hebben. De projectleider denkt na over een manier waarop er niet alleen discussie ontstaat over de zorgattitude van mannen, maar dat zij deze ook daadwerkelijk gaan ontwikkelen. Dat geldt ook voor het nemen van verantwoordelijkheid voor geweld.

5.4 *Link met emancipatie/gender*

Het basisidee van STUK is dat iedere jongere een eigen mening over geweld mag hebben. Dat kan een andere mening zijn dan die van hun cultuur of de groep om hen heen. Verder is de insteek van STUK dat jongeren zelf onderwerpen moeten aandragen waar ze mee aan de slag gaan. Gender is tot nu toe geen onderwerp geweest wat (specifieke) aandacht behoeft.

Verschillen tussen jongens en meisjes hebben daarom vaak geen aandacht bij STUK. Opkomen voor jezelf is bijvoorbeeld een thema dat zowel bij jongens als meisjes aan de orde komt (dus niet bewust alleen bij het versterken van de eigen kracht van meisjes). Jongens en meisjes verschillen vaak ook niet in hun opvattingen over geweld, aldus geïnterviewde betrokkenen. Er wordt dus met STUK vooral op het individu gericht: waar staat iemand voor? Cultuurverschillen komen wel vaak aan de orde, waar man-vrouw rollen dan ook besproken worden. In discussies komt regelmatig naar voren dat in bepaalde culturen de vrouw minderwaardig is aan de man en dat de man de regels in huis bepaalt. Deze genderongelijkheid is vooral bij de STUKquiz en het forumtheater altijd onderwerp van gesprek. Zo wordt er een scène, door de jongeren zelf bedacht, gespeeld waarin de nieuwe vriend van een moeder haar zoon agressief behandelt en moeder onder druk zet. Moeder is heel zorgzaam en werkt hard, terwijl haar nieuwe vriend weinig uitvoert. Er wordt verschillend op een dergelijke scène gereageerd. Jongens zijn in eerste instantie geneigd een reactie te geven die vaak meer geweld tot gevolg heeft. Meisjes dragen doorgaans als oplossing aan om erover te praten. Vervolgens wordt, eventueel in aparte jongens en meidengroepen, gesproken over oplossingen voor geweld. In deze activiteiten komt ook de eigen kracht van vrouwen naar voren. Meisjes praten op een podium vanuit hun eigen kracht en met goede woorden en overtuigende argumenten. Zij laten zich niet opzij zetten, en stappen naar voren in plaats van hun excuses aan te bieden. Dat doen meiden uit het publiek uit zichzelf.

In andere activiteiten, zoals ACTIE ENTER en HOW TO SURVIVE PLEEGZORG is de aandacht voor genderverschillen meer impliciet. Het doel van ACTIE ENTER is niet om opleidingen op genderverschillen te wijzen. Er wordt vooral gecontroleerd of een opleiding daadwerkelijk serieus met het onderwerp aan de slag gaat. In HOW TO SURVIVE PLEEGZORG zit empowerment van de deelnemende meiden verweven. Zij durven open over zichzelf en hun ervaringen te spreken en dragen alternatieven aan voor de pleegzorg.

De effecten van STUK verschillen per groep. In de ene groep wordt gemakkelijk over eigen ervaringen gesproken, in andere groepen gebeurt weinig. De projectleider ziet in de praktijk verschil wat betreft sekse. Meiden praten gemakkelijker over geweldsituaties dan jongens. Jongens vertonen vaak eerst stoer gedrag, maar als zij zich veilig genoeg voelen, doen zij ook hun verhaal. Ook wat betreft cultuur worden verschillen gezien. De Nederlandse jongens spreken er nauwelijks over. De meiden uit de Noord-Afrikaanse cultuur praten onderling heel gemakkelijk, zij zijn heel open. Echter, voor deze meiden brengt het naar buiten toe brengen, of voor de camera spreken, schaamte voor de groep met zich mee. De projectleider meent dat jongeren uit Zuid-Amerikaanse groepen het gemakkelijkst zijn om mee samen te werken, omdat geweld en onmacht voor hen bij het leven lijken te horen. Daarnaast speelt ook opleiding een rol. De projectleider merkt in de praktijk dat hoger opgeleiden vaak het lastigst te bereiken zijn. Zij zijn geneigd te rationaliseren en concluderen al snel dat geweld bij hen niet voor komt. Terwijl jongeren op een MBO school vaak al snel over hun ervaringen vertellen.

5.5 Succesfactoren

Er is geen onderzoek gedaan naar de redenen waarom STUK zo goed aansluit bij de doelgroep en het zo'n succes is. STUK doet doorgaans aan het einde van een activiteit een evaluatie om jongeren te vragen wat zij ervan vonden (en of zij eventueel van gedachten veranderd zijn).

Onderstaande succesfactoren zijn in de interviews door betrokkenen genoemd.

De boodschap van STUK (klein en zuiver): Ik heb het zelf meegemaakt, ik vind het niet normaal. Als jij het meemaakt, mag je het ook niet normaal vinden. De eenvoud zit in het feit dat jongeren eerlijk vanuit zichzelf over geweldsituaties spreken. Er wordt veiligheid en vertrouwen geboden, zodat zij de vrijheid voelen over hun ervaringen te vertellen. Van belang is dat zij dat met kracht doen. Juist door erover te praten, doorbreken zij het taboe. De betrokkenen geloven dat als je iemand onherkenbaar en zielig in beeld brengt, je bevestigt dat geweld iets is waar mensen eigenlijk niet over moeten spreken. De projectleider merkt in de praktijk dat voor jongeren die te maken hebben met seksueel misbruik, kindermishandeling of huiselijk geweld, het besef dat zij niet de enige zijn en dat het niet hun schuld is, heel belangrijk is.

Belangrijk element van STUK is dat jongeren mogen zijn wie zij zijn. De jongeren die te maken hebben met geweld associëren die ervaring vaak als negatief. Bij STUK kunnen ze hun ervaring gebruiken voor anderen die dezelfde situatie meemaken. Daar worden de jongeren allemaal steviger van, maar zij moeten wel zelf die stap zetten. Jongeren moeten eerst bij zichzelf nagaan of zij wel over het thema willen spreken, of dit het juiste moment is om dat te doen en of ze zich veilig genoeg voelen dat te doen. Als jongeren besluiten aan STUK mee te doen, hebben zij nog steeds de vrijheid om wel of niet iets over zichzelf te vertellen.

STUK neemt bewust geen therapeutische vorm aan. De projectleider merkt tijdens de activiteiten dat STUK op een aantal manieren werkt. Met jongeren die zich weinig in een groep laten zien, wordt een gesprek aangegaan. Aan de zorgcoördinator wordt dan bijvoorbeeld gevraagd om na een aantal weken nog eens naar deze jongeren te vragen. Er zijn ook jongeren die meteen aangeven dat wat zij thuis meemaken nog veel heftiger is dan wat in het theater wordt gespeeld. Deze jongeren zeggen het misschien vaker hardop, maar zeggen het met STUK in ieder geval in de nabijheid van andere jongeren met wie zij op school zitten. Daar zitten misschien ook weer jongeren tussen die het meemaken en er niet over durven te praten. Dan zijn er nog de jongeren die op dat moment zich veilig genoeg voelen om over hun eigen ervaringen te spreken. Dat kan tijdens het gesprek, in het nagesprek of wanneer zij

daarna iemand van STUK of een betrokkene van de school benaderen. STUK deelt ook informatie uit over waar jongeren terecht kunnen.

De benadering: voor jongeren, door jongeren. De projectleider noemt als meest succesvolle element dat jongeren over hun ervaringen spreken. Het publiek bepaalt zelf wat er met de informatie gebeurt. Maar de jongeren willen graag over hun ervaringen vertellen en dat werkt vaak beter en is confronterend. Andere jongeren kunnen zich daar aan spiegelen. Jongeren stralen uit: ik heb dat meegemaakt, maar ik ben meer dan dat. Zij zullen dat deel altijd met zich mee blijven dragen, maar kunnen er ook veel kracht uit putten. Anderen die naar deze jongeren kijken, luisteren en met hen in gesprek gaan kunnen door hen geïnspireerd raken. Bijkomend succes is dat jongeren door STUK ook thuis over hun ervaringen vertellen.

Er worden geen verschillen tussen jongens en meisjes gezien in het succes van STUK. Het basisprincipe is hetzelfde. Jongens en meisjes praten voor het eerst over geweld en zien in dat ze daar een eigen mening over kunnen hebben.

En dat het niet iets is wat normaal in de geschiedenis is en wat zij dus ook normaal weer gaan overdragen op hun eigen kinderen. Het doorbreken van intergenerationeel geweld vormt een belangrijk onderdeel van STUK. Soms willen mannen in het publiek een statement maken omdat zij de eerste vader in alle generaties van de familie zijn die geen gewelddadige opvoeding hanteert.

5.6 *Wat missen de betrokkenen nog?*

- Betrokkenen willen meer aandacht besteden aan zaken die met mannen te maken hebben. Daartoe gaat STUK nu onder andere de samenwerking aan met Trias Pedagogica.
- De effecten van armoede ter discussie stellen door STUK-activiteiten. In een aantal wijken in Amsterdam is veel armoede. Dat veroorzaakt veel stress en narigheid.
- De organisatie van STUK is op dit moment aan verandering onderhevig. Er was een projectleider die de gehele organisatie op zich nam. Op dit moment is er een actief bestuur dat langzaam de taken van de projectleider op zich gaat nemen. Daarmee hopen de betrokkenen dat STUK organisatorisch beter neergezet kan worden.

6 *STAY IN LOVE*

De beschrijving is gebaseerd op de volgende bronnen:

- Borne, A. van den. (2006). *Stay in love: Primaire preventie van relatiegeweld onder jongeren: Proces evaluatie*. Utrecht, Trimbos-instituut en Transact.
- Graaf, H. de, Meijer, S., Poelman, J. & Vanwesenbeeck, I. (2005). *Seks onder je 25e: definitieve resultaten*. Utrecht: Rutgers Nisso Groep.
- Kempes, M.M., Pelt, L. van, Beerthuisen, M.G.C.J., Boom, J., & Brugman, D. (2010). *Programma-integriteit en effecten van Stay in Love+. Een preventieprogramma voor 12-15 jarige VMBO scholieren dat partnergeweld beoogt te voorkomen*. Utrecht: Faculteit Sociale Wetenschappen, Vakgroep Ontwikkelingspsychologie Universiteit Utrecht.
- Van Oosten, N. (2011). *Methodebeschrijving Stay in Love: Databank Effectieve interventies huiselijk geweld*. Utrecht MOVISIE.
- Van Schaik, E. (2005). *Primaire preventie van partnergeweld onder jongeren. Literatuuronderzoek naar risicofactoren, inventarisatie en analyse van preventieprojecten, evaluatiestudie van Tiran-nie-soe*. Utrecht, TransAct.

Geïnterviewden:

- Nico van Oosten - Senior adviseur MOVISIE en mede ontwikkelaar Stay in Love
- Chris te Riele - Regio coördinator Stay in Love
- Aldert Hoek - Regio coördinator Stay in Love
- Aafke Braaksma - Van Kinsbergen college (school waar eind 2011 Stay in Love uitgevoerd werd)

6.1 *Doelgroep*

Jongeren van 12 tot 15 jaar in de eerste drie leerjaren van het VMBO. Uit onderzoek van de Graaf et al. (2005) komt naar voren dat deze lager opgeleide groep, vaker dan hoger opgeleide jongeren, hun eerste seksuele ervaringen op jongere leeftijd hebben. Daarmee lopen zij meer risico op verkeringsgeweld. Preventie: Primaire preventie (van relatiegeweld onder jongeren)

Preventie: Primair

Domein: School/Peers/Jongeren

6.2 *Werkwijze*

Voorgeschiedenis

Doel van Stay in Love is het voorkomen dat jongeren (in de toekomst) een gewelddadige (verkerings) relatie ontwikkelen. De methodiek beoogt dit door de doelgroep te ondersteunen in het ontwikkelen van een gezonde verkeringsrelatie: door het aanreiken van kennis, het bijbrengen van de juiste houding en het aanleren van vaardigheden. Ook de ouders worden erbij betrokken. De Stay in Love methode is zowel vanuit de praktijk als de theorie - stapsgewijs - ontwikkeld sinds 2004. Aan de huidige vorm van Stay in Love zijn twee eerdere versies van het programma voorafgegaan. De eerste vorm van Stay in Love vond plaats van 2004 tot 2006, de tweede (Stay in Love+) van 2007 tot 2010. Op basis van onderzoek, evaluaties met docenten en nieuwe inzichten vanuit de wetenschappelijke literatuur zijn het programma en de materialen eind 2010 aangepast. Een van deze aanpassingen is dat de tegenwoordige handleiding meer aanwijzingen voor de docent bevat dan voorheen en de structuur van de

docentenhandleiding overzichtelijker gemaakt is. Ook zijn extra aanwijzingen opgenomen over het belang van veiligheid. Bovendien is het nu voor de docenten mogelijk om feedback te vragen via www.movisieacademie.nl. Verder zijn de lessen beter aangepast aan de lesduur. Hierdoor dient de integriteit van het programma toe te nemen en het gevoel van overbelasting onder docenten af te nemen. Vanaf 2011 is de methode landelijk geïmplementeerd. Hiervoor zijn regiocoördinatoren getraind, die in hun eigen werkgebied docenten benaderen en trainen.

Ontwikkeling en onderbouwing

Stay in Love is ontwikkeld aan de hand van het Preffi-instrument (Molleman et al, 2003). Dit instrument beschrijft hoe een preventieprogramma stapsgewijs (probleemanalyse, determinanten, doelgroep en doelen) ontwikkeld kan worden op basis van wetenschappelijke literatuur. Deze procedure is gevolgd om tot een inhoudelijke onderbouwing van de methodiek te komen. De inhoud van de latere versie van Stay in Love is deels gebaseerd op de Canadese interventie Safe Dates (Foshee et al, 2010). Foshee en collega's vonden in een quasi-experimenteel onderzoek in de praktijk dat Safe Dates tot vier jaar na het volgen van het programma leidt tot minder gebruik van geestelijk, matig lichamelijk en seksueel geweld. Dat geldt vooral voor leerlingen die voorafgaand aan het programma geen of matig ernstig geweldgebruik rapporteerden. Safe Dates betreft een lesprogramma om dating violence te voorkomen. Stay in Love is inhoudelijk te vergelijken met het verkorte programma - bestaande uit vier lessen - van Safe Dates. De lessen van Stay in Love zijn in eerste instantie uitgebreid van drie naar vier lessen, omdat onderwerpen uit Safe Dates werden toegevoegd. In de laatste versie werden nog twee interactieve lessen en twee verwerkingslessen (in huidige vorm in totaal 7) toegevoegd, omdat gebleken was dat het aantal lessen niet toereikend genoeg was voor de onderwerpen die aan de orde moesten komen. Daarnaast is de doelgroep betrokken bij de ontwikkeling van Stay in Love. Jongeren spraken zich in focusgroepen uit over concepten van de lessen, materialen en werkvormen. Onder de jongeren is een onderscheid gemaakt naar jongeren zonder verkeringservaring, jongeren met verkeringservaring en jongeren met verkeringservaring waarbij sprake was van geweld. Het betrof een diverse groep jongeren, zoals jongeren uit verschillende klassen van VMBO en HAVO, (allochtone en autochtone) jongeren die elkaar ontmoeten in een wijkcentrum en jonge vrouwen die slachtoffer zijn geweest van relatiegeweld. Sommige groepen hielpen mee met het ontwikkelen van het materiaal, anderen gingen er zelf mee aan de slag. Zo zijn eerdere versies van Stay in Love getest op diverse scholen. In de huidige versie van de methodiek zijn de praktijkervaringen verwerkt.

De interventie

Stay in Love wordt regionaal aangestuurd en gecoördineerd door regiocoördinatoren (GGD/GGZ). Zij werven en trainen in hun werkgebied professionals, zoals docenten en vertrouwenspersonen, op vmbo-scholen voor deelname aan het programma. Ook wordt vanuit het concept van vindplaatsgericht werken samenwerking gezocht met sleutelfiguren in contexten waar veel jongeren komen, zoals het jongerenwerk. Op deze manier moet de boodschap van Stay in Love sterker overkomen en beter beklijven bij de jongeren als zij vanuit meerdere bronnen over de methodiek horen.

Wat verder van belang is bij de regionale samenwerking is dat de verschillende instellingen die te maken hebben met jongeren (en met problematiek rondom verkeringsgeweld) dezelfde boodschap hanteren en ook beschikken over materialen. Op deze manier wordt één lijn getrokken tussen de diverse organisaties. Wanneer scholen zijn benaderd, wordt via het management, de docenten, de vertrouwenspersonen en mentoren van de scholen de doelgroep bereikt. Docenten en andere professionals volgen ter voorbereiding op de lessen een training waarin zij leren hoe de lessenserie uit te voeren. Na afronding krijgen zij de beschikking over de docentenhandleiding, die in 2011 is uitgegeven door een samenwerkingsverband van MOVISIE, Trimbos-instituut, Dimence en Parnassia Bavogroep. In de docentenhandleiding wordt aandacht besteed aan de competenties die docenten nodig hebben, waaronder het scheppen van een veilige sfeer en het kunnen inleven in de leefwereld van jongeren die bezig zijn met verkering, verliefdheid, partnerkeuze en seksualiteit. De handleiding bevat een beschrijving van de lessen, een aantal werkbladen voor de leerlingen en (werk)materialen. Het gaat hierbij om de volgende materialen: een poster, een folder, een relatietest, een tweetal flyers met tips voor een goede verkering en een nieuwsbrief voor de ouders. De materialen kunnen ook los van de lessen ingezet worden en aangeboden door andere organisaties in de regio. Ter ondersteuning van de lessen is er ook een website die te raadplegen is, ook door jongeren die de lessen niet volgen. De website

biedt onder andere de mogelijkheid om problemen - persoonlijk - per e-mail voor te leggen aan een deskundige van een van de deelnemende GGZ/GGD instellingen. De lessenserie bestaat in totaal uit zeven lessen, van elk vijftig minuten. Vijf daarvan zijn lessen waarin kennis, houding en vaardigheden centraal staan. Tijdens de overige twee lessen voeren de leerlingen in tweetallen of kleine groepjes een opdracht uit aan de hand van wat zij hebben geleerd. Het advies van de ontwikkelaar is om een maximum van twee weken tussen de lessen te hebben en de verwerkingslessen binnen vier weken na afloop van de eerste vijf te houden. Aan het einde van de lessenserie organiseert de school een ouderavond over het onderwerp verkering, waarop de leerlingen tevens het resultaat van de opdracht presenteren.

6.3 *Risicofactoren en Beschermende factoren*

Stay in Love betreft een combinatie van het bevorderen van gezonde relaties en relatievaardigheden en het voorkomen van grensoverschrijdend gedrag en geweld. Wanneer een leerling door de methode naar buiten treedt met een geweldservaring, kan deze bij de docent terecht of bij een andere professional binnen de school. Er dient vanuit de school ook contact te zijn met een preventieafdeling van de GGD of met een andere professional in het netwerk waar jongeren (zonder wachtlijsten) terecht kunnen voor hulp. Door betrokkenheid van een preventiemedewerker bij de trainingen (voor docenten) en aanwezigheid bij de ouderavond, wordt beoogd de drempel te verlagen in het zoeken van hulp bij geweld. In een internationaal literatuuronderzoek van Van Schaik (2005) is gezocht naar wat bekend is over risico- en beschermingsfactoren voor partnergeweld. De ontwikkelaar verwijst verder naar aanvullende losse publicaties die gebruikt zijn om een zo volledig mogelijk beeld te krijgen van de risico- en beschermingsfactoren (Harned, 2002; Black et al., 2010; Ehrensaft, 2008; Gover et al., 2008; Schewe, 2007). De ontwikkelaars van Stay in Love maken een onderscheid tussen factoren die niet of nauwelijks te beïnvloeden zijn (factoren die risicogroepen aanduiden) en factoren die wel te beïnvloeden zijn en vertaald kunnen worden in doelen en lesinhouden. Hofhuizen (in: Van den Borne, 2006) heeft via een schriftelijke vragenlijst onder 550 leerlingen die Stay in Love zouden gaan volgen, onderzocht in hoeverre een aantal van de gevonden risicofactoren op hen van toepassing was.

Via dit onderzoek werd bevestiging gevonden voor de risicofactoren controlerend gedrag, isolerend gedrag, seksueel grensoverschrijdend gedrag, zich verantwoordelijk voelen voor de problemen van de partner, omgaan met kritiek, reactie op getuige zijn van ruzies van anderen en overmatig alcoholgebruik. Beschermende factoren zijn bijvoorbeeld wensen en grenzen kunnen aangeven, weten hoe je onderhandelt als je niet hetzelfde wilt en dat ook kunnen. De visie die ten grondslag ligt aan de risico- en beschermende factoren is dat het belangrijk is om gedragingen als isolerend en controlerend gedrag op te nemen in een lesprogramma. Dit omdat het gedragingen betreffen die leerlingen gemakkelijk niet als controlerend, maar als liefdevol kunnen zien. Het is voor jongeren belangrijk om het verschil te leren zien tussen gedrag dat daadwerkelijk getuigt van liefde, zorg en respect en risicovol of grensoverschrijdend gedrag dat later kan ontaarden in geweld.

6.4 *Link met emancipatie/gender*

Er is weinig aandacht voor genderspecifieke zaken bij Stay in Love, omdat volgens de betrokkenen in de wetenschappelijke literatuur geen eenduidig geluid bestaat over dit onderwerp. Volgens de geïnterviewde projectleider komt in veel onderzoeken naar voren dat meisjes het geweld initiëren en wellicht ook het vaakst gebruiken, maar tegelijkertijd zijn het ook de meisjes die de hardste klappen opvangen.

Daarnaast is het een lastig punt om binnen een relatie de vinger te leggen op genderverschillen. Er zijn allerlei normen over hoe jongens en meisjes zich behoren te gedragen. Wanneer de ontwikkelaars dit onderwerp er echter in zouden betrekken, dan zou het lesprogramma zich nog verder moeten uitbreiden. Er is nu bewust gekozen om de nadruk te leggen op de manier waarop mensen in een verkeringsrelatie met elkaar omgaan. Er wordt dus op individueel niveau naar de dynamiek binnen een relatie gekeken, en niet vanuit theorieën op een maatschappelijk of breder onderzoeksniveau. Het op maatschappelijk niveau bekijken van genderverschillen heeft volgens de geïnterviewde projectleider

als valkuil om in stereotypen te vervallen en dat is niet effectief. Daarom richt Stay in Love zich op het individuele niveau: wat heeft iemand aan kwaliteiten in huis? In de lessen oefenen leerlingen dan ook met positieve relatievaardigheden, met grenzen stellen en wensen uiten. Iedere leerling oefent met dezelfde vaardigheden op het eigen niveau om zichzelf daarin te verbeteren. Er wordt gebruik gemaakt van individuele opdrachten, maar ook groeps gesprekken waarin leerlingen kennis en ervaring uitwisselen en zich aan elkaar kunnen spiegelen. In het lesprogramma wordt wel rekening gehouden met sekse en seksuele voorkeur. Daarnaast is het ook geschikt voor jongeren met uiteenlopende culturele en religieuze achtergronden. De methode gaat uit van een multiculturele samenleving en dus ook van klassen die multicultureel zijn samengesteld. In de lessen wordt aandacht besteed aan verschillen in normen en waarden ten aanzien van relaties/verkering en hoe jongeren daarin hun eigen houding kunnen ontwikkelen. Ook in de vormgeving, het beeldmateriaal (foto's) en de ervaringsverhalen is naar eigen zeggen op een terughoudende manier rekening gehouden met verschillende (culturele) achtergronden van jongeren, met sekse en met seksuele voorkeuren. De ontwikkelaars hebben geprobeerd om seksuele diversiteit in de seksuele voorkeur te verwerken. Zo hebben zij gekozen voor een logo met twee (knuffelende) parkieten. Ook zijn in de materialen afbeeldingen van zowel een jongen en een meisje als van twee jongens en twee meisjes opgenomen en van beide seksen met verschillende huidskleuren. Verder wordt in neutrale termen gesproken over partners in een relatie. In de praktijk heerst echter vaak een heteronorm. Hoe daarmee om te gaan en op in te spelen, hangt af van de tolerantie en (daarmee) van de veiligheid binnen de leerlingengroep. Er wordt doorgaans lesgegeven aan bestaande (naar sekse gemengde) klassen. Soms wordt in aparte jongens- en meisjesgroepen gewerkt (versterking onderlinge empowerment). Voor jongeren met een religieuze achtergrond is het bijvoorbeeld niet gepast om in het openbaar over (de keuze voor) een verkeringsrelatie te spreken of om er in een gemengde groep over te praten. Voor hen kan de samenstelling van de groep van invloed zijn op hun gevoelens van veiligheid. In de praktijk bepaalt de docent of in aparte groepen gewerkt wordt, afhankelijk van het verloop van de les, de dynamiek van de klas en de onderlinge relaties in de groep.

De resultaten van het evaluatie onderzoek onder leerlingen laat zien dat het preventiemateriaal meer gebruikt wordt en positiever wordt beoordeeld door meisjes dan door jongens. Wellicht zijn relaties en relatiegeweld meer een meisjesonderwerp, of praten meisjes gemakkelijker over deze onderwerpen dan jongens. Het kan ook betekenen dat het materiaal te weinig is afgestemd op de “niet praten maar doen” instelling van jongens.

6.5 *Succesfactoren*

Kempes et al.(2010) vonden in een quasi-experimenteel onderzoek in de praktijk dat Stay in Love een kortdurend en klein positief effect had op kennis, houding en vaardigheden ten opzichte van verkeringsgeweld van leerlingen van de eerste drie leerjaren van het vmbo. De effecten voor houding waren twee keer zo groot als die voor kennis en vaardigheden. Uit dit onderzoek blijkt bovendien dat hoe beter de programma-integriteit is, hoe effectiever het programma is: als lessen of een deel van de lessen worden overgeslagen zijn de effecten minder. Een veranderingsonderzoek van Hofhuizen (in: Van den Borne, 2006) bevestigt de resultaten van het onderzoek van Kempes et al. (2010). Er is bij Stay in Love een klein significant ($p < 0,05$) effect op de acceptatie van een aantal risicogedragingen (controleerend gedrag, alcoholgebruik, toestaan van beledigen in het openbaar en laten leiden door de partner) waargenomen. De acceptatie van risicogedragingen is na de lessen lager dan voor de lessen. Stay in Love zorgt er bovendien voor dat leerlingen gevoeliger worden voor grensoverschrijdend gedrag. De effecten van Stay in Love zijn sterker voor meisjes en voor jongeren die voorafgaand aan het programma al meer empathisch vermogen hadden, maar ook voor leerlingen in het eerste en derde jaar. Er is geen verklaring gevonden waarom het programma voor deze groepen een groter effect heeft. Meisjes worden zich wellicht meer bewust dat ze duidelijker moeten zijn in het aangeven van grenzen. En wanneer jongeren meer empathisch vermogen hebben, zijn zij wellicht geneigd om meer toe te laten (minder grenzen stellen) of hun mening of houding te veranderen. Wanneer de leerlingen meer betrokken zijn, de lessen leuker, maar ook moeilijker vinden, en wanneer zij zich veiliger voelen, geven ze aan dat ze meer hebben geleerd (Kempes et al., 2010).

Werkzame elementen:

- Stay in Love voorkomt dat jongeren een gewelddadige relatie ontwikkelen, door de invloed van risicofactoren te verminderen.
- Stay in Love ondersteunt de ontwikkeling van gezonde relaties door beschermende factoren te versterken, door het aanreiken van kennis, houding en vaardigheden.
- Stay in Love heeft - zoals de naam ook aangeeft - een positieve insteek: hoe houd je je relatie leuk?
- De aanpak omvat een combinatie van lessen, een ouderavond, voorlichtingsmaterialen en een website waar jongeren ook vragen kunnen voorleggen aan deskundigen.
- De lessen sluiten aan bij het kennis- en ervaringsniveau van de leerlingen.
- De methode houdt rekening met sekse, seksuele voorkeur en culturele diversiteit.
- Anderen die belangrijk zijn in de ontwikkeling van de jongeren, zoals ouders en leerkrachten, zijn betrokken.
- De methode is gericht op regionale samenwerking, waardoor vindplaatsgericht gewerkt wordt, de borging gegarandeerd is en jongeren met hulpvragen weten waar ze terecht kunnen.
- Er wordt met een verscheidenheid aan interactieve werkvormen gewerkt, waarbij verbale kennisoverdracht (stellingen spel, do's and don'ts) en het tonen en oefenen van voorbeeldsituaties (beeldmaterialen, rollenspellen) elkaar afwisselen

6.6 *Wat missen de betrokkenen nog?*

- Leerlingen voelen zich niet altijd veilig genoeg om in de klas veel te zeggen.
- Het totale bereik van Stay in Love is op dit moment erg klein. Het afgelopen jaar is Stay in Love op geen enkele school uitgevoerd. Het programma staat daarmee op een laag pitje, al komen er nog wel vragen via de website binnen en bieden preventiefunctionarissen onderdelen van Stay in Love aan in workshops met gemeenschappelijke thema's of andere activiteiten binnen hun werk (huisbezoeken huiselijk geweld). Dat het bereik gering is, heeft onder anderen te maken met dat Stay in Love op dit moment niet gefinancierd wordt (tegenwoordig moeten gemeenten het programma financieren). In een van de regio's waar de regiocoördinatoren actief zijn is de afspraak dat de GGD de acquisitie doet voor het gehele aanbod rondom gezondheid en leefstijl. Er is op het geheel enorm bezuinigd in de zorg, met name op GGZ preventie, en dat is een van de redenen dat Stay in Love op dit moment 'uit beeld' is of meer vraaggericht ingezet wordt (alleen op scholen waar het vooral nodig is). Daarnaast is het aantal regiocoördinatoren te gering voor een landelijk project. Er is onvoldoende draagvlak om op grote schaal met dit onderwerp aan de slag te gaan.
- Docenten dienen in de training realistischer voorlichting te krijgen over wat het programma hen aan (voorbereidings)tijd kost. Het trainen van docenten, die vervolgens zelf de lessen moeten uitvoeren, vormt dan ook een drempel. Voor scholen, die al veel (vergelijkbaar) aanbod krijgen, is Stay in Love een omvangrijke methode en een grote investering. Daarnaast blijkt uit de praktijk dat nog veel koudwatervrees bij scholen bestaat om dit onderwerp bij hun leerlingen aan te kaarten. Betrokkenen hebben aangegeven dat het mogelijk effectiever kan zijn als medewerkers vanuit de GGD/GGZ de lessen geven, of eventueel in samenwerking met de docent. Nadeel hiervan is dat er geen vertrouwensband is die er met een docent mogelijk wel is.
- De werkvormen van Stay in Love zijn onderhevig aan verandering. In de huidige methodiek moeten de ontwikkelaars dan ook inspelen op de huidige situatie. Een onderwerp dat nu opgenomen dient te worden in het programma is grensoverschrijdend gedrag via social media. Internet speelt immers een belangrijke rol in het leven van peers. Betrokkenen zouden in het huidige programma voorbeelden willen opnemen van wangedrag via de webcam of via internet.
- Er vindt geen 'nazorg' of vervolg plaats wanneer het traject van Stay in Love is afgerond. De meeste scholen zijn bereid om gedurende een schooljaar het programma aan te bieden, maar eigenlijk zou elk jaar van het VMBO opnieuw aandacht moeten besteden aan het onderwerp verkeringsgeweld. Herhaling gedurende andere leerjaren zou moeten voorkomen dat de opgedane kennis (en vaardigheden) wegzakt bij deze lager opgeleide doelgroep. Bovendien vergt het ontwikkelen van relationele vaardigheden soms meer tijd dan zeven lessen.

- Volgens de projectleider vormen seksualiteit en seksuele diversiteit centrale onderwerpen binnen het onderwijs. Bij seksueel grensoverschrijdende programma's en de preventie van seksueel grensoverschrijdend gedrag gaat het vaak niet zozeer over verkeringsgeweld, maar over seksueel grensoverschrijdend gedrag op school in de brede zin van het woord. Stay in Love richt zich niet alleen op seksualiteit, maar besteedt aandacht aan het met elkaar omgaan in een relatie. Dat is van belang, omdat ervaringen met verkeringsgeweld voorspellend kunnen zijn voor relatiegeweld in de volwassen leeftijd. Het zou mooi zijn als Stay in Love ondersteund wordt door andere programma's op school die zich richten op de omgang met elkaar op school: onderling respect, maar ook seksueel grensoverschrijdend gedrag.

7 *VoorZorg: verpleegkundige ondersteuning bij zwangerschap en opvoeding*

De beschrijving is gebaseerd op de volgende bronnen:

- Mejdoubi J., van den Heijkant S.C.C.M., van Leerdam F.J.M., Heymans M.W., Hirasig R.A., et al. (2013). Effect of Nurse Home Visits vs. Usual Care on Reducing Intimate Partner Violence in Young High-Risk Pregnant Women: A Randomized Controlled Trial. PLoS ONE 8(10): e78185. doi:10.1371/journal.pone.0078185.
- Mejdoubi J., van den Heijkant S., Struijf E., van Leerdam F., HiraSing R. & Crijnen A. (2011). Addressing risk factors for child abuse among high risk pregnant women: design of a randomised controlled trial of the nurse family partnership in Dutch preventive health care. BMC Public Health 11:823.
- Mejdoubi J., van den Heijkant S.C.C.M., van Leerdam F.J.M., Crone M., Crijnen A., HiraSing R. A. (2014). Effects of nurse home visitation on cigarette smoking, pregnancy outcomes and breastfeeding: A randomized controlled trial. Midwifery 30 688-695.
- Nieuwsbrief VoorZorg juni 2014.
- Factsheet VoorZorg mei 2013.
- Interviews: 4 verpleegkundigen en projectcoördinator.

7.1 *Doelgroep*

Jonge vrouwen die zwanger zijn van hun eerste kind, met een lage opleiding, een laag inkomen, en daarbij diverse andere negatieve en risicofactoren, zoals huiselijk geweld in het verleden of in de huidige relatie, weinig sociale steun en een ongezonde leefstijl en/of roken, drugs en alcohol misbruik.

Preventie: Primair

Domein: Familie/Gezin

7.2 *Werkwijze:*

Voorgeschiedenis

VoorZorg is een programma ter ondersteuning van gezinnen met veel risico's op opvoedingsproblemen, gericht op het bevorderen van de gezondheid en het vergroten van de ontwikkelingskansen van moeders en kinderen. Het voornaamste doel van Voorzorg is de primaire preventie van kindermishandeling. Andere doelen zijn: het verbeteren van de uitkomsten van de zwangerschap door de gezondheid van de moeders tijdens de zwangerschap te verbeteren, het verbeteren van de gezondheid en ontwikkeling van het kind door de ouder te helpen om meer competente zorg te verlenen aan hun kind, en tot slot het verbeteren van de persoonlijke ontwikkeling van de moeder (bron: Mejdoubi et al 2011, 2013, 2014). De onderliggende theorieën van de methodiek betreffen die van Bandura, Bronfenbrenner en Bowlby. Deze theorieën gaan over hechting en interactie; twee aspecten die tijdens de zwangerschap al van belang zijn. Op basis van deze theorieën zijn ook de Power and Control Wheels (zie verderop) ontwikkeld. De interventie is afkomstig uit de Verenigde Staten. David Old is de oprichter van Nurse Family Partnership (NFP), de voorloper van de Nederlandse variant VoorZorg. Er werd een speciale projectgroep opgericht om de NFP te vertalen en op culturele punten aan te passen aan de Nederlandse situatie bestaande uit Nederlands Jeugdinstituut (NJI), de projectgroep van VoorZorg en externe professionals. De vertaling en aanpassing verliep in stappen. Om dit ook daadwerkelijk te testen werd VoorZorg in een pilotfase kleinschalig uitgetest op hoog risico zwangere vrouwen. De evaluatiestudie van de pilot, verricht door het Trimbos Instituut, wees uit dat de doelpopulatie goed werd bereikt. Het programma bevredigde de behoeften van de moeders en daarbij kregen de moeders significante ondersteuning van de VoorZorgverpleegkundigen. Deze verpleegkundigen slaagden erin de interventie uit te dragen zoals deze beschreven stond in de richtlijnen en de handleidingen waren relevant ten aanzien van de deelnemers (bron: Mejdoubi et al 2011, 2013, 2014). Behalve de Verenig-

de Staten en Nederland zijn er nog andere landen die met de interventie werken: Groot-Brittannië, Schotland, Ierland, Australië, Canada en Duitsland. Er bestaat een internationaal secretariaat, zodat contacten gelegd kunnen worden met andere landen. De licentie ligt nog altijd bij de VS, maar de secretaris is afkomstig uit Groot-Brittannië (bron: interviews). In Nederland was het NJI licentiehouder. Dit is per 1 januari 2015 overgedragen aan het Nederlands Centrum Jeugdgezondheid (NCJ).

De interventie

Voor de selectie van de doelgroep is een selectie procedure opgezet die uit twee stappen bestaat. Tijdens de eerste fase worden vrouwen geselecteerd door huisartsen, vroedvrouwen, gynaecologen en andere professionals. Daarbij wordt geselecteerd op de volgende criteria: (1) een maximum leeftijd van 25 jaar (de gemiddelde leeftijd is nu 17,18 jaar), (2) een laag opleidingsniveau (basisonderwijs of pre-beroepsonderwijs), (3) maximum 28 weken zwanger, (4) geen eerdere levend geborenen en (5) begrip van de Nederlandse taal. Er mag geen sprake zijn van andere levend geboren kinderen bij de vrouwen omdat de vrouwen dan niet 'blanco' beginnen aan het leren opvoeden van hun kind. Aangezien het dus om hun eerste kind gaat hebben de toekomstige moeders nog geen negatieve ervaringen met opvoeden. Deze jonge vrouwen zijn juist bij hun eerste zwangerschap gemotiveerd tot gedragsveranderingen. De geleerde vaardigheden kunnen dan ook later bij volgende kinderen toegepast worden. Wanneer aan deze criteria wordt voldaan, gaan de vrouwen door naar de tweede fase. Tijdens deze fase vinden interviews plaats met VoorZorgverpleegkundigen. Om uiteindelijk deel te mogen nemen aan VoorZorg moet tijdens deze interviews duidelijk worden dat de vrouwen ten minste een van de volgende bijkomende risicofactoren hebben: alleenstaand zijn, geen sociale steun hebben, een verleden of hedendaagse situatie van huiselijk geweld, psychosociale symptomen, ongewenste of niet geplande zwangerschap, financiële problemen, huisvestingsproblemen, geen opleiding en/of werk en alcohol- en/of drugsgebruik. Wanneer een potentiële participant niet aan alle criteria van de eerste fase voldoet, maar wel meerdere risico factoren heeft, presenteert de VoorZorg-verpleegkundige de casus aan een onafhankelijke expertcommissie die dan bepaalt of de vrouw al dan wel of niet opgenomen wordt in het programma. Het onafhankelijke oordeel is van belang om VoorZorg aan die doelgroep aan te bieden waarvoor het programma bedoeld is. Op deze manier blijft de interventie "op een zuivere manier" aangeboden. Tegelijkertijd ben je als medewerker beschermd tegen de druk om 'oneigenlijke' VoorZorgcliënten toch aan te nemen met als risico dat de effectiviteit van de interventie achteruitgaat. De commissie bestaat uit drie ervaren professionals die, onafhankelijk van elkaar, op basis van een uitgebreide casusbeschrijving, een advies geven over wel/geen instroom in het programma. Indien de commissie niet unaniem is, volgt een discussie om tot een consensus/eensluidend advies te komen. Dit oordeel of advies wordt vervolgens, binnen 1 week na het indienen van de casus, aan de VoorZorgverpleegkundige meegedeeld (bron: Mejdoubi et al 2011, 2013,2014).

TRAINING VOORZORGVERPLEEGKUNDIGEN

Na afloop van de pilot zijn 25 gekwalificeerde verpleegkundigen aangenomen door Jeugdgezondheidszorg organisaties in 20 verschillende gemeenten. Na de pilot is dit aantal gegroeid en uitgevoerd in 30 verschillende gemeenten. Per 1 januari 2015 wordt de interventie landelijk geïmplementeerd. De verpleegkundigen moeten voldoen aan specifieke competenties waaronder het hebben van ten minste twee jaar werkervaring, affiniteit met hoge risico families en ervaring met het aanleren van opvoedingsvaardigheden. Alle verpleegkundigen moeten de volgende trainingen volgen om een VoorZorgverpleegkundige te kunnen worden; Video Home Training, een training voor de zwangerschaps-, peuter-, en kleuter periode, en een training over het verminderen van het rookgedrag. Naast deze trainingen is wekelijkse supervisie op het werk een vereiste voor de uitvoering van het programma. Op deze manier kunnen de VoorZorgverpleegkundigen moeilijkheden in de implementatie van het programma bespreken met een leidinggevende van hun instelling. Daarnaast is er ook de gelegenheid om dingen te bespreken met ander VoorZorgverpleegkundigen tijdens casus conferenties op nationaal niveau (bron: bron: Mejdoubi et al 2011, 2013,2014 en interviews).

DE HUISBEZOEKEN

Vrouwen die deelnemen aan Voorzorg krijgen bovenop de gewoonlijke zorg nog ongeveer 10 bezoeken tijdens de zwangerschap, 20 bezoeken tijdens het eerste levensjaar van het kind en 20 bezoeken tijdens het tweede levensjaar van het kind. Deze bezoeken worden uitgevoerd door de ervaren VoorZorgverpleegkundigen. Naast deze bezoeken wordt ook door middel van sms-berichten, telefoon en sociale media contact gelegd met de moeders. De huisbezoeken zijn goed gestructureerd en beschreven in handboeken per fase. Elk handboek bevat een complete beschrijving van het huisbezoek op thema. Het is echter zo dat de bezoeken flexibel zijn en dat de verpleegkundigen in staat zijn tot improvisatie wanneer dit nodig is. De moeders hebben ook een instructieboek waarvan de inhoud parallel loopt met het handboek van de verpleegkundige.

Het is belangrijk dat de VoorZorgverpleegkundige een goede relatie onderhoudt met de moeder gedurende het programma. Tijdens elk bezoek worden de volgende zes domeinen besproken aan de hand van thema's: (1) eigen gezondheid van de moeder, (2) gezondheid en veiligheid van het kind, (3) levensloopontwikkeling van de moeder, (4) de moeder als rolmodel, (5) de relatie van de moeder met haar partner, familie en vrienden, (6) gebruik van (andere) gemeenschapsvoorzieningen.

De partner en/of de vader van het kind wordt, voor zover mogelijk, tijdens elk huisbezoek betrokken. In de eerste maand van de interventie en zes weken na de geboorte zijn de bezoeken frequenter. De duur van elk bezoek is tussen één en anderhalf uur. Het doel van de bezoeken is; structurele gedragsveranderingen, hygiëne-educatie, het bespreken van vragen van de zwangere moeder, het stellen en vasthouden van realistische en haalbare doelen, het vergroten van de zelfeffectiviteit van de moeder en het sociale netwerk van de moeder betrekken in het programma. binnen de context van deze goed gestructureerde bezoeken zijn er meerdere elementen die zich richten op partnergeweld. De VoorZorgverpleegkundigen proberen de risicofactoren voor partnergeweld te verzachten door stress te reduceren, door te proberen de vrouwen financieel onafhankelijk te maken, of door te voorzien in hulp bij huisvesting. De verpleegkundigen helpen vrouwen (en hun partners) om bewust te zijn van partnergeweld, om een gewelddadige relatie te identificeren door middel van de Power and Control Wheel en om ze bewuste te maken van de gevolgen van geweld voor het kind. De Power and Control Wheel demonstreert verschillende soorten misbruik dat daders gebruiken om hun slachtoffers te controleren. Om veiligheidsredenen wordt dit instrument enkel besproken tussen moeder en verpleegkundige. Daarnaast ondersteunen de VoorZorgverpleegkundigen vrouwen en hun partner met strategieën met betrekking tot emoties en communicatie. Ook krijgen de ouders hulp bij het maken van veilige beslissingen voor zichzelf en hun kind, zoals het voorkomen dat woordwisselingen escaleren tot een fysiek gevecht, door de ouder te leren hoe om te gaan met een dergelijke situatie, en door ze te leren hoe te onderhandelen en naar elkaar te luisteren. Het is van belang dat het moment van afscheid al vroeg wordt benoemd. Dit afscheid nemen wordt ook in het handboek beschreven aan de hand van informatiebladen. Verpleegkundigen hebben vier maanden de tijd om naar dat afscheid toe te werken. Er wordt dan nog slechts een keer in de maand met elkaar afgesproken. Veel cliënten vinden het lastig om afscheid te nemen en laten dan ook veel ontrouwheid zien (bron; literatuur en interviews).

7.3 *Risicofactoren en Beschermende factoren*

98% van de deelnemende vrouwen uit de pilot had vier of meer risicofactoren. De mogelijke risicofactoren zijn de volgende:

- Alleenstaand
- Financiële problemen
- Ervaring met (seksueel) geweld in verleden of heden
- Geen sociaal netwerk of steun van familie
- Jong
- Laag opgeleid
- Geen werk
- Alcohol en/of middelenmisbruik
- Psychosociale symptomen
- Ongewenste/niet geplande zwangerschap
- Huisvestingsproblemen

De beschermende factoren zijn de volgende:

- Huisbezoeken
- Het hebben van een open en niet-oordelend gesprek tussen verpleegkundige en de cliënt
- Sociale steun
- Zelfeffectiviteit
- Het verwijzen naar gewelddadig en controlerend gedrag onder ouders (bron: Mejdoubi et al 2011, 2013,2014)

7.4 *Link met emancipatie/gender:*

In het project is op verschillende manieren aandacht voor gender. Onder het kopje 'interventie' is reeds kort aangestipt hoe dat er uit ziet. Uit de interviews kwam het volgende:

1. *Betrokkenheid vaders*

De Voorzorg-verpleegkundigen proberen de vaders zoveel mogelijk te betrekken en te stimuleren dat zij bij de huisbezoeken aanwezig zijn, maar vaak zijn deze buiten beeld. In het instructieboek voor moeders zijn bespreekbladen opgenomen voor als de baby geboren is. Er zijn elke maand drie terugkom invulbladen die ingevuld moeten worden: 'mama's memo', 'papatijd' en 'hallo ik ben'. 'Mama's memo' gaat vanuit de moeder over de moederrol. 'Hallo ik ben' is een blad dat vanuit de visie van de baby ingevuld moet worden. De moeder moet dan antwoorden vanuit de baby, iets wat door de moeders als heel leuk wordt ervaren. Daarnaast is er ook 'papatijd', dat door vaders ingevuld kan worden. Het enige minpunt van dit invulblad voor vaders is volgens de geïnterviewde verpleegkundigen dat het bijna altijd gaat over spelen en leuke dingen doen met het kind, en niet zozeer over de zorg voor het kind. Dit heeft mogelijk te maken met de vertaling van het programma uit het Amerikaans en met traditionele man-vrouw rolverhoudingen. De verpleegkundigen 'vernederlandsen' het programma, en passen als het nodig is wat dingen aan. Het programma is wel zo flexibel dat dit kan. Het enige wat niet mag is de tekst aanpassen, hiervoor is speciale goedkeuring nodig, aldus de verpleegkundigen. Uiteraard zijn opvoeding en verzorging door de vaders ook belangrijke onderwerpen voor de moeders. Het is om die reden dat verpleegkundigen het blad soms veranderen in 'oudertijd' en het zowel met de vader als met de moeder doornemen.

2. *Huiselijk geweld*

Bespreekbaar maken door wielen uit het handboek

In de instructiemap voor moeders zijn verschillende zogeheten wielen opgenomen om zaken bespreekbaar te maken. Ze helpen de vrouwen (en hun evt. partners) bewust te worden van de gevolgen van partnergeweld voor zichzelf en hun kind en om een gewelddadige relatie te identificeren. Daarnaast hebben de wielen een signaleringsfunctie voor de verpleegkundigen. Het eerste wiel dat aan bod komt is het opvoedingswiel, gevolgd door het kindermishandelingswiel, het gelijkheidswiel en het machts- en controlewiel.

Het opvoedingswiel komt tijdens het huisbezoek ter sprake wanneer het kind tien weken oud is. Het gaat hier om zaken als: wat heeft het kind nodig, wat is nou precies opvoeden, waar draait het nou om. Hierbij grijpen de vrouwen vaak terug op hoe ze zelf zijn opgevoed. Doorgaans hebben de vrouwen hele duidelijke ideeën over hoe ze het zelf willen doen, maar hebben ze daar weinig handvaten voor. Tijdens deze gesprekken komt ook al aan bod of iemand zelf in haar jeugd te maken heeft gehad met geweld, aldus de geïnterviewde verpleegkundigen. Het machts- en controlewiel heeft het meest met gender te maken en gebruiken de verpleegkundigen veel, bijvoorbeeld om 'het altijd willen weten waar ze is' van de man uit te leggen. Vrouwen zien dit vaak als teken van liefde, terwijl het volgens de uitleg van de verpleegkundigen kan berusten op jaloezie. Ook worden vrouwen zich door dit wiel soms voor het eerst bewust van de geweldssituatie waarin ze zich bevinden. Vaak is dit een eyeopener. Geïnterviewde verpleegkundige: "*Vrouwen voelen zich enerzijds beknelde door een jongen,*

maar tegelijkertijd is het die liefde die ze zo afhankelijk maakt. Het is dus heel dubbel. Het bespreken van dit wiel kan heel confronterend zijn. Het komt voor dat de cliënten niet wisten dat bepaalde aspecten die in het wiel besproken worden ook mishandeling zijn. Andere vrouwen herkennen het weer van hun ouders”.

De wielen komen wel alleen voor in het handboek voor de babytijd. De geïnterviewde verpleegkundigen zouden graag zien dat deze op een later moment ook weer terug komen. In het handboek voor de peuterperiode komen geweld en gender wel op andere manieren aan de orde. Geïnterviewde verpleegkundige: *“ Het gaat dan bijvoorbeeld onder andere over ‘hoe veilig is je relatie’. Dat is een vragenlijst die zonder de man ingevuld moeten worden, aangezien het gaat over wat voor persoon de man is. In die vragenlijst zijn vragen opgenomen als ‘heeft je man wapens’, ‘moet je wel eens dingen doen die je niet wil’, ‘heb je wel eens gezien dat je man ruzie heeft met iemand, of iemand in elkaar heeft geslagen’, ‘heeft je man wel eens met de politie te maken’. Als op vragen met ‘ja’ wordt geantwoord, wordt er door de verpleegkundige over gepraat. Dit wordt gedaan aan de hand van een aparte handleiding. Ook is er een vragenlijst die te maken heeft met keuzes over de opvoeding. Hierin zijn vragen opgenomen als ‘een corrigerende tik mag best’, ‘een kind moet in de hoek staan als het iets fout heeft gedaan’ en ‘een kind is er om je te troosten’. Hier wordt door de meiden heel wisselend op geantwoord, voornamelijk als het gaat over het slaan. Het is dan ook heel interessant om de moeder in contact te zien met haar kind, want dan zie je of ze zich ook echt houdt aan wat ze tijdens het invullen van de vragenlijsten heeft aangegeven. Je ideeën kunnen heel goed zijn, maar de uitvoering niet. Dit is dan een belangrijk punt waar de verpleegkundigen op moeten inspelen”.*

Bespreikbaar maken, los van het handboek

Het handboek is vooral een richtlijn. De geïnterviewde verpleegkundigen vertellen dat zij vrij zijn om op actuele thema's in te spelen en af te wijken van het thema dat op dat moment aan de orde is. Wanneer het aankomt op geweld, en in de gevallen dat dit in een gezin vaker voorkomt, zal hier tijdens de bezoeken meer op worden ingegaan. Door de flexibiliteit van het programma is dit mogelijk. Als het kan wordt de situatie aan het thema van het bezoek verbonden. Bij de moeders met een stabiele thuissituatie is het hierdoor makkelijker om het programma volgens het handboek te volgen dan bij moeders die in een instabiele situatie verkeren.

De verpleegkundigen proberen door hun manier van communiceren bij de vrouwen aandacht te vragen voor huiselijk geweld. Hierbij hanteren de verpleegkundigen een oplossingsgerichte aanpak aan de hand van gesprekstechnieken. Als een vrouw bijvoorbeeld aangeeft dat haar kind vaak huilt, vragen de verpleegkundigen hierop door. Er wordt dan bijvoorbeeld gevraagd wat het met haar doet en of ze dan ook wel een boos wordt en zich machteloos voelt. De verpleegkundigen gaan in op hoe hiermee om te gaan, en wat de mogelijke gevolgen kunnen zijn als je over de grens gaat. Een andere verpleegkundige vertelt het volgende: *“Voor sommige meiden is geweld iets heel normaal, iets wat erbij hoort. Dit is hun referentiekader. Wij proberen hen dan de inzichten te geven dat het niet het normale is. We zeggen niet dat iets slecht of goed is, maar proberen positieve ervaringen terug te koppelen aan het negatieve, aan de voor hun zo normale situatie, en ze dan te vragen hoe ze er dan tegenaan kijken. Daarbij vraag ik of de cliënt haar ‘normale’ situatie als prettig en leuk heeft ervaren en of ze het niet anders had gewild. Door dit terug te koppelen naar het kind wordt er ook gevraagd of ze het ook zo voor haar kind wil en sommige meiden vinden het zo prima, maar andere zeggen dat ze het toch graag anders willen voor hun kind. Wanneer meiden zeggen het prima te vinden probeer ik ze in hun waarde te laten, want hun ‘prima’ is ook een goede prima, maar ik leg me er niet bij neer. Op zulke momenten ben je extra alert, en probeer je inzicht te geven in hoe het ook kan zijn, en wat een moeilijkheden de agressie allemaal geeft. Dit slaat zeker aan bij de meiden die een wat hoger niveau hebben. Maar voor de LVB-meiden is dit veel lastiger”.* Een van de meiden die door een andere geïnterviewde verpleegkundigen wordt gevolgd, wordt al sinds haar zesde door haar broer fysiek mishandeld. Zij is nu zwanger van haar vriend die haar ook slaat. Doordat de verpleegkundige niet weet of haar cliënt haar vriend al heeft ingelicht dat ze hierover heeft gepraat met haar, houdt zij het gesprek rondom ‘hoe met elkaar om te gaan’ en ‘hoe voor elkaar te zorgen’ heel laagdrempelig. Ook gaat ze in op hoe zij zijn opgevoed en hoe ze het nu hebben en hoe ze het voor hun kind willen hebben. Daarbij probeert ze inzicht te geven in wat van belang is voor een baby.

Doorverwijzen

Het zesde en laatste domein binnen het Voorzorgprogramma gaat over het verwijzen en begeleiden naar andere hulpbronnen en organisaties. Verpleegkundigen proberen hiertoe de intrinsieke motivatie van vrouwen te stimuleren. Een voorbeeld is dat wanneer met een vrouw wordt gepraat over geweld, de verpleegkundige een folder kan meegeven van een Steunpunt Huiselijk Geweld (vanaf 2015 Veilig Thuis) met het advies ernaar te kijken en haar eventueel te bellen. Op deze manier leren de vrouwen zelf hulp te zoeken. Verpleegkundigen bereiden een afspraak of telefoontje dat een vrouw moet plegen van te voren samen voor met de cliënt. Ook gaan de verpleegkundigen soms mee naar afspraken als ondersteuning. De stap hierna is ook erg belangrijk, want wat doe je daarna zelf met je kind? Bij het invullen van de bladen wordt vaak teruggekomen op de opvoeding, en hoe je als moeder reageert op het gedrag van je kind. Daarnaast wordt ook ingegaan hoe men om kan gaan met frustraties van het moeder zijn.

Doorverwijzen gebeurt altijd samen met de vrouw. Geïnterviewde verpleegkundige: *“Als je eenmaal iets achter de rug van de vrouw om doet is het vertrouwen geschaad en is het klaar”* Wanneer het gaat om het doorverwijzen van cliënten naar andere hulp zijn er geen echte richtlijnen. Geïnterviewde verpleegkundige: *“Als verpleegkundige voel je het aan en het is ook niet de bedoeling als psycholoog te fungeren en te vertellen hoe het moet. Bij Voorzorg moeten we in elk geval altijd de verbinding met het kind maken. De cliënten moeten zelf ook klaar zijn om in therapie te gaan”*. De geïnterviewde verpleegkundigen geven daarnaast aan dat het best lastig is hoe met het doorverwijzen om te gaan. Geïnterviewde verpleegkundige: *“Bij de training is ingegaan op het handboek en de theorie er achter, maar daar kwam niet specifiek in naar voren hoe letterlijk om te gaan met iemand die huiselijk geweld ervaart en wat je er mee moet”*. Later, tijdens case conferences, waarbij alle verpleegkundigen die VoorZorg uitvoeren bij elkaar komen, zijn er themabesprekingen. Zo is er een keer iemand van Steunpunt Huiselijk Geweld (nu Veilig Thuis) geweest die hen dan tools geeft hoe ze hiermee om kunnen gaan en hoe erop in te gaan. *“Als het zover komt moet er geadviseerd worden dat een doorverwijzing voor haar beter is omdat de verpleegkundige hier niet in is geschoold en schade kan toebrengen als ze probeert de rol van psycholoog aan te nemen”*, aldus de geïnterviewde verpleegkundigen.

Wanneer wordt opgemerkt dat een vrouw mishandeld wordt door haar man en deze bij elk huisbezoek aanwezig is, nodigen de verpleegkundigen de vrouw ook wel eens uit bij de GGD om daar zonder de man te kunnen praten over de situatie. Met de man wordt dan niet ingegaan op zijn gedrag en of hij eventueel hulp zou moeten zoeken, maar als bekend is dat de man hulpverlening heeft kan met de desbetreffende hulpverleners hierover worden gepraat. Normaal gesproken richten de verpleegkundigen zich enkel op de moeder en het kind. Het doel van het programma is dan ook de empowerment van de vrouwen, dat ze sterker en meer zelfzeker worden en niet langer afhankelijk zijn van de man. Over het algemeen is veel contact met hulpverleners van de vrouwen en in sommige gevallen ook met de hulpverleners van de mannen, maar het is niet zo dat diep met de mannen in gesprek wordt gegaan over eventuele hulp die ze zouden moeten zoeken, aldus de geïnterviewde verpleegkundigen. Geïnterviewde verpleegkundige: *“Daarbij sta je als VoorZorgverpleegkundige naast de cliënt en naast de hulpverlening. Dit heeft ook te maken met het feit dat het een vrijwillig programma is. Er wordt ook vaak geprobeerd om Bureau Jeugdzorg juist buiten de deur te houden door ze in dit programma op te nemen. Jammer genoeg lukt dit niet altijd. Het komt ook regelmatig voor dat de meiden juist via Bureau Jeugdzorg bij VoorZorg terecht komen”*

3. Toeleiding naar opleiding of werk

De focus ligt bij Voorzorg allereerst op de relatie tussen moeder en kind. Daarnaast is ook de emancipatie van de vrouw van belang. Geïnterviewde verpleegkundige: *“hierbij kan gedacht worden aan het volgen van een opleiding en dus niet jezelf inzetten op een man. Later, wanneer een vrouw alles op orde heeft, een opleiding heeft gevolgd en werk heeft kan ze verder kijken of ze tijd en ruimte heeft voor een relatie. Veel meiden zijn snel verknocht aan een man en willen dan ook niks meer zonder hem doen, ook al zou dat betekenen dat ze praktisch dakloos zijn. Vrouwen kunnen in zo'n geval naar een ‘moeder-kind’ huis, maar dit wordt dan geweigerd omdat haar vriend er dan niet bij kan zijn. Er moet dus heel voorzichtig gepraat worden om ze uiteindelijk gemotiveerd te krijgen. Dat gaat vaak*

samen met vallen en opstaan. Veel meiden hebben ook een tweeledig idee, ze willen aan de ene kant heel graag voor zichzelf gaan, maar als dan de man er weer bij komt trekken ze toch weer meer naar hem toe”.

Wanneer het aankomt op het toeleiden naar werk merken de geïnterviewde verpleegkundigen niet dat het de man is die de vrouw tegenhoudt, het gaat dus niet om een hele traditionele rolverdeling bij de cliënten. “Vaak is het zo dat de meiden zelf niet willen werken”, aldus de verpleegkundigen. “De meiden die deelnemen aan VoorZorg hebben heel uiteenlopende achtergronden, waarvan er natuurlijk ook meiden zijn die wel ‘huisje-boompje-beestje’ willen met hun vriend. Het is alleen vaak zo dat dit een droombeeld is en dat hun reële situatie dat nu nog niet toelaat. De mannen hebben zelf ook niet altijd alles op orde, waaronder het uitzitten van een gevangenisstraf. Bij meiden met een Surinaamse achtergrond wordt de man vaak als bijzaak gezien, die komen zo nu en dan binnen en dan zijn ze weer weg. De vrouwen zijn net zo onbeschoft tegen de mannen als de mannen tegen de vrouwen zijn. Voor hen is dat heel normaal. Daarnaast zijn de cultuurgebonden aspecten bij Turkse en Marokkaanse meiden meer gericht op eerdergerelateerd geweld”

7.5 Succesfactoren:

Vrouwen die in deze moeilijke omstandigheden een kind krijgen zijn met deze interventie in staat om een langdurig programma te volgen (2,5 jaar), een persoonlijke relatie met ‘hun’ VoorZorgverpleegkundige op te bouwen en te profiteren van zowel gezondheid- als leefstijlondersteuning. Daarnaast neemt door deelname aan VoorZorg ook de zelfeffectiviteit van de moeders toe. Ze krijgen meer vertrouwen in hun eigen bekwaamheid om met succes invloed uit te oefenen op de omgeving. Tevens leren de vrouwen, ondersteund door de VoorZorgverpleegkundigen, hun sociale netwerk beter te benutten door gebruik te maken van sociale voorzieningen zoals kinderopvang en schuldsanering, het zoeken van passend werk, het aanpakken van hun eventuele verslaving en op zoek te gaan naar psychiatrische hulp.

De eerste resultaten in Nederland zijn zeer positief, zo blijkt uit het effectonderzoek waar J. Mejdoubi in 2014 op gepromoveerd is.

- In de VoorZorggroep neemt roken af tijdens de zwangerschap en als de baby geboren is, roken zij zelfs 50% minder dan de gebruikelijke zorg groep. Bovendien roken moeders in de VoorZorggroep niet waar de baby bij is in tegenstelling tot de gebruikelijke zorg groep. Tot slot waren er significant minder moeders uit de interventiegroep die begonnen met roken nadat het kind was geboren, in tegenstelling tot de controle groep.
- Moeders in de VoorZorggroep geven hun kind op de leeftijd van 6 maanden significant vaker borstvoeding (14% i.p.v. 6% in de gebruikelijke zorg groep).
- Huiselijk geweld is afgenomen bij de VoorZorggroep ten opzichte van de gebruikelijke zorg groep:
 - Zowel tijdens de zwangerschap als 2 jaar daarna, met name wat betreft het psychische en het fysieke geweld.
 - Tijdens de zwangerschap nam seksueel geweld meer af.
 - Daarnaast bleken de vrouwen in de VoorZorggroep zelf ook minder vaak geweld te gebruiken.
- Meldingen van vermoeden van kindermishandeling bij het Advies- en Meldpunt. Kindermishandeling (AMK) zijn in 2012 onderzocht. Hieruit blijkt dat in de VoorZorggroep bijna twee keer minder meldingen van kindermishandeling voorkwamen dan in de gebruikelijke zorg groep. Respectievelijk 16 meldingen (10%) tegenover 29 meldingen (18%). Dit is een significant verschil.

Gezien de resultaten ten aanzien van roken en borstvoeding blijkt VoorZorg in staat de leefstijl van de doelgroep positief te beïnvloeden. Daarnaast blijkt gezien de vermindering in huiselijk geweld en minder meldingen van vermoeden van kindermishandeling bij de Advies- en Meldpunten Kindermishandeling dat VoorZorg ook in staat is om daadwerkelijk de leef- en veiligheidssituatie van de moeders en hun kinderen te verbeteren. Aan de hand van wat er bekend is over de korte- en lange-termijn gevolgen van huiselijk geweld en kindermishandeling betekent dit ook dat het programma kansen biedt om het toekomstperspectief van deelnemers en hun kinderen op vele gebieden te verbeteren.

Volgens de geïnterviewde verpleegkundigen is het succes te verklaren door het empathisch vermogen van de Voorzorg-verpleegkundigen. Eén van hen verwoordt het als volgt: *“Je moet zeker niet zwart wit denken in dit werk en je moet een hele open blik hebben. Je moet niet veroordelen, want dan ben je het vertrouwen van de meiden meteen kwijt.”*

Daarnaast vinden zij dat het programma werkt omdat het compleet en laagdrempelig is: *“Je hebt de tijd, de inhoud en de flexibiliteit. Al deze aspecten vormen de kracht en de meerwaarde van het programma. Je hebt de tijd om met iemand te zitten, en natuurlijk moet je ook door, maar als je op huisbezoek bent lijkt de tijd even stil te staan. Dat maakt dat je de vertrouwensrelatie kan opbouwen. Dit is het grote verschil met het consultatiebureau, dat meer een momentopname is. Ook het feit dat het om een langdurige relatie gaat, twee en een half jaar, maakt dat je tijd hebt om een band op te bouwen. Wij horen ook van de cliënten dat ze het fijn vinden dat we nooit haast hadden, en dat we ontspannen bij hen thuis zitten”*. Veel vrouwen zijn volgens hen teleurgesteld in de hulpverlening en door Voorzorg krijgen ze weer een stukje vertrouwen in de maatschappij. De Voorzorgverpleegkundigen gaan bij het afzeggen van een afspraak ook altijd weer terug. Geïnterviewde: *“We staan naast de cliënten. De wens van de cliënt is dan ook wat we als verpleegkundige zullen uitdragen, mits het veilig is. Ook door de inzet en de kennis die er overgedragen wordt is de moeder-kind band beter dan wanneer zijn geen VoorZorg hebben”*. Tijdens het traject wordt tot acht keer toe gefilmd hoe de moeder en eventueel ook de vader omgaan met het kind, om het achteraf terug te kijken. Beeld werkt op deze manier heel goed bij de vrouwen. Het is uiteindelijk een combinatie van verschillende dingen die het succes vormen van het programma, aldus de verpleegkundigen. Betrokken mannen die goed meedoen aan Voorzorg doen het volgens de geïnterviewden ook beter dan voordat de interventie plaatsvond.

7.6 *Wat missen de betrokkenen nog?*

- Update handboek

De geïnterviewden vinden het handboek enigszins gedateerd. Verpleegkundige: *“Dat heeft natuurlijk ook te maken met dat het programma al dertig jaar geleden is ontstaan in Amerika en zo’n tien jaar geleden naar Nederland is gehaald en toen letterlijk is vertaald. In tien jaar veranderd er een hoop en hier zou het handboek ook op moeten worden aangepast. Dat het handboek is gedateerd is ook terug te zien in de vaderbladen die zich enkel richten op het spelen met het kind en samen leuke dingen doen. Bij de moederbladen is dit ook wel opgenomen, maar toch wel op een andere manier. Je ziet duidelijk dat het programma is gebaseerd op de traditionele man-vrouw rolverhoudingen”*. Daarnaast zouden zij de wielen ook in het handboek voor de peuter- en kleutertijd willen terugzien.

- Andere aanpak LVB-cliënten

De cliënten van VoorZorg hebben verschillende achtergronden en culturen, en ze verschillen ook in niveau. Zo zijn er vrouwen die een LVB niveau hebben (Licht Verstandelijke Beperking). Voor deze groep zou er volgens de geïnterviewde verpleegkundigen eigenlijk een andere aanpak moeten worden gehanteerd. Verpleegkundige: *“Het interactieve aspect is heel erg van belang, en het gebruik van beeld daarbij ook. Beeld werkt voor hen veel beter dan het lezen van een blad. Door de licentie mag en kan nauwelijks iets veranderd worden aan het materiaal dat gebruikt wordt”*.

8 *De Nieuwe Toekomst*

De beschrijving is gebaseerd op de volgende bronnen:

- Dvd 'De Nieuwe Toekomst'. Project Empowerment van Vrouwen. Maart 2012-maart 2013. Een nabeschuwing.
- Methodiekbeschrijving 'De Nieuwe Toekomst' van de Nederlandse Vrouwenraad.
- Sommer, M. (2013). 'Effectmeting 'De Nieuwe Toekomst'', Arcon.
- Website: <http://www.vrouwenplatformcarree.nl/projecten/de-nieuwe-toekomst/>.
- Vijf interviews: lokale projectcoördinator, twee coaches en twee deelnemers.

8.1 *Doelgroep*

De doelgroep bestaat uit vrouwen die te maken hebben gehad met huiselijk geweld en veelal economisch afhankelijk zijn van hun partner of een uitkering. Er is geen sprake meer van een crisissituatie en professionele opvang, en hulpverlening is niet meer nodig. Het doel is om deze vrouwen een nieuwe toekomst op te laten bouwen door ze maatschappelijk te activeren. Het gaat dus om de bevordering van 'empowerment' van vrouwen. Daarbij wordt uitgegaan van de mogelijkheden van de vrouwen en wordt gestreefd naar uitzicht op economische zelfstandigheid. Maatschappelijke activering kan worden bereikt door het verrichten van betaalde werkzaamheden, het doen van vrijwilligerswerk of het volgen van een opleiding of cursus. Door maatschappelijke activering kan uitzicht op economische zelfstandigheid worden bereikt. Dit moet worden bereikt via twee onderdelen; de toekomstwerkmethode, deze bestaat uit groepstrainingen en een persoonlijk coaching traject (bron: methodiekbeschrijving NVR).

Preventie: Tertiair

Domein: Familie/Gezin

8.2 *Werkwijze*

Voorgeschiedenis

Het Ministerie van Onderwijs, Cultuur en Wetenschappen (OCW) heeft in 2012 de opdracht gegeven aan de Nederlandse Vrouwenraad (NVR) en de Federatie Opvang om een pilot te doen, geheten 'de Nieuwe Toekomst'. De NVR is de landelijke koepel van vrouwenorganisaties waar de provinciale koepels onder vallen. Op dat moment was het vrouwenplatform Carree in de provincie Overijssel bezig met het onderwerp huiselijk geweld, onder andere door een soortgelijk project 'vrouwen coachen meiden'. Zodoende werd de pilot in Overijssel gestart. De pilot vond plaats van maart 2012 tot maart 2013 en was een succes. Van de achttien vrouwen hebben twaalf het hele traject doorlopen. De resultaten van het effectonderzoek waren positief (zie voor resultaten effectonderzoek bij 'succesfactoren'). Dit heeft geresulteerd in het feit dat er anderhalf jaar later een doorstart was. Het Rijk wilde een vervolg, maar wel met hulp van financiën van gemeenten. Het vervolg vond vanaf 1 november 2014 voor een jaar plaats in gemeenten waar zich een vrouwenopvang bevindt in Noord-Holland, Zeeland, Overijssel en Brabant. Gestreefd werd naar 12-15 vrouwen per gemeente.

Selectie(criteria) deelnemers

De deelnemers worden geselecteerd vanuit vrouwenopvang organisaties, via de gemeente, het maatschappelijk werk, welzijnsorganisaties, de politie en de gezondheidszorg. De vrouwen moeten gemotiveerd zijn en bereid om het volledige traject te volgen. Daarnaast is het belangrijk dat ze voldoende Nederlands spreken om het programma te kunnen volgen. Uit de interviews blijkt ook dat bij de selectie gelet wordt op het feit of de vrouwen in staat zijn te kunnen reflecteren over hun eigen situatie. Tot slot moeten de vrouwen opvang kunnen regelen voor hun eventuele kinderen (bron: methodiekbeschrijving NVR).

De interventie

De interventie ‘De Nieuwe Toekomst’ begint met de Toekomstwerkplaats waarin de vrouwen werken aan het ontwikkelen van een toekomstperspectief dat bij hen past. Het doel hiervan is het herontdekken van hun krachten en talenten. De NVR had voor de pilot al ervaring met deze manier van werken en coördineerde daarom dit deel van het traject. Een deelnemersgroep bestaat uit 12 vrouwen. De training wordt uitgevoerd door twee professionele trainers. Zij zijn gespecialiseerd in activeringsmethodieken en hebben kennis en ervaring met de doelgroep. De NVR en de Federatie Opvang organiseren samen een ‘train-de-trainer’ om de trainers de methodiek eigen te maken. Het trainingsdeel van de deelnemers zelf, bestaat uit tien wekelijkse groepsbijeenkomsten waarin wordt gewerkt aan de volgende aspecten:

- Herontdekking van de eigen kracht(en), talent(en) en passie(s).
- Kijken naar de toekomst: hoe wil ik dat mijn leven verandert?
- Van afhankelijkheid en slachtofferrol naar regie over het eigen leven.
- Concrete stappen zetten op weg naar de gewenste situatie.
- Het inzetten van een coach die begeleiding biedt naar daadwerkelijke en duurzame participatie op de arbeidsmarkt.
- Onafhankelijkheid door inkomen uit eigen arbeid (bron: methodiekbeschrijving NVR).

Er wordt gewerkt met creatieve werkvormen. Eén van de geïnterviewde vrouwen vertelt bijvoorbeeld over een collage die ze moest maken gericht op haar toekomstwensen, ook vertelt ze over een quiz die de vrouwen tot nadenken moest zetten van ‘waar sta je en waar sta je niet’. De geïnterviewde vrouwen zijn positief over de trainingen. Vooral het gevoel met meerdere vrouwen in hetzelfde schuitje te zitten spreekt erg aan. Eén van hen zegt: *“het maakte niks uit of je nu Nederlands of Afrikaans was...je zit allemaal in dezelfde situatie. Het hielp mij te zien dat het probleem bij iedereen hetzelfde was, dat je dat kunt delen: namelijk dat je geen werkt hebt, maar graag wilt werken en ook nog eens te maken hebt met een heftige thuissituatie”*. Aan het einde van de vijfde bijeenkomst koppelt de projectcoördinator de vrouwen aan persoonlijke coaches die hen activeren en ondersteunen bij het zetten van stappen op weg naar arbeidsparticipatie. Deze vrijwillige coaches (met verschillende culturele achtergronden) worden geworven via sociale media, vrijwilligerscentrales en coachingsbureau’s (bron: methodiekbeschrijving NVR en interviews). De coaches volgen een speciale scholing, ontwikkeld door de Hogeschool Windesheim. Degene die deze scholing verzorgt heeft zelf in de vrouwenopvang gewerkt en is thuis in zowel het thema coaching als in het thema huiselijk geweld. De scholing bestaat ten eerste uit een training van vier avonden waarin de rol van coach wordt verduidelijkt en afgebakend. Daarnaast krijgen de coaches inzicht in specifieke problemen bij huiselijk geweld en tot slot zijn er drie intervisiebijeenkomsten onder leiding van deskundigen waar de coaches aan deel moeten nemen (bron: methodiekbeschrijving NVR en interviews). Tijdens het persoonlijke coaching traject gaan de vrouwen aan de slag met het realiseren van hun toekomstperspectief dat zij in de Toekomstwerkplaats hebben ontwikkeld. De coaches leveren ondersteuning op maat gedurende maximaal 9 maanden. De steun kan variëren van, op geregelde tijden een gesprek hebben, samen achter de computer zitten om een sollicitatiebrief te schrijven, tot meegaan naar bijvoorbeeld de gemeente, een opleidingsinstituut of een stageadres. Het zelf leren zoeken naar de juiste ondersteuning is een belangrijk leeronderdeel (bron: methodiekbeschrijving NVR).

8.3 *Risicofactoren en beschermende factoren*

Het uitgangspunt is dat arbeid de beste bescherming biedt tegen huiselijk geweld (zie hieronder).

8.4 *Link met emancipatie/gender*

Tijdens het doorlopen van het traject wordt met de vrouwen gewerkt aan vaardigheden over hoe zij een toekomst op kunnen bouwen door maatschappelijke activering en empowerment. Daarbij wordt gestreefd naar economisch zelfstandigheid. Volgens de geïnterviewde coaches gaat het er vooral om

dat vrouwen weer grip krijgen op hun eigen leven: *“Het gaat erom dat vrouwen zichzelf mogen vergeven en om hun bewustzijn te vergroten....vrouwen moeten weer lef krijgen”*. De vrouwen willen graag werken, maar een groot probleem is vaak de combinatie met (veel) jonge kinderen. *“Er is geen netwerk om de kinderen op te vangen en dit kost anders geld”*, aldus de geïnterviewde projectcoördinator.

Volgens haar hangt het hele probleem van huiselijk geweld samen met gender: *“bij de Nieuwe Toekomst gaat het om economische zelfstandigheid omdat dat de beste bescherming is tegen huiselijk geweld”*. De geïnterviewde coaches benadrukken dat het vooral gaat om vrouwen weer terug in de maatschappij te krijgen en dat dat de link met gender is. De coaches die de scholing op Windesheim krijgen worden geschoold in het onderwerp coaching en huiselijk geweld; zij krijgen inzicht in de systemen die daarachter zitten, hoe vrouwen met daders om kunnen gaan en reageren in bepaalde situaties. In deze scholing is ook aandacht voor gender. Zo begint de training met een filmpje waarin aan mannen wordt gevraagd om als een meisje te lopen. Ze gaan als antwoord op deze vraag vervolgens anders lopen dan zij zelf doen. Daarna vragen ze aan jonge meisjes hoe mannen lopen: zij zeggen echter geen verschil tussen mannen en vrouwen te zien. *“Dit geeft aan dat het beeld dat je opgedrongen krijgt over meisjes negatief is. Beeldvorming is van belang en gerelateerd aan het zelfbeeld van de vrouwen”*, aldus de projectcoördinator. Daarnaast wordt gewerkt met casussen die laten zien hoe vrouwen kunnen reageren in bepaalde situaties. De coaches hebben nadrukkelijk geen hulpverlener relatie met de deelnemers. Dit wordt hen van begin af aan ook duidelijk verteld. Veel vrouwen in de vrouwenopvang hebben een casemanager die deze rol al vervult; dit maakt dat die afbakening helder is. Geïnterviewde coach: *“Ik heb een map gekregen en allerlei oefeningen gedaan tijdens de trainingen, maar de vrouwen hebben volgens mij de meeste behoefte aan ventileren en bevestiging krijgen of ze op de goede weg zijn. Als het bijvoorbeeld echt om traumaverwerking van geweld gaat dan is een psycholoog nodig, daar zijn de coaches niet voor”*. De meeste vrouwen zijn al uit die situatie van huiselijk geweld gestapt. Geïnterviewde coach: *“De vrouw had vooral bevestiging nodig: ze had door alles wat ze had meegemaakt een emotionele achterstand en was vervreemd van de wereld en vroeg mij vaak van ‘is dit normaal of is dat normaal?’. Dit ging niet over geweld want zelf had ze het besluit al genomen om uit de slachtofferrol te stappen....dus dat geweld speelde niet zo’n rol meer...ze was er al uitgestapt. Ze had mij meer nodig om bevestiging te krijgen van dat ze goed bezig was...daar had ze steun in nodig”*. Zowel projectcoördinator, coaches en deelnemers zeggen dat waar het man-vrouw-beelden betreft, veel vrouwen mannen als ‘boeven’ zien. *“Ze zijn klaar met hun partners en daarom is bij de Nieuwe Toekomst vooral aandacht voor de zelfstandigheid van de vrouwen in plaats van voor zaken als het delen van opvoeding etc. Ze willen het goede voorbeeld aan hun kinderen geven. Mannen zijn volledig uit beeld”*, aldus de projectcoördinator. Toch denkt één coach dat het goed zou zijn de partners die nog enigszins in beeld zijn, wel te betrekken. Ook is het goed om niet alleen vrouwelijke maar ook mannelijke coaches aan te stellen: *“omdat de wereld nu eenmaal uit mannen en vrouwen bestaat”*. Nu kunnen alleen vrouwen coach worden. De geïnterviewde vrouwen denken dat de groeps-aanpak voor vrouwen met een heel heftig verleden misschien niet geschikt is om in te gaan op het huiselijk geweld en dat het van de cultuur en de vrouw afhangt of zij erover wil praten: *“Dit kan namelijk ook averechts werken. Dit moet individueel bekeken worden. Maar deze vrouwen moeten wel leren inzien dat iemand een mishandelaar is: hoe ontdek je dat? Hoe signaleer je dat? Daar moet aandacht voor komen. Deze vrouwen hebben geen opleiding en geen werk en hun enige manier om te overleven is vaak een man”*, aldus een van de geïnterviewde deelnemers.

8.5 Succesfactoren

Bureau Arcon (Sommer, 2013) heeft een effectonderzoek uitgevoerd tijdens de pilot. Op drie tijdstippen is aan de deelnemers een (online) vragenlijst voorgelegd. De eerste meting vond plaats voorafgaand aan het traject. De tweede meting is na afloop van het eerste deel van het traject, de Toekomstwerkplaats, afgenomen. De eindmeting heeft in maart 2013 plaatsgevonden, na afloop van het hele traject. Van de achttien gestarte vrouwen hebben twaalf vrouwen het gehele traject gevolgd. Bijna alle respondenten geven aan dat zij door het project (meer) zelfinzicht en zelfvertrouwen hebben gekregen. Het zelfinzicht is voornamelijk gerelateerd aan inzicht in kwaliteiten, competenties en doelen. De vrouwen geven aan dat ze nu beter weten wat ze willen. Daarnaast stelt een aantal deel-

neemsters dat zij door het project weer toekomst zien, doelgerichter zijn en nu weten hoe ze moeten solliciteren. Meer dan 80% van de 12 deelnemers beschouwt het project als geslaagd (Sommer, 2013). Het onderzoek van Sommer heeft zich vooral gericht op de effecten van de activering van de deelnemers. Zo is onder meer gekeken naar activering op het gebied van betaald en onbetaald werk, scholing en sociale contacten. Bij de eindmeting hebben twee deelnemers een baan, twee andere vrouwen hebben uitzicht op betaald werk. Ook zijn twee deelnemers gestart met een opleiding. Twee anderen gaan starten met een opleiding op voorwaarde dat zij de financiering rond krijgen. Daarnaast zijn veel deelnemers geactiveerd op het gebied van vrijwillige inzet. Maar liefst negen van de twaalf deelnemers die het gehele project hebben gevolgd verrichten nu onbetaalde werkzaamheden. Dit houdt in dat zes vrouwen vrijwillig actief zijn geworden, de andere drie vrouwen waren namelijk al vrijwillig actief. Ook lijken de deelnemers zich minder eenzaam te voelen: zij hebben een breder netwerk waar zij op terug kunnen vallen. Uit het effectonderzoek is bovendien gebleken dat de deelnemers een veel betere geestelijke gezondheid ervaren en zich gelukkiger voelen. Daarnaast hebben de vrouwen nu meer het gevoel dat zij hun eigen leven kunnen vormgeven (Sommer, 2013). Eén van de geïnterviewde vrouwen zegt: *“ik dacht dat ik te oud was om te studeren, maar door de Nieuwe Toekomst weet ik dat dat niet zo is”*. Tot slot heeft de interventie er toe geleid dat een afname is ontstaan in het gebruik van maatschappelijk werk. De resultaten van dit effectonderzoek moeten echter met voorzichtigheid worden geïnterpreteerd; het gaat om een heel klein percentage vrouwen.

Volgens de geïnterviewde projectcoördinator zit het succes van het project in de persoonlijke aandacht van de coach die bepaalde capaciteiten moet hebben: *“Dit moet iemand zijn die empathisch is, afstand kan houden, een netwerk heeft en inzicht heeft in zaken. Een coach moet een vrouw kunnen triggeren om stappen te nemen. Dit geeft veel zelfvertrouwen”*. Ook de geïnterviewde coaches vinden dergelijke kwaliteiten essentieel. Geïnterviewde coach: *“een coach moet niet oordelen, maar kunnen luisteren en niet wakker liggen van de problemen en niet de wijsheid in pacht willen hebben”*. Coaches en deelnemers stellen dat uiteindelijk de juiste koppeling tussen coach en deelnemer cruciaal is. Coach: *“het gaat er vooral om dat er iemand aandacht voor je heeft en afspraken nakomt...het vertrouwen in anderen is geschaad...het is daarom heel belangrijk om een vertrouwensband te creëren en je aandacht daar in leggen”* Andere coach: *“Het belangrijkste voor de vrouwen is een vertrouwenspersoon te hebben waar ze bij terecht kunnen als dat nodig is; dat helpt ze verder in het proces. En ook ze in hun waarde te laten”*.

8.6 Wat missen de betrokkenen nog?

Bij de uitvoering van het effectonderzoek door bureau Arcon is aan de deelnemers gevraagd wat zij van het traject vonden. De vrouwen geven aan blij te zijn met de kans die zij hebben gekregen. Ze hebben voldoende begeleiding vanuit vrouwenplatform Carree ontvangen. Wel hebben enkele deelnemers suggesties voor verbeteringen. Zo hadden twee deelnemers graag meer mogelijkheden voor onderling contact willen hebben (Sommer, 2013). Dit vertellen ook de vrouwen die in het kader van ons onderzoek geïnterviewd zijn. Volgens hen is in de eerste week veel ruimte voor ‘het praten over gevoelens’ en daarna is dat minder. Dit vinden ze jammer. Geïnterviewde coachee: *“.....in de weken erna gingen de vrouwen met de toekomstplannen aan de slag en was er geen aandacht voor die gevoelens meer. Dit was veel zakelijker; er werden allerlei professionals uitgenodigd. Het stond vooral in het teken van werken aan je cv. het was toch wat kunstmatig om dit te scheiden”*. In het huidige traject zal hier meer aandacht voor zijn, door die eerste weken langer te maken of een follow-up in te bouwen. Ook vernieuwend is dat deelnemers aan elkaar worden gekoppeld. Ze kunnen dan bijvoorbeeld samen huiswerk maken; dat stimuleert de onderlinge sociale contacten. Daarnaast denken de geïnterviewde coaches en deelnemers dat het goed zou zijn als er toch ook informele gesprekken komen over huiselijk geweld. In de pilot waren twee vrouwen met hele zware problematiek die daar niet over wilden praten en die daardoor ook voor de rest van de groep bepaalden dat er gezwegen werd, terwijl sommige vrouwen aangeven daar op dat moment wel behoefte aan te hebben gehad. Volgens een coach is het daarom wellicht een idee om sommige vrouwen tijdens het coaching traject niet individueel maar als groep te coachen omdat ze elkaar dan onderling kunnen steunen in het verwerken van het geweld en het zoeken naar werk. *“Door samen dingen te doen maak je ze krachtig”*.

ger”, aldus deze coach. Een geïnterviewde coachee denkt daarentegen dat het beter is om deze vrouwen langer en juist individueel te begeleiden omdat er vrouwen zijn die echt ‘diepere’ individuele begeleiding nodig hebben; *”Huiselijk geweld wordt an sich niet opgepakt; het is een groepsaanpak en veel vrouwen zullen zich te veel schamen om dit in een groep te vertellen. Het is beter om dit individueel te doen”*. Ook een betere begeleiding rondom het contact met de gemeente, de kennis van de trainsters over de lokale sociale kaart en de overgang tussen werkplaats en training zijn in het effectonderzoek als verbeterpunten aangedragen (Sommer, 2013). Daarnaast vinden enkele vrouwen dat het goed zou zijn om vrouwen te selecteren op niveau en opleiding. Verschillen in niveau en (computer) vaardigheden werkten voor hen namelijk vertragend. Een van de geïnterviewde vrouwen denkt dat bij de coaches meer aandacht moet zijn voor het zoeken naar coaches met een niet-Nederlandse achtergrond. Betreffende de duur van het traject, vonden de deelnemers deze over het algemeen prima. Wel hebben twee deelnemers aangegeven dat ze graag langer ondersteund en begeleid hadden willen worden. Voor één van hen geldt echter dat zij het coaching traject vervolgt, buiten de kaders van het project om (Sommer, 2013). Tot slot: de geïnterviewde projectcoördinator vindt het belangrijk om na te denken over financiering van de vrijwilligers. Zij stelt: *“Het is een paradox dat vrouwen worden toegeleid naar werk/vrijwilligerswerk terwijl de coaches zelf geen cent krijgen. Dat ze niet gelinkt zijn aan het zorg-systeem is een pre, maar het zou wel beter wezen om hun rol te professionaliseren. Eigenlijk is het namelijk ook een taak van de gemeente om deze vrouwen weer aan het werk te helpen, nu doen vrijwilligers dit.....”* .

DEEL 3

Bijlagen Buitenlandse voorbeelden

9 *Men for Gender Equality – promising projects for preventing men’s violence against women in Sweden*

Kjerstin Andersson Bruck and Asa Cater

9.1 *Summary*

Män för jämställdhet (eng: Men for Gender Equality - MfGE) is a non-government Swedish organisation with a vision for “a gender equal society without violence”. Critical gender theory serves as the platform for the organisation and its projects. Two of MfGE’s projects: *Jämt föräldraskap* (eng: Equal Parenthood - EP) and *Frihet från våld* (eng: Freedom From Violence - FFV) are particularly good examples of how MfGE is working to prevent men’s violence against women. EP promotes equal parenting by developing and offering activities directed at new and expectant parents, with special focus on fathers. Half of their activities are directed at local parental and father groups across the country. FFV offers early violence prevention aimed at children and young people in order to limit the incidence and consequences of violence in young people’s intimate relationships by adopting methods that highlight the importance of bystanders. This programme is an adaptation of the American Mentors in Violence Prevention (MVP). Although the programmes in their Swedish versions need further evaluation to establish their evidence base, their firm correspondence to what the literature identifies as important aspects for succeeding in preventing men’s violence qualifies them as promising projects.

9.2 *Men for Gender Equality – promising projects for preventing men’s violence against women*

In Sweden, men’s violence against women is an issue given priority in recent government documents (SKR 2007/08:39, SOU 2014:49) and is by the government appointed National Coordinator on Domestic Violence, Carin Götblad, regarded to be a public health issue. One of these reports states:

Domestic violence not only causes great human suffering, but also leads to considerable costs to society. Society must work preventively, but also react quickly where there are signs that children or adults are victims of domestic violence. (SOU 2014:49:1)

In this report, we will describe two examples of promising practices for preventing men’s violence against women in Sweden. The organisation of our choice is *Män för jämställdhet* (eng: Men for Gender Equality - MfGE), a non-government organisation with a vision for “a gender equal society without violence” (www.mfj.se).²

The organisation MfGE is working to create a gender equal society without violence by focusing on masculinity, violence prevention and gender equality. Men’s violence against women, children and other men is regarded as one of the most serious expressions and causes of gender inequality. The main goal of the organisation is to eliminate men’s violence and to promote women’s safety. This is achieved by developing methods for changing attitudes and behaviours of children and young people, expecting and new parents. Also, MfGE is addressing schools, communities and the general opinion as well as decision makers. According to MfGE, a gender perspective is the key to violence prevention (www.mfj.se).

We will, in this report, focus on two of MfGE’s projects: *Jämt föräldraskap* (eng: Equal Parenthood - EP) and *Frihet från våld* (eng: Freedom From Violence - FFV), as they are both good examples of how MfGE is working to prevent men’s violence against women. The report describes the two projects separately, identifying key elements in violence prevention by using previous research and prevention theory and then discusses the implications and the international applicability of the projects.

2 Interviews were conducted with Anna Lindkvist, head of administration for Men for Gender Equality, Mats Berggren coordinator of Equal Parenthood (EP), and Peter Söderström, coordinator of Freedom from Violence (FFV) in January 2015. Additional sources for this report are: MfGE web page www.mfj.se; study material for EP and FFV; and follow-ups and evaluations of the programs reference in the report.

9.2.1 *The MfGE organisation*

The organisation is based in Stockholm and has local offices in five other large cities in Sweden: Uppsala, Malmö, Göteborg, Umeå and Örebro. The initiative to what eventually became MfGE was taken by Save the Children Sweden in 1993, when men on the organisation's Board of Directors decided to manifest a petition as a reaction against male violence and abuse of women in relation to the Balkan Wars. This eventually led to the official start of MfGE in 1999.

MfGE has an annual turnover of approximately 1.5 million Euros and receives an annual funding of about 100,000 Euros from the Swedish National Board of Health and Welfare, primarily used for administering the organisation. Additional funding for funding the operational work comes from project grants running for one to four years, primarily from the Swedish Inheritance Fund, SIDA, World Childhood Foundation, and the Swedish Agency for Youth and Civil Society. Several of the projects within the organisation fund themselves via consult fees and by selling products, such as films, lectures and courses. As an example, the organisation earns about 100,000 Euros each year from selling the course *Machofabriken* (eng: the Macho factory) and *Jämställt föräldraskap* (eng: Equal parenting - EP). MfGE is also working closely together with women's organisations, such as Unizon, an umbrella organisation for 120 women's shelters in Sweden. 75% of staff and volunteers at MfGE are men.

9.2.2 *The theoretical platform of MfGE*

In prevention literature (i.e. Nation et al. 2003), theory is understood to be a key element for successful interventions, both in terms of etiological theory used to understand the causes of violence, and intervention theory describing the best methods for change. More specifically, Barker et al. (2007) emphasize that efforts directed at boys and men with a gender-changing approach appear to be more effective than programs that lack a critical gender perspective. Kelly and Lovett (2012) argue that prevention strategies must address the causes of violence against women, which are rooted in gender orders (cf. Hearn 1998; Connell 2009), the persistence of gender inequality and the associated entitlement that many men still hold with respect to women and girls. MfGE positions itself as explicitly feminist and a feminist power analysis constitutes the theoretical platform of the organisation together with critical masculinity theory. Hereby, men's vulnerability is understood in the light of men's privileges and power (www.mfj.se). Violence is understood as being an expression of power and control and caused by gender based power inequality and the abuser is understood to be entirely responsible for the violence, regardless of what the perpetrator says. The presumption in this theoretical perspective is that there are always alternatives to violence.

Furthermore, violence is understood along a continuum, from milder forms to more severe violence, whereby milder forms of violence cannot be understood as separate from severe forms (see Kelly 1988). This means that efforts to counteract milder forms of violence may help to prevent more severe forms of violence. Violence must also be understood in relation to gender and sexuality, including man to man violence. MfGE refers to critical masculinity research arguing for the importance to see the connections between boys' and men's violence and gender-stereotyped masculinity norms, and understand the structural ordering of gender power as the main reason and explanation for male violence (cf. Hearn 1998).

According to MfGE, gender inequality is rooted in gendered power structures, meaning that societies are organised around gender and sexuality which has profound consequences for men's and women's everyday life in terms of power, influence and value. Furthermore, MfGE argues that the ordering of gender power gives men more power and influence than women, but it is also detrimental to and causes difficulties for many men (www.mfj.se). The ordering of gender power does not only refer to the relationship between men and women as groups, but also to the relationships within the groups respectively, as it structures power relations among men and among women. The power relations among men are important also in understanding male-to-male violence and homophobic violence. Social norms about sex and gender have considerable impact on boy's and men's lives. According to MfGE, how boys and men are engaged in gender equality and issues of sex and gender needs to be developed, in politics, as well as in practical gender equality work.

MfGE are aiming to offer prevention programmes with a critical gender perspective for the prevention of violence to be even more effective. Thus, gender theory serves as a platform for the entire organisation, as well as, the basis for separate projects and prevention programmes within MfGE. The importance of theory is well established within MfGE, and the organisation has an ongoing and well-established dialogue with feminist and masculinity researchers both in Sweden and internationally.

9.2.3 Key elements in prevention programs

Prevention literature has identified key elements in effective or promising elements in prevention programs (e.g. Berkowitz 2002; Lonsway 2009; Flood 2011; Kelly & Lovett 2012). In line with Alan Berkowitz, Michael Flood (2002) argues that a successful prevention programme targeting men's violence against women is *comprehensive*, in that it includes relevant community members and systems; *intensive*, involving active participation, sustained over time, *relevant to the audience*, in that it acknowledges the needs of the participants, and *based on positive messages* reinforcing healthy behaviours and norms, encouraging individuals on what they can do.

In a review-of-reviews, Nation et al. (2003) identified nine characteristics of prevention programs as being effective across several different targeted problems. Five of which are related to the program. The first principal relates to the program being *theory driven*, referring to the need for scientific justification of a prevention intervention, both etiological theory explaining the causes of the problem and intervention theory focusing on methods for change. *Varied teaching methods* like some type of active, skills-based component are argued to be important, as well as interactive instructions. Further characteristics are, *sufficient dosage*, referring to the need for participants to be exposed to enough of the intervention for it to have an effect, and *comprehensiveness*, defined as providing an array of interventions to address the targeted problem, i.e. multimodal interventions. Also, it is important to engage not only peers and parents, but also schools and communities. A final characteristic which is consistently associated with positive outcomes in prevention programs is the need for children to develop *positive relationships* both to parents, peers and significant others.

Other principals are related to matching the program with the target population, and include the intervention being *appropriately timed*, i.e. the intervention should be timed to occur in a child's life when it will have maximal impact. Often interventions are implemented after a problem behaviour is exhibited or at a time when the programs are developmentally less relevant to the participants. The programs should preferably be timed to focus changeable precursors. Also, the program needs to be *socioculturally relevant*, meaning that the relevance of the program to the participants is a primary concern in producing positive outcomes. In tailoring programs to be socioculturally relevant, deep structure modification is needed rather than just a language translation. Also the program need to address the individual needs of participants, as one-size-fits-all work best for those who least need the intervention, and may even exacerbate problems experienced by those most in need.

Characteristics related to implementation and evaluation of prevention programs include *well-trained staff*, as a high-quality program can produce disappointing results if the providers are poorly selected, poorly trained or poorly supervised, while well-trained staff can enhance the impact of the program, and *outcome evaluation*, meaning that it is necessary to determine program effectiveness and avoid anecdotal or case study evidence (Nation et al. 2003).

In the current report, we will discuss the programmes offered by MfGE in relation to key elements of successful programs, and we have chosen characteristics relevant to the programmes. The key elements used in this report are i) how *comprehensive* the programs are, ii) the *theory* behind them, iii) how *intense and varied the methods* are, iv) the focus on *positive messages and relationships*, v) how *relevant* the programs are socioculturally and developmentally. Finally we discuss vi) the *training of the leaders*, vii) and the results of available *evaluations*.

9.3 Equal Parenthood (EP)

Equal Parenthood develops and carries out activities promoting equal parenting among new and expectant parents, with special focus on fathers. EP has two main strands of activities, *first* they offer *Föräldra- och Pappagrupper* (eng: Parental and paternal groups) locally across the country, *second* they offer a variety of activities to health care organisations. The origin of EP is the parental and paternal groups first set up some 15-20 years ago, incorporated in MfGE in 2003 as the so called *Pappa på riktigt*-project (eng: Daddy for Real).

Approximately 50% of EP activities are directed at local parental and father groups across the country, and 50% are directed at health care organisations, such as maternity centres and child health centres. Parental groups are organised all over Sweden, and EP has contact with all of the 20 county health care organisations.

Male involvement in and responsibility for their child/-ren and the importance of a joint parenthood is emphasised and EP works to increase gender equality both nationally and internationally. The EP project hereby offers primary and universal prevention in the sense that the EP groups and information material is offered to any new or expectant parent, without indication of violence. However, the project is based on the idea that the time of becoming a parent may be a risk-period for violence to develop and also a period when individuals may be particularly prone to change. While this does not mean focusing on a risk-group, it does address the general population at, what can be called, a risk-period in life. Therefore, we claim that EP is to be considered a mostly universal prevention-project (aiming at the entire population), but with certain aspects of selective prevention (aiming at a specific risk-group).

9.3.1 *Comprehensiveness*

The activities offered to health care facilities are quite extensive and varied as EP offers conferences, inspiration days, courses/trainings, lectures, seminars and workshops on gender-equal parenthood for health professionals that meet parents in their daily work, such as midwives and paediatric nurses. The general goal is to make health care practitioners improve their ability to offer equal parental support and highlight the importance of gender equality in parenthood and how the role of the father affects young children. To health practitioners, EP offers the following programs:

- *Jämställt föräldrastöd* (eng: Gender Equal Parental Support), a course for midwives, paediatric nurses, family centres and others in the perinatal care chain.
- *Möt pappan/partnern - skapa delaktighet i föräldraskapet* (eng: Meet the father/partner - creating participation in parenthood), a workshop with lectures and practical exercises about meeting the wishes and needs of fathers wanting to be better prepared for their child's birth, including how to take good care of a new born child at home before, during and after birth.
- *Metoder och verktyg i föräldragruppen* (eng: Methods and tools for parental group leaders), is a course including how to handle silent participants, new family constellations and promote a gender sensitive content for both parents.
- *Om Amning!* (eng: About breastfeeding!), inspires new thinking about information leading to higher frequency in breastfeeding and more gender equal parenting.

These activities indicate the scope of the work EP does with health care facilities, and this aspect of EP can be considered to be rather comprehensive. Aspects of the issues covered in the above described activities are also included in the parental and paternal groups that EP offers.

The remainder of this report will be devoted to the paternal groups as they illustrate how MfGE works first-hand with men and fathers. Fathers visiting clinics running a EP programme are offered to participate in the groups. Participation is voluntary and the groups gather all interested fathers/fathers-to-be including parents of diverse ethnic backgrounds and diverse family structures. The paternal groups usually meet 4 times, starting right after the child is born and running for up to 5 months. The goal is to improve fathers' knowledge of and attitudes towards gender equality in relation to their partner relation, and to increase their involvement as caretakers. The goal of the paternal groups is to offer fathers/fathers-to-be alternative and more gender equal strategies in the relationship and in their fatherhood.

9.3.2 *Theory*

The theoretical underpinning of the paternal groups is made explicit in the course material for new group leaders (Kursmaterial, PGR 2010). References are, for instance, made to scholars arguing for the opportunity for new parents to meet and talk about their new life (Hwang 2005). The point of departure for the parental and paternal groups is children's rights according to the UNCRC and the theoretical argument that engaged fathers are in the best interest of the child (Kursplan, PGR 2010). In particular breast feeding is highlighted, and how the father can support the mother and appreciate the importance of breast feeding. This is done in relation to attachment theory (cf. Bowlby 1969). The Swedish gender theorist Yvonne Hirdman (2001) is referenced and gender is described as a social construction having practical implication for, among other things, how health care is organised (Kursmaterial PRG 2010).

Parenthood, motherhood and fatherhood is described referencing current research showing parenthood to be engendered entailing different things to mothers and fathers (Elwin-Novak 2005).

Parental leave is shown to be a choice for fathers and an obligation to mothers (Bekkengen 2002), and men are seen as “good fathers” when changing diapers or otherwise care for the baby while the same thing is seen as “natural” for mothers (Nathorst-Böös 2007). In relation to the violence, shaken baby syndrome is discussed.

9.3.3 *Methods*

The basic method of the paternal groups is group discussions on specific themes combined with home assignments. The leader of the group works as a moderator stimulating conversations between the participants. In the instructions to the group leader it is stated: “You are not a daddy-expert!” (Kursmaterial PRG 2010). The group leader is to set the tone and frame the discussions, rather than teach or deliver facts. The group activity is also described as a process offering insights into how to be a different and more gender equal father. The contents of the discussions are to be formed by the individual leader and by the participants themselves within a set framework. Some themes are defined as obligatory and that they are touched upon sometime during the sessions. The obligatory themes are:

- Tensions and anxiety before birth.
- The father's role during delivery and not being able to do more.
- The time following the birth, being together and getting to know each other in the new situation.
- A shared parental responsibility caring for the baby.
- Tiredness, happiness, stress. Difficulties in time management and mood swings.
- What can you demand of yourself and others?
- Postpartum depression.
- The importance of having your own time and paying attention to your own needs.
- The importance of showing appreciation and encouraging each other.
- Changes in the relationship and sex life.
- Shaken baby syndrome.

The first session is devoted to *The New Life*, and covers the participants' feelings related to the child-birth, and the parents' roles within the family. The assignment for the participants is to talk to their partners about how they divide chores and time spent with the child. Is this random or planned?

The theme of the second session is *What does it take for my child to have it as good as possible?* Night time routines are discussed, as well as, feelings such as anger and joy. The interaction between child and parent, and how to set boundaries for your child is discussed. The assignment for the following session is to, together with their partner, define the term Gender Equality, and what it means to be a good parent.

The third session poses the question *What does it take for us as a couple to have it as good as possible?* Statistics and facts on conflicts between parents are presented. The discussions are centred on issues of changes in sexual practices and couples communication. The home assignment is to, together with their partner, draw a circle illustrating how time is divided in the household between family, work, leisure, couple time, child time, sleep etc.

The final session is called *What does it take for me to have it as good as possible?* Participants discuss what changes are following the birth of the baby, what differences can they identify between now and then, and what are their thoughts on the future? In particular issues related to parental leave. The last assignment is to appoint somebody to convene the group in the future.

9.3.4 *Positive messages and relationships*

The group conversations are focusing on the positive relationship between the parents, between father and child, but are also facilitating positive relationships among the men taking part in the activity. Importantly, the leader of the paternal group is not viewed as an expert, but rather as a facilitator of dialogue. Research argues for the importance of parental support to be non-stigmatizing (Moran & Gbate 2005), which the method of the EP groups is judged to be as the working principle is not to impose ideas, frames or knowledge but to empower fathers to see their own competences and abilities as parents. The goal of the groups is for men to discover their own capability as fathers to enhance gender equal parenting.

9.3.5 *Relevance to the audience*

Fathers taking part in postnatal services often express that the information is directed at the mother and is not always beneficial to them as fathers (Premberg, Hellström & Berg 2008). Fathers also describe feeling unprepared for the birth and caring for their new child, as they feel that prenatal education is not geared towards them (Thomas, Bonér & Hildingsson 2011). This is a shortcoming that the EP paternal groups are aiming to redeem. In the course material (Kursmaterial, PGR 2010), it is described as rare for men in a Swedish context to have the opportunity to talk to other men about their lives to any greater extent. Having a space exclusively for men to talk about the experience of becoming a father is however welcomed by men (Borglund & Svebeus 2013), and the EP paternal groups are offering men such space. Furthermore, research has argued that initiatives to include fathers must be sensitive to the differences between groups of fathers (Thomas, Bonér & Hildingsson 2011). The EP paternal groups have no specific design tailored to different groups but are flexible in making it possible for the individual group leader to shape the content of the discussions to the particular group.

9.3.6 *Training of the leaders*

The training of the group leaders is conducted by MfGE staff and includes a full-day workshop talking about the goals of the activity, i.e. the theoretical foundation in gender theory and children's rights (UNCRC). Key to the success of the group is to find the right person leading the group. The group leaders are all male and themselves fathers. They are volunteers, and often have a professional background in teaching or social work, making them suitable as moderators. Research shows that a critical factor for a good outcome is the ability of the leader to build good relationships with parents and to work in partnership with them (Moran & Ghate 2005). This perspective is highlighted in the training as the leaders are thought of as guides rather than teachers or experts. Paternalistic attitudes should be avoided as the leader ideally is understood as equal to the participants.

9.3.7 *Evaluations*

The EP project has to date only been evaluated mainly for internal program development in its test version *Daddy for Real* (Schiratzki & Berggren 2009). The evaluation investigated several aims of the activity:

- Illustrate to participants how important the father is to the child.
- To prepare the man mentally for the birth.
- Increase understanding between man and woman and thus strengthen couple relationships.
- Put the child's right in the centre.
- To increase paternity leave and thus allow him to get some of the first time with the child.
- Highlighting the child's right to bond with both mom and dad.

Between 2003 and 2007, *Daddy for Real* attracted 2600 fathers in Sweden, of which 1500 participated in all the sessions. By means of an e-mail distributed questionnaire responded by 490 previous participants (response rate 60.6%), Schiratzki and Berggren (2009) found that 63.4% of respondents were on parental leave with their child for at least five months and 69.1% indicated that they stayed home half or more of the days the child needs care because of illness on temporary parental benefit, which is almost twice the general number in official statistics (35%). Of their children, 84% were breast-fed (fully or partly) for at least five months, which is a relatively high level compared to statistics of breastfeeding in Stockholm County Council. The majority of respondents believed that their participation in *Daddy for Real* meant that they more equally shared the responsibility of children (58.7%). Of the participants, 80.1% claimed that *Daddy for Real* had made them change their attitude towards their children and the mother. Finally, Schiratzki and Berggren (2009) found that 66.1% of the fathers reported that their relationship with the children had improved and 60.8% that their relationship with the mother had improved from the *Daddy for Real*-groups.

9.3.8 *Remarks*

EP's varied program activities provide an array of interventions to address the targeted problem, i.e. insufficient parental gender equality. However, it does not engage impacting systems, such as school or community norms. They use varied teaching methods, but whether the dosage is sufficient, we cannot judge. On the one hand, their own evaluation showed promising results, on the other, there are no

long-term follow-up and additional evaluation is necessary. By our assessment, the program is definitely driven by a clear theoretical framework of gender equality and masculinity. By addressing gender equality issues during pregnancy or just after the baby is born, the EP paternal groups is very well timed. They are also socioculturally relevant in the sense that the individual group leader can shape the programme after the participants using the course material as a frame to discuss issues deemed important by the participants themselves.

Also, EP uses a gendered and human rights approach while providing a local connection at the same time. In addition, the themes make it replicable while the idea that each group fills the theme with content makes it sustainable over time and cultures. Further, the project includes partnerships and community ownership (cf. Hester & Lilley, 2014). However, its evidence base is very limited and the EP project is in need of structured evaluation to determine program effectiveness and avoid anecdotal or case study evidence.

9.4 *Freedom From Violence (FFV)*

Freedom from Violence offers early violence prevention aims at children and young people based on a clear gender perspective, in order to develop methods to limit the incidence and consequences of violence. The FFV project focuses on the importance of bystanders, before, during or after a violent incident in young people's intimate relationships. FFV spreads knowledge about violence prevention by offering schools and universities education, guidance and support in practical implementation. FFV offers primary and universal prevention designed to connect to other types of violence prevention efforts, including preventive interventions for at-risk groups, long-term care of victims of violence and practitioners and so-called indicative interventions for those who have already experienced violence (cf. Sjögren et al. 2012).

FFV can be divided in two parts. First, FFV works as a knowledge centre for violence prevention, offering lectures and conferences on violence prevention focusing on campaigns and systems change. In addition, FFV is lobbying national actors such as the Swedish Association of Local Authorities and Regions, the Swedish National Agency for Education, the Swedish Police Service, the National Board of Health and Welfare. Second, FFV has developed and is offering a violence prevention programme aimed at school children 16 years of age. The violence prevention programme is an adaptation of the American Mentors in Violence Prevention (MVP). MVP was developed in 1993 at Northeastern University in Boston, Massachusetts by PhD Jackson Katz. MfGE has translated the manuals and adjusted the content to the Swedish context, based on trials in Swedish schools and an understanding that some terminology and some themes and scenarios were not possible to translate and implement in Sweden. An example of adjustments made, is the issues of sexism, which has been toned down in the Swedish material due to the reaction by Swedish students. The cultural climate in Sweden does not accept or condone overt sexist attitudes or behaviours, so the examples from the US material were not relevant for the Swedish participants. In the remainder of the report, we will first concentrate on describing the Swedish version of MVP and second, draw on available international evaluations of MVP.

9.4.1 *Mentors in Violence Prevention*

Comprehensiveness

The programme is developed to be used in an entire school. All children in the class, irrespective of gender, participate in the programme. Ideally all staff, from head principal to service staff, undergoes the same violence prevention training. MVP has in that sense a universal and primary preventive focus on changing social responses (i.e. how the environment reacts) to violence.

MVP consists of an interactive 2-hour-session each week for 6-7 weeks (12-14 hours in total), alternatively as full days, half days or recurrent lessons.

9.4.2 *Theory*

MVP is based on gender equality and norm critical perspectives. It is based on an idea of the bystander's power to intervene in a safe and constructive manner to prevent violence that occurs or to mitigate the consequences of violence. MVP is based on a social justice-oriented gender perspective, focusing on the role of the bystander and complicit silence exercised by members of dominant groups.

The starting points for the programme are questions of gender, race, and sexual orientation. Techniques for bystander intervention are taught as a way for individuals to interrupt the enactment of abuse. Violence, abuse and harassment are seen as micro manifestations of a macro system based on gendered power and control (as opposed to gender-neutral approaches) (Katz et al. 2011).

9.4.3 Teaching methods

The programme is an educational programme for the prevention of gender-based violence and harassment, recognising participants (i.e. students) as bystanders with the ability to identify and intervene in violent or potentially violent situations. Teaching methods include exercises, small group discussions, and short movie clips that illustrate the bystander's importance. Themes covered in the programme are: *Different types of bystanders*, *Domestic violence*, *Cramped gender rules*, *Sexual harassment*, *Sexual violence*, and *Homophobia*. The core of the lessons is to encourage reflection on how to help others in a safe manner.

9.4.4 Positive messages and relationships

The message conveyed in MVP is that everybody can do something to prevent violence. Although the programme addresses pupils irrespective of gender, it provides an opportunity for young men to see their role in creating a positive peer culture in which abuse of women is seen as unacceptable (Katz 1995; Flood 2004). Importantly, the programme does not attribute blame or describe men as potential perpetrators, but rather creates awareness about violence and sexual harassment being everyone's responsibility.

9.4.5 Relevance to the audience

Violence towards women and particularly sexual violence is judged relevant to discuss with 16-year-olds, as this is a period in life when young people are discovering and experimenting with both identity and sexuality. Therefore, the issue of the programme is judged relevant to the audience. The training material is made relevant to the audience by using current cultural references such as discussing the Swedish artist Yohio, who competed in the Swedish Eurovision Song Contest in 2013 or how to deal with expressions of, so called, online hate using a clip from the TV show *Uppdrag Granskning*.

9.4.6 Training of the leaders

Initially, the MfGE staff was leading the MVP sessions with the purpose of developing the Swedish manual for the adapted programme. FFV has adopted a model for training session leaders inspired by a Master Trainer model in which the Swedish developers revive master training by the American MVP program developers. The plan is to have 4-5 Master Trainers in charge of training teachers and school staff, as well as young people in a peer-to-peer system. This has unfortunately not been carried out yet. During the programme developing phase, FFV staff has received supervision by the American MVP organisation.

9.4.7 Evaluations

The FFV project meets many of the above mentioned general characteristics of effective prevention programs. In addition, it seems to correspond well to the factors in the bystander that maximize the likelihood that s/he will help in emergency situations identified by a literature review by Banyard, Plante and Moynihan (2004):

- awareness of the problem and its negative impact on the victim,
- view victims as not the cause of their problems,
- is asked to make a commitment to help and see her-/himself as partially responsible for solving the problem, and
- feels that s/he possesses the skills to intervene and has the opportunity to view others who models such behaviours.

While broader community norms also play a role, research (Banyard, Plante, & Moynihan, 2004) show that cohesive groups, talking about and developing consensus around helping others, are more likely to intervene in violent or potentially violent situation.

In an international report evaluating MVP, Cissner (2009) found that both peer educators and workshop participants reported significantly less sexist attitudes and improved sense that they could intervene to prevent gender violence than a comparison group after MVP. In addition, workshop participants

attributed significantly less sexist attitudes to their peers after MVP, but peer educators' assessment of their peers did not change significantly. However, the MVP program had a significantly greater impact on peer educators than workshop participants in terms of both decreased sexist attitudes and improved self-efficacy. Cissner (2009:58-59) concludes:

Overall, there is no indication that the MVP curriculum produced a significant impact on general rates of violence at Syracuse University. At the same time, changes in participant attitudes and predicted behaviors imply that over time, and particularly if the intervention is disseminated more widely across the student body, it is plausible to expect reductions in violence to occur.

Katz et al. (2011) advance these evaluation initiatives by presenting findings of an outcome evaluation in a high school setting of students that averages 16 years of age. Students in the MVP school perceived both aggressive and less aggressive behaviours as more wrong than did students in the non-MVP school, and that students in the MVP school reported being more likely to intervene than non-MVP students when they encounter situations involving more aggressive types of behaviours. However, no significant differences were found between the MVP and non-MVP schools regarding taking action in less aggressive situations (Katz et al. 2011).

The FFV, including MVP, has not yet been effect evaluated in Sweden, but a follow up of the 2010-2014 project has been conducted. In the four years (2010-2014) FFV were funded by Swedish Heritage Fund, the project reached 339 pupils aged 13-20 years, half of which girls, at three schools. The different schools in the programmes were quite different in terms of how many had Swedish as their first language, had an ethnically diverse family background, were high achieving and came from socio-economical strong families. In all, the project reached more than 77,000 people (including pupils, school staff, parents and other groups through conferences, lectures/presentations, media, manuals/books and other organizations), in events directly organised by the project, in events not directly organised and in second hand information relayed to family and colleges. In the report, the project managers write (FFV 2014:2):

We have also evaluated the program activities by handing out a questionnaire after each lesson and by talking to students and staff. The program managers have been asked to fill in a questionnaire after each application session. In addition, each action in schools was assessed during the day along with program managers to find ways that programs can be revised and thus improved.

The results of these evaluation activities are not published, but the project managers conclude that the participants expressed a great satisfaction with being offered the opportunity to speak about violence and especially appreciated discussing sexual harassment and sexual violence and think the lessons have been meaningful and they feel better prepared for intervening in destructive and violent situations.

The FFV-project has now evolved into *Kommun fri från våld* (eng: Municipality Free From Violence, building on the previous project encompassing the entire community in two municipalities in Sweden.

9.4.8 Remarks

Thus, the evidence that MVP changes violence-related attitudes is moderate and findings about behavioural change are non-existent. However, the evidence base being somewhat limited is not unique to MVP, as there is a general lack of robust evaluations of prevention measures (Hester & Lilley, 2014). It is generally difficult to demonstrate clear effects and results of universal intervention efforts, as the target is the general public and not a "problem group". Also, behavioural change in bystander interference is not the same as decrease of violence. In the light of the evaluations done and the general state of violence prevention programme evidence base, we therefore suggest that these results taken together indicate that the MVP program can be considered as "promising", as it uses a gendered and human rights approach, is sustainable and replicable by the manuals, and includes partnerships and community ownership (cf. Hester & Lilley 2014). FFV argues for the urgency in adults taking an active part in shaping non-violent environments for children and young people. The FFV programme also aims to prevent the continuation of gender stereotypes, and in addition addresses attitudes that can contribute to an acceptance of gender-based violence and improves understanding of the root causes of gender-based violence and what constitutes a respectful and healthy relationship.

FFV is *comprehensive* in providing an array of interventions to address the targeted problem, i.e. changing social responses to violence. Particularly, it engages impacting systems, such as school or community norms, engaging parents, peers and significant others. Like EP, FFV uses *varied teaching* methods, but whether the dosage is sufficient, we cannot judge as evaluations have not tested variations in impact between the longer and shorter versions of the activities. The program is based on relatively clearly *theories of masculinity, violence and bystander activity*. Whether adolescence is the best timing for these activities cannot be judged and we welcome evaluation of at what age the FFV activities might have best impact on later actual bystander intervention. By addressing violence prevention through the bystanders' positions and possibilities to act, we believe the project has increased the relevance of the program to the participants. Although the MVP has been evaluated in the USA, evaluations of the Swedish version in the Swedish context are necessary for determining program effectiveness.

9.5 *Concluding discussion*

To sum up, both programs/projects include many of the elements that prevention literature has identified in effective or promising elements in prevention programs. However, the general lack of robust evaluations of prevention measures (Hester & Lilley, 2014) also includes these projects.

Together, the projects of MfGE promote changes in the social and cultural patterns of behaviour of women/girls and men/boys with the aim to eradicate prejudices, customs, traditions and other practices that are based on the inferiority of women, on stereotyped roles for women and men and encourage all members of society, especially men and boys, to contribute actively to preventing all forms of violence (cf. Council of Europe 2011, Article 12 §1, §4). Men's responsibility is prioritized over the empowerment of women (cf. Council of Europe 2011, Article 12 §6). The projects do not, however, explicitly take into account and address the specific needs of persons made vulnerable by particular circumstances (cf. Council of Europe 2011, Article 12 §3). The projects do not explicitly address the role of culture, custom, religion, tradition or so-called "honour" (cf. Council of Europe 2011, Article 12 §5) but do not consider such aspects as justification of any acts of violence (cf. Council of Europe 2011, Article 12 §5).

The preventive measures to promote the disruption of the different paths that may lead to violence provided by MfGE challenge gender stereotypes through campaigns that are designed to highlight social norms based on gender stereotypes, challenge victim-blaming attitudes, and promote positive change in behaviour. Thus, the preventive measures include the societal, institutional, community and individual levels. However, they only indirectly review and amend legislation that reinforces, perpetuates or otherwise incorporates gender stereotypes and focus primarily on educating children and young people. The measures involve men and boys as agents of positive change, by engaging them at different levels of intervention, through the use of creative, participatory and interactive methods of inclusion and challenge resistance while ensuring that intervention is developed in co-operation with women-centred organizations.

These measures do not directly increase the leadership and agency of women in the economic and political spheres to counter the effects of negative gender stereotypes and inequality by mainstreaming gender within legislation, policy and practice. One could say that the FFV project addresses negative gender stereotypes and inequality in general, while the EP project targets the specific needs of women in relation to caring for the young child. The EP project indirectly, but clearly, promotes women's rights by preventing the continuation of gender stereotypes and improving respectful and healthy relationships and father involvement.

MfGE do not, to our knowledge, collaborate with all media organizations to promote a culture of gender equality and awareness of gender-based violence against women and its root causes. But the organisation is working to expanding their presence on social media, primarily via the *Fatta! Man* project. To our knowledge, MfGE has not yet made available reliable, detailed data on how their work is improving gender equality and preventing gender-based violence against women that identifies the effectiveness of different methods of prevention they use. However, a project aiming at gathering data on FFV has received funding and is planned to start in 2015.

9.5.1 Implementation

In implementation literature, some key elements in implementing programs have been identified (Mihalic & Irwine 2003). Developing an appropriate program based on the criteria for what works in prevention is the starting point of a successful program. How it is implemented is, however, equally important, research shows. Cross and West (2011) argue that the effectiveness of programs cannot surpass the skills levels of the people implementing them, meaning that programmes that are too complex in structure or content will be difficult to implement beyond the scope of the programme developers. Extensive research argues for intervention fidelity, and a strong belief that all future implementations of an efficacious program must be delivered in a manner that is true to the original model to replicate positive outcomes (August et al. 2010). This is however difficult to achieve in naturalistic settings especially if the intervention is complex, and studies show that complex programs are often simplified in the implementation process (Rohrbach, Graham & Hansen 1993). A balance between intervention fidelity and adaptation is called for by August et al. (2010) promoting program developers to provide guidelines for adaptation. Also, developers need to collaborate with stakeholders together planning the program. This creates scaffolding around the program while fitting it to the needs of the community (August et al. 2010). August et al. (2010:85) promote the need to go beyond looking at the efficacy and effectiveness of evidence based programs "into the realm of community relevance and practicality", and create interventions that are both adaptive and adapted.

EP paternal groups have developed over a period of time by EP staff. Importantly, this development has occurred in close dialogue with stakeholders, such as health care facilities and professionals. The EP paternal groups have also expanded to other countries and are currently in operation in Russia, Ukraine, Belarus, Namibia and South Africa to mention a few. In implementing the paternal group programme, EP staff holds workshops to train session leaders. In these workshops the general theoretical perspective is presented, where after the participants themselves discuss themes and activities to fill the programme with. In this way the implementation becomes culturally sensitive while at the same time staying true to the core message of children's and women's rights and masculinity theory. No evaluations have been done on the implementation of EP in other cultural contexts. The mode of implementation, however, makes the programme itself highly flexible, and in line with implementation research (August et al. 2010).

FFV's work to implement MVP can be considered in line with implementation research, as they have adapted the programme to fit the Swedish cultural context, using contemporary cultural references and omitting issues of sexism not relevant to the Swedish audience, while staying true to the core of the program (August et al. 2010). This is due to a close relationship with the American programme developers and continuous supervision. The effectiveness of the implementation of MVP in Sweden is, however, in need of evaluation. The recommendation for others interested in implementing MVP is to follow the example of FFV and do it in collaboration with the original programme developers.

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www.mfj.se

10 *GEAR: a school-based intervention against intimate partner violence in Greece*

Kiki Petroulaki



10.1 *Summary*

The project “**Gender Equality Awareness Raising against Intimate Partner Violence**” (**GEAR against IPV**) is a coordinated action of **primary prevention of Intimate Partner Violence (IPV)** through **school-based interventions** aiming to raise awareness of both high-school students and teachers on the harmful effects of gender stereotypes and of unequal power relationships between the sexes as well as on how these are related with gender-based violence.

More specifically, the aims of the “GEAR against IPV” project are to promote gender equality, by deconstructing gender stereotypes, which is expected to greatly contribute to the development of **healthy and equal relationships**, to the primary prevention of violence against women and girls as well as to the development of **zero tolerance towards violence**. The “GEAR against IPV” project intends to achieve its aims by raising students’ awareness on:

- a) the characteristics of healthy and unhealthy relationships
- b) the influence that stereotypical attitudes and socially imposed gender roles have on their relationships
- c) how power inequality between the sexes is related to psychological, physical and/or sexual violence against women/girls and
- d) how adolescents can contribute to the prevention of all forms of gender-based violence.

And changing their attitudes towards, skills (see remarks below)

For the achievement of these aims, the **Master “GEAR against IPV” Package** was developed (which is available online on the project’s website: www.1st.gear-ipv.eu) that consists of 4 Booklets:

- **Booklet I.** The Master GEAR against IPV Package and How to Develop your own National Package
- **Booklet II.** Guidelines for Conducting a GEAR against IPV Teachers’ Training Seminar
- **Booklet III.** Teacher’s Manual
- **Booklet IV.** Students’ Activities Book.

The Master Package is a prototype that guides the creation of culturally appropriately adapted **National Packages** for any country that wishes to **Train Teachers** (Booklet II) in order to be able to implement **Gender Equality Awareness Raising Workshops for students** (Booklets III and IV) as a means of primary and/or secondary prevention of Intimate Partner Violence.

In the context of the “GEAR against IPV” Project, four National (**Austrian, Croatian, German and Greek**) “GEAR against IPV” Packages were developed; three more (Cypriot, Romanian and Spanish) are currently developed under the project “GEAR against IPV-II”.

On the basis of the National GEAR against IPV Packages that were developed, **Teachers’ Seminars** were conducted aiming to **build teachers’ capacity** to implement and evaluate the “GEAR against IPV” Workshops in classrooms and to provide them with the opportunity to a) reflect on gender stereotypical attitudes and behaviors as well as on any attitudes supporting tolerance towards violence and their modification and b) obtain all necessary information and skills needed in order to be able to identify and handle potential cases of abuse that might be revealed by students during or after the implementation of the “GEAR against IPV” Workshops. A total of 167 teachers and other school-related professionals such as Health Education Coordinators and school social workers- were specially trained through 9 Seminars that were implemented in Austria, Germany and Greece.

Some of the trained teachers and professionals implemented 27 “GEAR against IPV” workshops in Austria, Germany and Greece, in which a total of 556 students participated, aiming to raise their

awareness on the harmful effects of gender stereotyping, IPV and dating violence, and to encourage the development of attitudes of zero tolerance towards violence at a relatively young age, with the ultimate goal being to promote the development of healthy, equal and violent-free relationships between young people.

10.2 Practical Information on the project

- a. **Name of the Project (Original Title):** Gender Equality Awareness Raising against Intimate Partner Violence (**GEAR against IPV**) [DAPHNE project JLS/2008/DAP3/AG/1258]
- b. **English Title:** same as above
- c. **Country (or even more specific: region)**
 - i. Greece [the students' workshops were implemented in a. Attica Region and in the Prefectures of b. Achaia (Patra), c. Serres, d. Larissa and e. Cyclades (the island of Milos)]
 - ii. Austria (the students' workshops were implemented in a. Lower Austria, b. Styria and c. Upper Austria)
 - iii. Croatia³ (in Croatia teachers' training seminars and students' workshops were not provisioned to be implemented - Croatia was not eligible for funding and participated as associate partner - the partner developed the material but it was not provisioned to proceed to the implementation)
 - iv. Germany (the students' workshops were implemented in Brandenburg)
- e. **Organisation:** European Anti-Violence Network (EAVN)
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Notes:

- A continuation of this project (**GEAR against IPV-II**) has started on **1st October 2014** with a **duration of 2 years** [DAPHNE project JUST/2013/DAP/AG/5408]
- The GEAR against IPV approach has been selected as one of the 12 most successful practices in advocacy and policy dialogue to promote the role of women in society in the Call for "Good practices in advocacy and policy dialogue for the promotion of the role of women in society in the Euro-Mediterranean region" which the European Institute for the Mediterranean (IEMed) launched as part of the Project "Capacity-building in the Southern Mediterranean to Open Policy Dialogue and Monitoring for Women IN Society (CSO WINS)".

10.3 Target group

The target groups of the GEAR against IPV project were two:

- General population of high school students (boys and girls) 14-16 years old (adolescents).
- a) high-school teachers and b) other professionals (or future professionals) related to high-school settings (e.g. Health Education Coordinators/ Guidance Teachers/ Social Work Students) (women and men).

3 Under the project GEAR against IPV-II, that is currently running, implementation will be made in 5 MS, including Croatia.

10.4 Level of prevention

The GEAR against IPV project is a coordinated action of **primary prevention** of Intimate Partner Violence (IPV) through school-based interventions targeting the general population of adolescents 14-16 years old: via promoting gender equality and equipping adolescents with “protective” skills that will enable them to avoid being abused or abuse their intimate partner in the future. At the same time, however, it also contributes to **secondary prevention** because when approaching the general population of students at the age of 14-16 years old, among them there are adolescents who have already started their first romantic/intimate relationships and experienced IPV. Therefore, the project provides also opportunities for secondary prevention as it helps with **early recognition** of cases of IPV by providing knowledge and skills:

- a. to the adolescents in order to recognize the warning signs of abusive relationships and appropriately react (as victims or bystanders) and
- b. to the teachers in order to identify, among their students, adolescents abused in their romantic/intimate relationship and appropriately support or refer them.

To this end, the GEAR against IPV project targets mainly to primary prevention but also to secondary prevention of IPV.

10.5 Method

The GEAR against IPV-II project, aiming at primary and secondary prevention of IPV in adolescents' relationships; the objectives set were the following:

- Develop ready-to-be-used material of high quality that can be used in preventive projects with adolescents.
 - Provide a “Guidance Material” (Master Package) that can be used for the development of culturally appropriate National Packages in each EU country.
 - Develop material (National Packages) for 4 countries.
- Design, conduct and evaluate the following activities targeting to prevention of IPV, on the basis of the materials developed (National GEAR against IPV-II Packages).
 - Teachers' training seminars, aiming at their capacity building to implement awareness raising interventions with adolescents.
 - Awareness raising workshops with adolescents at schools by the trained teachers.

Both of these activities aim to increase participants' knowledge, identify any stereotypical and tolerant to violence attitudes and modify them via experiential activities (see page 15 for the construct that have been measured during the evaluation of students' workshops). In more detail, the GEAR against IPV project intends to promote the development of **healthy and equal relationships** between the sexes and the development of **zero tolerance towards violence** by raising students' awareness on:

- a. The characteristics of healthy and unhealthy relationships.
- b. The influence that stereotypical attitudes and socially imposed gender roles have on their relationship.
- c. How power inequality between the sexes is related to psychological, physical and/or sexual abuse against women/ girls.
- d. How adolescents can contribute to the prevention of all forms of gender-based violence.
- e. Although awareness raising is the primary goal, attention is also paid to attitude change and fostering of skills.

The **educational system**, at all levels, is the ideal setting for such an effort, where properly trained teachers can play a key role in the implementation of similar interventions. However, the problem of IPV and the manner in which gender stereotypical attitudes contribute to the phenomenon, are rarely integrated -or at least non-systematically- in school activities or curricula.

The GEAR against IPV approach is a systematic intervention in the school setting, where girls and boys are invited, through a series of exclusively interactive activities, to assess and challenge their

culturally “inherited” gender stereotypes and to approach differences between genders as individual differences rather than as characteristics of superiority of one gender over the other.

Teachers were selected because they can play a key role in the implementation of such awareness raising activities in classrooms, as they are the adults who are closest to children, after their parents; but, unless they are specially trained, most teachers are anticipated to share the same inherent stereotypical view of genders with the general population, which constitutes a major barrier, preventing them from fulfilling their key role. This is exactly the reason that the GEAR against IPV project also includes teachers’ training which, apart from building necessary capacity and skills, also places great emphasis on deconstructing teachers’ own gender stereotypes as well as to genuinely convince them of the importance of the project’s implementation. As almost all children and adolescents attend school, it is imperative that gender equality programs are offered in schools, as a means of primary prevention of gender-based violence, dating violence and IPV, by teachers that are properly sensitized and trained on gender stereotypes and how they relate to violence.

Unfortunately, in most EU countries -including the countries that participated in this project -such efforts are not incorporated within the schools’ curricula; teachers are neither sensitized nor trained, which results not only in the fact that they bear themselves stereotypical gender perceptions, but also that, based on them, they treat students in a discriminating way according to their sex; even worse is that many teachers are unaware that their behaviour is gender discriminative and they often reinforce a stereotyped gender-role behaviour. The GEAR against IPV project aims to contribute to the modification of this situation by raising teachers’ awareness and guiding them to identify and deconstruct their own gender stereotypes.

The **age of the students** targeted by the “GEAR against IPV” project (14-16 years old)⁴ is not the youngest possible, even though all of the professionals who worked for this project share a strong belief that preventive efforts targeting the deconstruction of gender stereotypes must start at the earliest possible age in school settings (namely, from kindergarten); in many countries though, there is still great resistance from educational authorities in regards to the age that is considered appropriate for children to participate in such types of interventions, which results in not allowing similar programs to be implemented, not even for primary school children; in order to bend this resistance, it was decided that these countries would follow the opposite route, namely to begin preventive efforts in a higher level of education level, moving towards lower levels.

But even though children are fed gender stereotypes from birth, which renders it important to begin deconstructing them at as early an age as possible, the age 14-16 is also a very crucial age because this is the age where most teenagers begin or have begun their first romantic relationship. The school system can be a key intervention point in providing students with the necessary information and skills they need to avoid perpetrating or suffering from dating violence and/or how to react against it.

The GEAR against IPV Project carried out with the financial support of the **DAPHNE III Programme of the European Union** (Project Grand Agreement No: JLS/2008/DAP3/AG/1258).

10.5.1 Methodology

- To achieve its objectives, the GEAR against IPV project developed a complete **educational Package**⁵, which can be used to **train teachers** (Booklet II) and to **implement awareness raising Workshops with students** (Booklets III and IV); the material has been developed in such a way that it can be used as a model for the development of National Packages for use in different countries. More specifically, during the Project:
 - the **Master GEAR against IPV Package**, comprised of 4 booklets (available in English), was developed and evaluated⁶ and
 - **4 National GEAR against IPV Packages** (Austrian, German, Greek and Croatian), were developed after translation, completion and cultural adaptation of the GEAR against IPV Master Package’s four booklets
- **Teachers’ Training Seminars** have been conducted and evaluated in Austria, Germany and Greece, which aimed to train teachers on gender equality and gender-based violence as well as to provide

4 The age range broadened (12+ years) in the context of the GEAR against IPV-II project.

5 All GEAR against IPV Packages developed in the context of the project are available on the project’s website (www.1st.gear-ipv.eu)

6 The Master GEAR against IPV Package was evaluated on a voluntary basis by experts on gender equality and/or on prevention of IPV.

the knowledge and skills related to the methodology for implementing the GEAR against IPV Workshops in secondary schools

- **GEAR against IPV Workshops**, using experiential activities for raising awareness (attitudes, skills....) on gender stereotypes and preventing teen dating violence, were implemented and evaluated with **secondary school students** in Austria, Germany and Greece.

The GEAR against IPV Educational Material

The “GEAR against IPV” Master Package was developed in order to be the model for the four National Packages (Austrian, Croatian, German and Greek) that were developed in the context of the Project “GEAR against IPV” and for any additional National Packages that could be developed by other interested countries in the future.

The Master “GEAR against IPV” Package consists of four Booklets:

- **Booklet I:** The Master “GEAR against IPV” Package and How to Develop your own National Package.
- **Booklet II:** Guidelines for conducting a “GEAR against IPV” Teachers’ Seminar.
- **Booklet III:** “GEAR against IPV” Teacher’s Manual.
- **Booklet IV:** “GEAR against IPV” Students’ Activities Book.



Booklet I of the Master Package is addressed to agencies and/or professionals working in the field of IPV prevention and gender equality promotion especially in school settings, aiming primarily at informing them about the existence of both, the material and the project and offering guidelines on how to develop their own National versions of the material. To this end, Booklet I consists of three main parts:

The 1st part provides all of the information concerning the aims and technical characteristics of the GEAR against IPV project. The structure and contents of the Master Package’s Booklets, along with the stages followed for the development of the material are also described.

The 2nd part is compiled in the form of a guide addressed to those interested in developing their own National Package in their countries’ official languages: it provides guidelines on how the material can be adapted in order to be more appropriate for use in accordance with the specific cultural and other characteristics and existing conditions of each country as well as on country-specific parts that need to be completed, such as the extent of the IPV problem, the existing legislation concerning IPV and the existing support structures for abused girls/women in the country.

The 3rd part contains suggestions for any interested party on how to effectively disseminate their National Packages and furthermore on how to lobby in order to promote the implementation of the GEAR against IPV intervention in the secondary education setting.



Booklet II proposes, in 3 separate sections, a step-by-step description for **organising, implementing and evaluating** training seminars in order to guide comparable and effective trainings of teachers that intend to implement GEAR against IPV Workshops with secondary school students either in the same or in different countries. A few instructions (appearing **in orange font**) on how to complete specific sections and for cultural adaptations that may be required when creating a National Booklet II have been embedded into the text.

The training has been designed in a way that includes separate parts of the Seminar that focus on teachers’ sensitization and training on: a) gender equality issues and stereotypical attitudes regarding gender roles, as well as how they relate to IPV, b) how to handle cases of abuse (IPV or child abuse and neglect) and c) the methodology for organizing, conducting, monitoring and evaluating the GEAR against IPV Workshop in their classes.

Section B includes tables that were created with the aim to link each part of the seminar with the respective material in Booklets III (Teacher’s Manual) and IV (Students’ Activities Book). Booklet II concludes with Annexes that provide useful tools for organizing and evaluating the Seminar.



Booklet III provides high-school teachers with all of the information and material needed for the **organization, step-by-step implementation, documentation and evaluation** of the GEAR against IPV Workshops in the classroom. The core part of the Manual consists of a toolbox of experiential and interactive activities -ready to be implemented in classrooms- which are structured in 4 Modules that address the issues of Gender Stereotypes, Healthy & Unhealthy Relationships and IPV:

- Module 1.** Introduction and Setting Goals (3 activities)
- Module 2.** Gender Stereotypes and Gender Equality (27 activities plus a description of four proposed working group activities to be conducted either inside or outside of school)
- Module 3.** Healthy and Unhealthy Relationships (6 activities)
- Module 4.** Intimate Partner Violence (12 activities)

In order to facilitate the teacher, the activities are presented with the following format: short introduction, learning objectives, duration, material and preparation, suggested step-by-step process, expected outcome and teacher's tips. The *Material and Preparation* section informs the teacher -apart from the materials and preparation needed per activity- about the Worksheet(s) and/or Handout(s) that can be distributed to students for the implementation of specific activities, which are included in Booklet IV: Students' Activities Book. The *Step-by-Step Process* section includes a detailed description of the process that is suggested to be followed by the teacher for the activities' implementation in the classroom. It includes as many "verbatim formulations" as possible regarding the instructions that the teacher could give to students as well as the discussion questions; these "**verbatim formulations**" are always **marked with blue font letters** in order for teachers to locate them easily during the implementation of the activity and to easily distinguish them from the instructions that are addressed only to themselves (black font letters). For most of the activities, the *step-by-step process* part is followed by the *Expected Outcome* of the activity, which informs the teacher about the expected result of the activity.

Also included as Annexes, are useful theoretical information concerning the issues addressed in each section of the Manual, suggestions for further reading, as well as the suggested Teacher's Reporting Form and the Workshop's Evaluation Tools.

Sections of the Manual that need to be adapted and/or completed with culturally appropriate information for the development of a National Booklet III are indicated in the text with **orange font letters** (i.e. Gender (In)equality in the specific country, the Magnitude of the IPV Problem, How to react if you suspect or a child discloses child abuse or intimate partner violence).

All of the material necessary (Worksheets and Handouts) to implement each of the activities of Booklet III is available in **Booklet IV: Students' Activities Book**.



Booklet IV contains ready-to-use material that can be used in class, along with material that can be given to students to work on at home. Self-assessment material and informational material can be distributed to students for their own use, either at present or in the future. Parts of the Booklet that need to be completed with culturally-specific information for the development of a National Booklet IV are indicated in the text with **orange font letters**.

On the basis of the Master "GEAR against IPV" Package and its instructions **4 National** (Austrian, Croatian, German and Greek) "GEAR against IPV" Packages were developed. **Booklet I** of each National Package is an introductory booklet, which mainly provides information on the project, material and the project's activities and describes the dissemination actions carried out by the organisation responsible for implementing the "GEAR against IPV" intervention in each country, as well as possible ways of lobbying in order to promote the GEAR against IPV Workshops' implementation in secondary schools. Booklets II, III and IV of the National Packages include material and describe processes that have been

considered as culturally appropriate to be used for conducting Teachers' Seminars (Booklet II) as well as for organizing, conducting and evaluating Students' Workshops (Booklets III and IV).

Evaluation of the Master Package by Experts. The four booklets of the "GEAR against IPV" Master Package were evaluated by 10 independent and well-known experts at National, European and International levels in the field of gender equality and/or IPV prevention. They evaluated each of the 4 Booklets of the Master GEAR against IPV Package concerning their thoroughness, appropriateness and quality, potential weaknesses and were invited to provide the basis for improvements (if and where needed), before this "model" Package was considered as final. The experts undertook the task of reviewing and evaluating the lengthy Master "GEAR against IPV" Package on a voluntary basis -without any compensation- with their only motivation being to contribute to the prevention of IPV.

Evaluation of the National Packages by teachers and students via focus groups. Evaluation of the "face validity" of Booklets III "Teacher's Manual" and IV "Students' Activities Book" of National Packages was realized through the implementation of focus groups which were conducted with students and teachers (in Greece and Germany) upon the finalization of each National Package -namely after the translation of the Master Package into the languages of the partners' countries and the initial cultural adaptation of National Packages as well as the completion of the "empty slots" with each country's specific information.

The results of the Expert and Focus Groups' Evaluations were taken into account in order to revise and finalize the Master and National GEAR against IPV Packages. *The results of the Expert and Focus Groups' Evaluations along with the methodology and the process followed are described in detail in the respective Consolidated Report that is available here: www.1st.gear-ipv.eu/sites/default/files/1/Experts%20and%20Focus%20Groups%20Evaluation%20Report.pdf.*

All Booklets are accessible here: www.1st.gear-ipv.eu/node/26

Innovative aspects of the material

Booklets III and IV were built a) on the results of previous DAPHNE Projects, and b) on the substantial work that had already been done by other organizations and/or professionals in the field of raising awareness on gender stereotypes and prevention of IPV or in the framework of similar projects (e.g. the White Ribbon Campaign, CDC, Amnesty International, UNICEF, UNIFEM, SafeDates).

During the extended literature review⁷ that was made for identifying related material, it was revealed that all available materials **addressed either** only gender equality awareness raising or gender-based violence issues separately and not together in the same material/intervention; in other words the most innovative characteristic of the GEAR against IPV approach is that it combines for **first time the issues** of a) gender stereotypes and gender inequality, b) healthy and unhealthy relationships and c) intimate partner/dating violence, which **are linked in one single Material and under the same intervention**, with the ultimate goal being to raise awareness of high-school students (and teachers) on the connection between gender inequality and violence against women and girls.

In addition, the way that the activities are structured, along with the fact that teachers are provided with a detailed step-by-step process to be followed for the implementation of each activity (also including verbatim formulations) and the provided "expected outcome", constitute **the innovative characteristic of Booklet III** as both sections provide the teachers not only with instructions for what to do but more importantly with proposals on how to do it and what to expect as an outcome. This "how to do an activity" component is something that is lacking in all manuals that were reviewed.

Last but not least, the fact that the Teacher's Manual has been developed as a toolbox including a **large number of activities**, provides each teacher with the **flexibility to select from the provided activities** according, for example, to the time that the teacher would have at his/her disposal to implement a "GEAR against IPV" Workshop; additionally, the large number of activities provides a teacher with the opportunity to select activities that s/he would feel comfortable with to implement, or activities that would better fit the needs and dynamics of the specific group of students.

7 Detailed information about the Literature Review, in term of the methodology used and its results, as well as the Protocol and the Extraction Forms that were used are provided in in the Master Booklet I (chapter A.4.2. and ANNEXES 1a and 1b) and in the project's Literature Review Report that are available at http://1st.gear-ipv.eu/sites/default/files/1/Master_GEAR%20against%20IPV%20Booklet%20I_English.pdf and http://1st.gear-ipv.eu/sites/default/files/1/GEAR_against_IPV_Literature_Review_Report.pdf,

Last but not least, innovative is also the method used to train teachers: at least half of the Teachers' Training Seminar is conducted via a simulated GEAR against IPV Workshop, where teachers adopt the role of adolescents and participate in a Workshop that is identical with the one that they will implement with their students. This approach (which is called "through students' eyes"), is described in more detail in page 25 of this paper.

10.5.2 Implementation

The GEAR against IPV project started on **8th December 2009** and ended **7th December 2011**. During the first year of the project the GEAR against IPV material was developed. The Master Package was finalized on the basis of results obtained via experts' evaluation, while the final version of the National Packages obtained on the basis of results obtained via focus groups with teachers and students. The final versions of the National GEAR against IPV Packages were, then, used to guide the Teachers' training seminars and students' awareness raising workshops (in 2011) that were conducted in Austria, Germany and Greece.

10.5.3 Execution

The project's partnership consisted of **professionals** and organizations having great experience in the area of IPV prevention and gender equality, while the project's external evaluator was Prof. Carol Hagemann-White, a well-known expert in the field.

The students' workshops were conducted by trained teachers.

The project had a 2-years duration and was co-funded by the DAPHNE III Programme of the EU (temporary project). However, the students' workshops are still being implemented at some schools (at least in Greece) either by the trained teachers or by other teachers and organizations that have implemented the students' workshops on the basis of the material that is available.

10.5.4 Results

Teachers' Training Seminars. On the basis of the Austrian, German and Greek Booklet II, **9 Seminars** were organized, implemented and evaluated in Austria (3 Seminars in Vienna and Linz), Germany (5 Seminars in Brandenburg) and Greece (1 Seminar in Athens). The Seminars resulted in a total of **167 trained** teachers and other school-related professionals and social work students (47 trained professionals in Greece, 51 in Austria, 69 in Germany)

Students' Workshops. all trained teachers and other school-related professionals, successfully implemented 27 "GEAR against IPV" workshops with students. In the **27 Students' Workshops** that were implemented in **Austria** (11 workshops), **Germany** (3 workshops) and **Greece** (13 workshops), a total of **556 students participated** (249 in Austria, 55 in Germany, 252 in Greece). The Workshops were implemented on the basis of the process described in the respective National Booklets III (Teachers' Manual) by use of the material included in National Booklets IV (Students' Activities Book).

A minimum duration of 10 hours (namely, 13 school hours*45 minutes) set for each workshop. Teachers were instructed that the minimum duration of students' workshops should be 13 teaching hours (9h & 45' real duration) while the maximum duration was not determined. Teachers can select which activities they conduct, according to the duration of their Workshop; they should however cover all modules (I-IV)

The duration of each workshop varied among different groups; more specifically, the minimum and maximum duration of the 13 workshops implemented in Greece ranged from 11 to 30 teaching hours ($M = 20.15$, $SD = 6.82$), distributed to 7 - 22 meetings in different days; One teaching hour in schools in Greece consists of about 45 minutes, which means that the real time duration of workshops ranged from 8h & 15' to 22h & 30' ($M = 15.13$, $SD = 5.11$) in different schools.

Seven out of ...groups dedicated between 24-30 teaching hrs (real duration: 18 to 22,5 hours) to the workshops' implementation, 4 groups between 14-16 teaching hrs (real duration: about 10.5 to 12 hours), while only in two groups the teachers were not able to dedicate 13 teaching hours to the workshop's implementation; in one of these schools, however, additional activities were conducted outside of school, which increased the workshop's duration to 13.5 hours.

If the activities that 6 groups conducted outside of school (e.g. visits, theatrical plays, etc) are taken into account, with a duration ranging from 1.5 to 12.5 hours, the maximum duration is increased up to 35 hours.

In such types of interventions with the main aim being primary/secondary prevention, it is not possible to obtain measures showing if the level of violence has been decreased or not; in other words, it is not possible to measure behavioural change after the implementation of the GEAR against IPV (the closest thing that can be measured is the self-reported behaviours and experiences of abuse of the students that participated in the project). In fact we have measured this (indirectly and directly) at 3 time intervals (pre-post-follow-up) but it cannot be used as an indicator to say if the violence has been decreased or not.

It is worth noticing here though that, under different circumstances, namely in countries where there is a systematic surveillance system in place, behavioural change can be measured after a systematic implementation of the GEAR against IPV in the general population of adolescents of the country or of a specific region (that is under surveillance).

10.6 Gender perspective

Gender (in)equality has a central role in all aspects of the GEAR against IPV project, from the material developed to its main activities; more specifically, the project was built on the basis of the following “philosophy”: It is widely recognised that **patriarchal societies** and **gender stereotypes** are two of the root causal factors of IPV. Effective primary prevention of IPV can be achieved via interventions aiming to **prevent the establishment of or to modify already established stereotypical perceptions of gender roles**, as well as to shape those beliefs that are essential for the development of healthy intimate relationships. The ideal setting to implement such interventions targeting the general population of pupils is the educational setting.

The GEAR against IPV project intends to contribute to primary prevention of IPV through a school-based intervention aiming to **raise awareness** of both high-school **students** and **teachers** on the **harmful effects of gender stereotypes** and of **unequal power relationships between the sexes** as well as on **how these are related with gender-based violence**. Students of both sexes are called upon, through the suitable and age-appropriate awareness raising material that is developed, to **assess and challenge their culturally “inherited” stereotypes** and to approach the differences between sexes as individual differences rather than as characteristics of superiority of one sex over the other.

Teachers’ perceptions on gender roles are expected to be similar with these of the rest of society and, for this reason, their training focused to a great extent on issues of **gender stereotyping and their links to IPV** with a view to recognize that their behaviour may reflect stereotyped role models. They were also trained on IPV issues and provided with the appropriate skills to enable them to operate as multipliers via educating students.

Teachers’ Seminars were conducted aiming to build teachers’ capacity to implement and evaluate the “GEAR against IPV” Workshops in classrooms as well as to provide them with the opportunity to a) **reflect on their own gender stereotypical attitudes and behaviors** as well as on any **attitudes supporting tolerance towards violence** and their **modification** and b) to obtain all necessary information and skills needed in order to be able to identify and handle potential cases of abuse that might be revealed by students during or after the implementation of the “GEAR against IPV” Workshops.

The overall objective of the “GEAR against IPV” Workshops is to contribute to **primary prevention of IPV** through school-based awareness raising activities targeting to **deconstruct students’ gender stereotypes**, to promote the development of healthy and equal relationships between the sexes and to encourage the development of attitudes of zero tolerance towards all forms of gender-based violence. The Students’ Workshops implemented in the context of the DAPHNE III project “GEAR against IPV” aimed at:

- offering high-school students (of both sexes) the opportunity to a) assess and challenge -within a safe environment- their culturally “inherited” **gender stereotypes** and misconceptions, b) to explore the influence that **gender stereotypical attitudes and socially imposed gender roles** have on their relationships and how **power inequality** between the sexes is related to violence against girls and women
- empowering students in recognizing -at an early stage- unhealthy or even abusive characteristics of relationships and to enhance their skills for developing healthy relationships.

Therefore, the ultimate goal of the “GEAR against IPV” workshops was the achievement of young people being less accepting of IPV and more knowledgeable of the characteristics and consequences of intimate partner violence and equipped with “protection skills”⁸ against dating violence, IPV and other forms of gender-based violence, for both themselves and the people they know.

The long-term objective of the “GEAR against IPV” workshops is for young people to relate to each other in a healthier, more equal way, as in such a relationship abuse is impossible to occur.

The **gendered perspective is explicitly evident in the entire project**, from the educational material to the suggested methodology to be followed for the teachers’ training seminars and students’ awareness raising workshops. As it was described in page 6, out of the 48 activities, teachers have at their disposal in order to select these that they will implement with their students, more than half (27 activities) are related with gender stereotypes and gender equality (Module 2); more specifically, 22 activities target issues related with gender stereotypes and masculinities vs. femininities and 5 issues regarding Patriarchal societies. In addition, the 4 working group activities that are provided in order to be conducted either inside or outside of school are also belonging to this Module.

In accordance, a large part of the Teachers’ Training Seminars and the Students’ Workshops of the GEAR against IPV intervention, is devoted in order to guide (via appropriate activities) both students as well as their teachers to identify and **understand how patriarchal societies leads to gender inequality and stereotypical gender roles which reinforce male superiority, as well as their connection with IPV and other forms of GBV**. Students are also guided to “discover” and exercise themselves on how to build healthy relationships based on gender equality.

Module 2 of Booklet III includes activities divided into two Units:

- a. **Gender Stereotypes & Masculinities vs. Femininities and**
- b. **Patriarchal Societies.**

It introduces the students to the concepts of gender stereotypes and gender roles and encourages them to understand these concepts, discuss the differences between gender and sex, question commonly held assumptions on the construction of gender, investigate the social roles in their environment, the expectations others have of them as boys and girls, the process of formation of these gender expectations and the way in which they affect their lives and their decisions.

In other words, the activities of this section aim to prevent the establishment of or to modify the established stereotypical perceptions of gender roles, as well as to shape the beliefs that are essential for the development of healthy intimate relationships. Students are called to assess, challenge and modify their culturally “inherited” stereotypes.

Most children, as well as most adults, are not aware neither of the effect of the socially dictated gender roles on their lives, nor of the fact that these roles could actually change, because they are socially determined. The key to social change and the prevention of gender based violence is in understanding the fact that gender roles are social constructs. It is essential that all students understand the concept of (socially constructed) gender, as it constitutes the basis of this project. This module encour-

8 Several activities’ aim is adolescents to obtain knowledge and to exercise their skills on how to react, in the safest possible way, in case they face abuse, as a victim, as a bystander or as a perpetrator. We consider that adolescents are equipped with “protection skills” when they obtained the knowledge that allows them to recognize at a very early stage the warning signs that a relation is unhealthy and has the potential (red flags) to become violent in the future, as well as where, from whom and how to ask for help in the safest possible way in case s/he is a bystander, a victim or if a friend of her/his is abused or is abusive. The opportunity to exercise their skills is provided to adolescents via discussions and activities on the basis of realistic scenarios, as well as via role playing.

rages the students to explore the gender-related expectations they have to meet according to their family, their society and the mass media.

The goals of this module are to enable the students to:

- Describe the differences between sex and gender.
- Explore their beliefs concerning what it means to be a boy or a girl in the society they live in.
- Describe and identify gender stereotypes, inequalities and the social roles of boys and girls.
- Understand gender roles and stereotypes that are created and enforced by society.
- Recognize the benefits and costs to both boys/men and girls/women.
- Understand how gender roles contribute to gender-based violence.
- Recognize the benefits of and how to deconstruct these stereotypes.
- Understand the definition of patriarchal societies and their strict hierarchies.
- Understand the relationship between patriarchal societies and violence against women.

Module 3 of Booklet III aims at providing the students with the opportunity to discuss the characteristics of healthy and unhealthy relationships as well as the way social concepts about the roles of men and women relate to violence. The participants are assisted in understanding the concept of healthy and unhealthy relationships, via realistic scenarios, role playing and discussion.

Learning objectives of this Module is for students to be able to:

- Understand violence in relationships through the gender viewpoint, as well as the characteristics of healthy and unhealthy relationships.
- Spot and identify their own healthy or unhealthy behaviours and attitudes towards the opposite sex.

Under Module 4 of Booklet III, the aim is students to be able to define Intimate Partner Violence and its types, to identify commonly held myths (most of which are gender-specific), deconstruct them via understanding why they are myths and which is the reality, recognize the warning signs of IPV, describe why IPV is a violation of women's human rights, explore the consequences of violence, learn where to turn for help etc.

In order to clearly present the central role that gender inequality has to the material and the Workshop's activities, the learning objectives of the activities included in Modules II, III and IV are presented in the ANNEX I, while ANNEX II includes a few activities as examples. To summarize in a few words, each activity target is one or more of the following: raise awareness for the gender inequality and gender stereotyping that exist in different domains of life, their consequences for the individual (girl and boy), as well as their impact on their relationships; raise awareness that gender and gender roles are socially constructed and enforced, as well as on how they create a strict hierarchy of power and control and how they are related with IPV and VAWG; empower adolescents to be able to reject the socially imposed gender roles and set their own priorities; raise awareness on how they can recognize the warning signs of potentially abusive relationships, as well as how to stand up against IPV in the safest possible way and how and where to ask assistance.

10.7 Prevention of intergenerational factors: an interconnection between factors

First of all, the philosophy of the GEAR against IPV project is based and built on the recognition of the "gendered nature of violence against women as rooted in power imbalances and inequality between women and men" and on "the premise that violence against women is a cause and a consequence of gender inequality"; in other words, it **coincides with the spirit of Article 12** of the Council of Europe (2011) *Convention on preventing and combating violence against women and domestic violence* (Hester, & Lilley, 2014, p. 5 & 8).

In addition, all project's activities and materials included in the GEAR against IPV Packages **consist precise fulfilment of the requirements set by Article 14** of the Council of Europe (2011) *Convention on preventing and combating violence against women and domestic violence* regarding Education, were it is denoted that such type of "teaching material on issues such as equality between women and men, non-stereotyped gender roles, mutual respect, non-violent conflict resolution in interpersonal relation-

ships, gender-based violence against women and the right to personal integrity, adapted to the evolving capacity of learners” should be included not only “in formal curricula and at all levels of education”, but also “in informal educational facilities, as well as in sports, cultural and leisure facilities and the media”.

Moreover, the GEAR against IPV approach is **in line with the multi-level model** that Carol Hagemann-White et al. (2010) developed, as it focuses on the majority of the factors that are included in the model for two forms of violence (IPV/stalking and rape/sexual coercion). If one imagines this project to be integrated in the regular school curricula, to be implemented at all schools, with all students, every year, the benefit gained would be invaluable.

Very briefly, the multi-level model includes 24 factors on 4 levels, depending on where their major impact appears: Macro (society), Meso (institutions, agencies, social environments), micro (face-to-face social groups), and ontogenetic (individual life history) levels. In the “perpetration model”, for each form of violence, a number of different factors belonging to the 4 levels appear as having weak, moderate or strong influence to the perpetration of this specific form of violence; as it is presented in Tables 1a and 1b, 19 and 15 factors were identified as influencing IPV/stalking and Rape/Sexual coercion respectively; 13 factors are common for the two forms of violence (the uncommon factors are indicated with red font in Table 1b).

Table 1a. Factors influencing perpetration of IPV/stalking by level and intensity of effect

Effect on perpetration	Level			
	Ontogenetic	Micro	Meso	Macro
Strong	• Poor parenting • Masculine self /control	• Peer Approval	• Entitlement	
Moderate	• Emotions • Stimulus [alcohol / pornography] abuse	• Stereotypes • Rewards	• Failed sanctions • Honour codes • Poverty pockets	• Devaluing Women • Masculinity • Impunity
Weak	• Early trauma • Cognitions	• Family stress • Opportunity	Discrimination	

Source:

Developed on the basis of factors provided in the Perpetration model for IPV/Stalking (Hagemann-White, C. et al., 2010) as presented at: http://ec.europa.eu/justice/funding/daphne3/multi-level_inter-active_model/bin/html/factormodel/factormodel.html (accessed on 10 May 2015).

Table 1b. Factors influencing perpetration of Rape/sexual coercion by level and intensity of effect

Effect on perpetration	Level			
	Ontogenetic	Micro	Meso	Macro
Strong	• Masculine self /control • Depersonalized sex		• Entitlement	• Devaluing Women
Moderate	• Cognitions	• Peer approval • Stereotypes • Rewards	• Failed sanctions	• Masculinity • Media violence
Weak	• Emotions • Stimulus [alcohol/ pornography] abuse	• Opportunity		• Impunity

Source: Developed on the basis of factors provided in the Perpetration model for Rape/Sexual coercion (Hagemann-White, C. et al, 2010) as presented at: http://ec.europa.eu/justice/funding/daphne3/multi-level_inter-active_model/bin/html/factormodel/factormodel.html (accessed on 10 May 2015).

The activities of the GEAR against IPV target to modify 12 factors for each form of violence (the non-targeted factors are indicated with grey highlight in Tables 1a and 1b). But this coincidence provides more supportive indications that the GEAR against IPV intervention targets towards the correct directions.

The project's material includes activities that aim to increase knowledge and change the attitudes of students and teachers on the following aspects (the list is not exhaustive) that coincide with this model as follows:

- Focus on gender inequality, unequal power relations between men and women and subordination of women - promote changes in attitudes that contribute to perpetuate gender-based violence against women, through providing positive ideas of what constitutes "masculinity" (and femininity) and increase adolescents' awareness in order to be able to reject the portrayal of violence and the sexualisation of women in the media.
- Challenge the myths about violence against women.
- Raise awareness on the different expectations from boys and girls.
- Challenge the idea of male entitlement.
- Challenge gender stereotypes.
- Raise awareness of teachers in order not to behave in a gender discriminative behaviour towards their students.
- Raises awareness on the "masculine self", "real man" and "power and control" issues.

The GEAR against IPV project targets teens' general population which means that it also addresses teens who are victims/perpetrators of IPV and sexual violence or at risk (teens' general population) and at high risk (children abused/neglected/exposed to parental IPV) of becoming victims/perpetrators in the future. Via the project's implementation the expected result is teens (boys and girls) to be empowered in ways promoting zero-tolerance, equipped with 'protection skills' that will enable them to avoid being victimized and/or to appropriately and safely react to IPV and sexual violence as victims or bystanders and equipped with valuable life skills for breaking the cycle of violence and building healthy relationships.

Of course, a single project that is implemented at small-scale and if it is not assisted by relevant policies, it cannot bring a change at the society, institutional or even community level - it can only bring some change at the individual level.

10.8 The effectiveness of the project

The GEAR against IPV is, one among very few interventions which include effectiveness evaluation. The Package also includes all evaluation tools that are to be used.

The project, in addition to the process evaluation, included extensive **effectiveness evaluation** for both main activities, namely for the teachers' training seminars and students' awareness raising workshops.

On the basis of the results, both activities found to be highly effective for both teachers and students; in addition, some especially interesting findings that emerged regarding differences between boys and girls at both the short- and long-term evaluations lead us to draw conclusions and recommendations with important practical implications for future IPV primary prevention projects.

The evaluation studies' results are still unpublished; they are included, though, in two separate Evaluation Reports of teachers' seminars and students' workshops (in order to have access to them, you can use the link and password provided at the end of this chapter).

For practical reasons, only a small part of the evaluation results of students' workshops in Greece will be briefly described in this chapter.

Students' workshops

Evaluation tools. Questionnaires, especially tailored for the GEAR against IPV project, mainly aimed to measure students' knowledge, attitudes and self-reported behaviour regarding gender stereotypes and IPV issues as well as demographic characteristics, in both groups (intervention and control). More specifically, the areas assessed by the pre-post-follow up questionnaires are the following:

Gender Stereotypes/ Inequality

- Personal gender stereotypical attitudes (34 items).
- Existence of gender stereotypical roles in each country (34 items, only in pre-questionnaire)^{9*}.
- Existence of gender discriminative behaviour at school by teachers (14 items, only in pre-questionnaire)*.
- Gender discriminative self-reported behaviour (perpetrated or received by others - 6 items)*.

IPV/Dating violence

- Knowledge on IPV (types of violence & myths/facts) (39 items).
- Attitudes (tolerance) on physical, psychological and sexual violence (48 items).
- Students' self-reported exposure to IPV (indirect & direct measure) and IPV perpetration (8 items).

Workshop's subjective evaluation: included only in the intervention group's post-questionnaire, this part (34 items), invites students to assess the workshop in terms of the following aspects:

- Personal satisfaction (direct measures) with several aspects of the workshop (procedures, content, material, duration, adequacy of the implementer).
- Personal satisfaction (indirect measures).
- Self-perceived usefulness (for self and others).
- Fulfilment of expectations.
- Knowledge obtained for gender inequality, IPV, warning signs and ways of reaction.

The questionnaires have been developed in a **gender sensitive manner** in order to capture in the best possible way attitudes that are gender stereotypical and/or tolerant to IPV: for example, more than 40% of the questionnaires' items have been stated in a way so that the respondents have to answer specific statements twice (for male and female actor/perpetrator). To provide just an example in order to explain this point: in general, questionnaires include statements like "It's the woman's duty to take care of children", "It is very important for women to get married and have children"; a response "strongly agree" or "agree" is considered to depict a stereotypical attitude; but if the respondent had the opportunity to also state her/his opinion on the opposite statement ("It's the man's duty to take care of children", "It is very important for men to get married and have children"), we may discover that our conclusion wasn't true; if the response is identical in both questions, the "strongly agree" or "agree" response shows a non-stereotypical attitude.

Evaluation design. The evaluation method included collection of data from the students that participated in the workshops (**intervention group**) through **pre- post- and follow-up questionnaires** as well as from students that did not participate in workshops (**control group**). More specifically, the evaluation design was a mixed factorial (2 x 3), with the between-subjects factor being the *Group* (intervention/workshop vs. control/no workshop) and the within-subjects being the *time of measurement* (pre-workshop, post-workshop, follow-up: 4-6 months after the Workshop).

^{9*} These measures were included with the aim to assess how patriarchal the society's structure is, by mapping the extent of gender (in)equality in each country.

The Workshop's effectiveness was assessed at both short- and long-term (sustainability). The **main hypotheses** were that students' pre-scores of related knowledge and attitudes will be improved in the post-questionnaire for the intervention group, while the control group's pre-post scores will not differ. It is also hypothesized that the beneficial effect of the workshop will still be preserved 4 months after the end of the workshops, namely that the intervention group's follow-up scores will be either equal or somewhat lower than their post-scores, but still higher than the control group's follow-up scores (which expected to be the same with their pre- and post-scores. In other words a main effect of "group" and an interaction of "group x time" was expected to be observed.

Results. The workshops in Greece were implemented by 17 trained teachers; a total of **252 students** participated in the workshops (Intervention Group) and the Control Group consisted of 264 students. The number of respondents (which was impressively high) per evaluation questionnaire (pre-post-follow-up) by sex and group (Intervention and Control group) is presented in Table 2 while in Table 3 is presented the number of questionnaires that were included in different analyses (ranging from 386 to 474, depending on the analysis).

Table 2. Number of respondents per evaluation questionnaire, by sex and group in 13 schools

Group	W(pre)			W(post)			W(fol.)		
	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total
Control	125	139	264	111	123	234	93	101	194
Intervention	112	146	258	102	136	238	80	112	192
Total	237	285	522	213	259	472	173	213	386

Table 3. Respondents (N) by sex and group per questionnaire that were entered in the analyses.

Group	Pre-Questionnaire			Post-Questionnaire			Follow-up Questionnaire		
	Boys	Girls	Total	Boys	Girls	Total	Boys	Girls	Total
Control	115	126	241	111	122	233	93	101	194
Intervention	100	133	233	99	128	227	80	112	192
Total	215	259	474	210	250	460	173	213	386

Prior to any analysis, it was tested (t-tests or x2) and, **verified that before the intervention the two groups** (control and intervention) were equivalent in terms of their attitudes and knowledge in almost all of the items measured; out of the 182 items tested, significant differences found in 32 (10 of which belonged to the same set of items, investigating students' attitudes for the circumstances under which they believe that a girl has the right to hit her boyfriend); In other words, with the exception of items 14b, the analyses verify that, before the intervention, the two groups were, in general terms, equivalent.

On the other hand, when the **effect of students' sex** was tested in all pre-questionnaires' variables revealed to be **great**: significant differences found in 131 out of the 182 items tested. For this reason, the students' sex was included as an additional independent variable, in all analyses, even though we didn't initially had any hypothesis about its effect.

It is worth mentioning, that the **direction of difference** in each and every comparison was **against the control group and against boys**. Namely, the control group and the boys, when differing significantly from the intervention group and the girls respectively, they had either more stereotypical or more tolerant attitudes towards violence or less knowledge (more false answers).

In the remaining chapter, an example of the items used, the analyses conducted and the results obtained will be presented for the students' knowledge in regards to common myths about IPV, as measured by 19 items presented in Table 4.

Table 4. Items measuring students' knowledge in regards to the 19 commonly believed myths about IPV.

For each of the following statements, indicate what IN YOUR OPINION is "true" or "false"	
1	Violence in a relationship exists only among people who are poor
2	Violence in a relationship exists only among uneducated people
3	Victims of violent relationships are mostly women
4	A person is abused only when physical violence exists
5	Destroying personal possessions and property is not a form of violence
6	Violent people are people who can't control their anger
7	If she didn't provoke him, he wouldn't abuse her
8	You can understand if a person is violent or not, just by his/her appearance
9	Jealousy is a sign of love
10	Girls are never physically violent with their partners
11	When a boy caresses a girl and she says "no", often it means "yes"
12	When a person is being abused in his/her intimate relationship, it is easy just to leave
13	A person's violent behaviour can change if his/her partner loves him/her enough
14	Men are violent by nature
15	Women are violent by nature
16	Most girls believe that they must "play hard to get" before consenting to have sex
17	Most boys believe that when a girl refuses to have sex with them, they're just "playing hard to get"
18	Substance abuse is the cause of violence in a relationship
19	Most abused people believe that what is happening to them is their fault

A scale for students' knowledge was created on the basis of the number of correct answers (min=0 - max=19) they provided on all items; the scores were analysed with a 3x2x2 ANOVA, with time (pre-post-follow) as the within-subjects factor and group (intervention- control) and sex as the between-subjects factors. Data from 358 students, who have provided all three measures entered in these analyses, 178 from the intervention group (73 boys and 105 girls) and 180 from the control group (84 boys and 96 girls).

Significant found to be the main effects of time ($F(2, 708)=67.592, p<.001$), group ($F(1, 354)=22.981, p<.001$) and sex ($F(1, 354)=60.331, p<.001$), as well as the interaction time*group ($F(2, 708)=9.344, p<.001$), while the interaction time*sex was marginally significant ($F(2, 708)=2.650, p=.071$). The main effects indicate that in every subsequent measure correct answers (11,24, 12,35 and 12,94 in pre-, post- and follow measures) significantly increase, as well as that, in total, the intervention group provides more correct answers than the control (12.71 vs. 11.64) and the girls more than the boys (13.05 vs. 11.30).

In the light of the significant interaction though, it is evident that the modifications between pre-post and post-follow measures are not the same for the two groups (intervention vs. control): in the intervention group, the number of correct answers (11.41, 13.00 and 13.72) increased (which is consistent to our hypothesis); unexpectedly, even though smaller, increases also observed in the control group's scores (11.06, 11.69 and 12.16).

Moreover, the marginal significance of the time*sex interaction consists an indication that modifications among pre-post-follow up measures were different for girls (11,93, 13,39 and 13,82) and boys (10,54, 11,31 and 12,06).

In order to identify the exact pattern of the aforementioned modifications, further analyses, with 4 within subjects' ANOVAs, were conducted separately for the girls and the boys of each group; as it is also illustrated in Figure 1, the results revealed that the number of correct answers increased for both boys and girls of the intervention group and that the increase in the control group's scores was due to an increase of the girls' correct answers, while no modification happened in boys' scores. In more details, and consistent to our hypotheses:

Intervention girls' pre- post- and follow-up scores (12.19, 14.19 and 14.46) differ significantly [$F(2, 208)=54.919, p<.001$], with the pairwise comparisons indicating that both post- and follow-up scores were higher than their pre-intervention. The non-difference between post and follow-up scores indicates that the knowledge obtained is highly sustainable in time.

Intervention boys' pre- post- and follow-up scores (10.63, 11.82 and 12.99) also differ significantly [$F(2, 144)=18.689$, $p<.001$], with the pairwise comparisons indicating that both post- and follow-up scores were higher than their pre. Moreover, the fact that the follow-up score revealed to be significantly higher than their post shows not only that the knowledge obtained is sustainable in time but also that the process started during the Workshop is still continuing after it, for the boys.

In other words it seems that, even though **girls' and boys'** benefited equally from the intervention (knowledge increased by 2,27 vs. 2,36 correct answers), in girls almost the entire increase happened between their pre-post measures while in boys it happened more gradually, between their pre-follow up measures. Possible explanations for this finding could be that boys may a) need more time to process or to accept such kind of information which can be perceived as “threatening” their gender role or the “male superiority”, b) have adopted a defensive stance during the Workshop and they need more time in order to be convinced that they are not accused and that they can safely express their opinions. A third, very promising, explanation could be that the great modification of their female classmates, that happened during the Workshop and sustained after it, may have swept also the boys, forcing them to keep up with the girls' knowledge, attitudes and behavior.

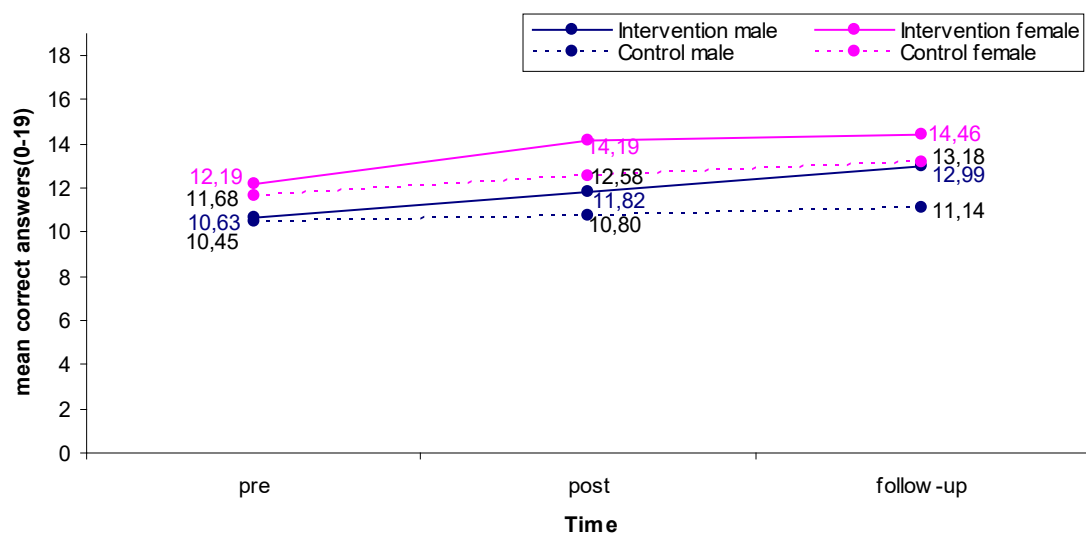


Figure 1. Mean number of correct answers on the IPV myths scale (19 items), by time (pre-, post-, and follow-up questionnaires), group (control vs. intervention) and students' sex (Q13-13-8)

As predicted, for the **boys of the control group**, the number of correct answers in the 3 measures (10.45, 10.80 and 11.14) were not differ significantly [$F(2, 166)=2.300$, $p=.103$].

On the other hand, contrary to our hypothesis, the **control girls' scores** (11,68, 12,58 and 13,18) differ significantly [$F(2, 190)=16.320$, $p<.001$], with the pairwise comparisons indicating that all pairs of means differ significantly. The mean increase in their knowledge from pre- to follow-up was 1.5 correct answers, namely slightly less than the 2,27 gain the intervention's girls had. There are two plausible explanation for this unexpected finding: a) once the questions asked (in the pre-questionnaire), the control girls may start reflecting, discussing and/or looking for information about these issues, improving thus their post and follow-up scores and/or b) the girls of the two groups may have discussed with each other the topics and the activities that were implemented only in the intervention group¹⁰; this way the control group may gain part of the benefit from their classmates of the intervention group.

In regards to the **individual items** included in the aforementioned scale, in the intervention group, the percentage of students provided the correct answer, increased from the pre- to the post-measure for 15 items by 2,8% - 29,2%, while it decreased by 2,2-6,7% for 4 items (items 8, 15, 1, 3); similarly, the difference between the pre-follow up measures were increased for 16 items by 2,2-33,15% and decreased only for 3 by 0,26 - 11,24% (items 1, 15, 3). In the control group, the percentage of students

¹⁰ or each intervention group/classroom, a control group/classroom (students of the same grade from the same school) was selected, consisting of students who do not participate in a workshop; students of the control group fill in the same questionnaires at the same time intervals as the students of the intervention group.

provided the correct answer, increased from the pre- to the post-measure, for 12 items (by 1,1% - 14,4%, remained stable for one (item 9), and decreased by 1,1% -3,9% for 6 items (items 3, 12, 5, 15, 14, 17); similarly, the difference between the pre-follow up measures were increased for 13 items by 2,2%-17,85%, remained stable for one (item 6), and decreased for 5 by 0,56% - 5% (items 18, 1, 15, 5, 3).

The **most prevalent myth** among adolescence was that *“Violent people are people who can’t control their anger”*, as 8 in 10 students erroneously believed that this was true; moreover, it was also proven to be the **most persistent** belief, as 7 in 10 students continue to believe it in the follow up. **Other prevalent myths** were that:

- *A person’s violent behaviour can change if his/her partner loves him/her enough* (erroneously believed by 7 in 10 students; in the follow-ups, the wrong answers decreased to 5 in 10 students in the intervention group and to 6 in the control group).
- *Most girls believe that they must “play hard to get” before consenting to have sex* (7 in 10 believed this myth; 4 and 6 in 10 students of the intervention and control group continue to believe it in the follow-up).
- *Most boys believe that when a girl refuses to have sex with them, they’re just “playing hard to get”* (more than 6 in 10; decreased to 4 students in the intervention group).
- *Most abused people believe that what is happening to them is their fault* (only 4 in 10 students knew that this is true; in the follow-up they knew it 5 in the intervention group).
- *Substance abuse is the cause of violence in a relationship* (6 in 10 erroneously believe it; decreased to 5 in the intervention group).
- *Jealousy is a sign of love* (6 in 10 believed initially this myth; in the follow-up decreased to 3 in the intervention group and to 5 in the control).
- *When a boy caresses a girl and she says “no”, often it means “yes”* (5 in 10 believed this initially; in the follow-up this was believed by 3 and 4 in the two groups).
- *When a person is being abused in his/her intimate relationship, it is easy just to leave* (5 in 10; in the follow-up about 3 and 4 in 10 students of the intervention and control group respectively, continue to erroneously believe this).

For these 8 statements the intervention groups’ correct answers ranged 28.09 - 51.69% in the pre, 42.7 - 67.42% in the post, and 48.88 - 75.84% in the follow-up measure; the control groups’ correct answers were similar in the pre- (27.78 - 54.44%), but lower in the post (45- 52.78%) and in the follow-up (40.56 - 63.89%).

For the remaining 10 statements, a large percentage of students (66.8% - 96.1%) knew the correct answer in the pre-measure (65.17% - 97.19% in the intervention and 66.11% - 95% in the control group); in the intervention group, these percentages increased to 74.72% - 93.26% in the post- and to 76.97% - 95.51% in the follow-up; the respective percentages in the control group were 67.22% - 94.44% in the post- and 66.11% - 92.78% in the follow-up measure.

By inspecting the pre-scores, along with the modifications achieved due to the GEAR against IPV Workshop, one can draw recommendations in regards to which of the myths seem to be the most commonly held by adolescents, as well as which of them seem to be extremely or fairly resistant to change and, in accordance, they need to be more intensively targeted.

Each teacher-facilitator, can use her/his students’ pre-scores, as a needs assessment, that will enable her/him to identify their false knowledge and stereotypical attitudes. She/he will, then, be able to more intensively target them, by selecting the most appropriate activities or more than one activity with the same aim.

On the basis of the detailed implementation and evaluation description that is available in the *“Students’ Workshops: Implementation and Evaluation Report”* and in the light of the experience of EAVN from the organisation, implementation and evaluation of the “GEAR against IPV” workshops in Greece, it was evident that both the Teachers and Students were enthusiastic about the workshops. On one hand, the teachers were highly satisfied with the workshops’ implementation and -as they stated- they

themselves benefited from the workshops' implementation regarding various aspects on both personal and professional levels. Moreover, some of the teachers stated that their relationships with their students had improved due to the workshops and that the Teachers' Seminar as well as their entire experience gained from the workshops' implementation helped them to identify in their personal lives, aspects of inequality and/or violence that they were not able to recognize before.

Even though before starting the implementation of the workshops most of them were concerned if they would be able to implement such a workshop (e.g. insecurity with the topic, no previous experience with similar projects), or about students' questions or reactions (e.g. how comfortable they would feel to discuss the targeted topics) or even afraid of their parents' reactions, during and at the end of the implementation all of their initial inhibitions disappeared. On the contrary -as they stated- their involvement in the implementation of the workshops was a unique experience not only for their students but also for themselves as well and apart from the benefits that they themselves and their students gained, the workshops also revealed a positive impact on their school and that the students' parents appreciated the fact that their teachers had implemented this kind of workshop at their school -as this was the first time that such workshops were implemented in schools in Greece. Moreover, among the "useful advice" that they provided for future implementers, they recommend to other teachers: *"not to be afraid to talk about these topics"*, *"not to have any inhibition to implement it"* *"it is a very good program, with a very good material, useful and helpful for both teachers and students"*. Furthermore, it was revealed at the end that the main barrier that the teachers had faced was the factor "time" as they wished to have more time at their disposal for the implementation of more activities.

The students, on the other hand, were not only highly satisfied with the workshops that they participated in but they also wanted the workshops to continue. The extent that they themselves believed that they had benefited from the workshops was also very high (which was also evident from the evaluation results). On the basis of the evaluation results it can be summarized that the students' satisfaction with the Workshops in Greece (Intervention Group) was very high with the exception of the total duration of the workshops (as *the students wanted the duration of the workshop to be longer or even the same workshop to be continued during the next year*). A percentage of 85.7% of all students replied that they would like to participate in another similar workshop in the future and 87.5% replied that they would recommend to a friend of theirs to participate in a workshop like this. A very interesting finding in regards to the analysis of the evaluation data of students was that in several items concerning mainly the dimension *usefulness*, statistically significant differences among the ratings and responses of boys and girls were noticed. For example, girls assessed higher than boys the usefulness of the workshop for their everyday lives in general and for their personal relationships; they also rated higher than boys the usefulness of the workshop in case a woman or girl that they know is being abused in her relationship or in case where a man/boy they know is abusing his partner. Regarding the topic of Gender Inequality, 71.4% of students replied that they learned many things or everything that they needed to know, 19.8% replied that they learned at least one new thing while only 8.8% replied that they did not learn something new. On the topic of Relationship Violence, 76.6% of students replied that they learned many things or everything that they needed to know, 15% replied that they learned at least one new thing while only 8.4% replied that they did not learn something new. Furthermore, almost all students (94.8%) responded that believe that these kinds of workshops should be carried out in the school setting, and that these kinds of workshops should be conducted by teachers (89.1%).

It seems that the students were (and are) ready to participate in workshops aiming towards Gender Equality Awareness Raising against Intimate Partner Violence, as the topics of the "GEAR against IPV" Workshops concern them in their everyday life and as one student wrote: *"I learned many interesting and useful things (e.g. healthy relationships) which will be useful for my everyday life"*; and as another student wrote in his/her questionnaire *"these kinds of workshops should be carried out in the school setting because these topics are not being discussed in schools and it is time to start"*. Last but not least, below are presented some of the students' thoughts when at the end of one of the workshops, the implementer asked them to write down "what is your impression of the Workshop?"

"I feel safe because now I am able to recognize when a relationship can turn into a violent relationship and when it is healthy..."

"...the program was very nice and I learned many things. I liked that we were discussing among ourselves... I will never forget what we did, I liked everything we did..."

"...at the beginning of the workshop I felt awkward because I was ashamed to talk in front of others about my feelings. However, progressively, when we were divided into groups, I felt nice and I liked completing the worksheets a lot. Now I feel safe. I feel that I know when a relationship is healthy or not..."

As it was evident from students' ratings as well as from their answers to several open-ended questions, the ultimate goal of the "GEAR against IPV" workshops was achieved, namely young people's tolerance of intimate partner/dating violence has decreased, they feel (and they are) more knowledgeable of the characteristics and consequences of intimate partner violence and have become more equipped with "protection skills"¹¹ against dating violence, IPV and other forms of gender-based violence, for both themselves and the people they know. Therefore, the aim of contributing to primary prevention of violence by using as a vehicle gender equality awareness raising seems to have been achieved as on the basis of the Workshops' evaluation results, it seems that the Workshops had a positive effect in increasing students' knowledge and modifying some of their gender stereotypical held attitudes as well as some of their false attitudes about violence that they initially held.... and some skills

10.9 International applicability

The GEAR against IPV project is **applicable for all European countries**. It was successfully implemented in 3 EU countries (Greece, Germany, Austria) and from 2014 until 2016 it is being implemented in Greece again but also in other 4 EU countries (Cyprus, Croatia, Spain, Romania)¹².

The materials produced greatly facilitate the replication and adaptation of the activities (Teachers' Seminar and Students' Workshop), not only for the countries for which it was developed, but also in other EU countries in the future. Apart from this, the material contains all of the necessary information, methodology and step-by-step description of the suggested process about how to organise, implement and evaluate Teachers' Seminars (Booklet II) and "GEAR against IPV" Workshops in the classroom (Booklets III & IV). Furthermore, the Teachers' Manual consists of a toolbox of activities, enabling each teacher to select the most appropriate activities to be implemented according to the students' needs, but also according to their own needs. Thus, the "GEAR against IPV" Package is a complete educational package, ready-to-be-used in the schools of the countries where its pilot-testing provided evidence for its usefulness and effectiveness, which, in the short-run, aims to raise awareness and deconstruct any gender stereotypes of both high school students and teachers and, in the long-run, to contribute to primary prevention of Intimate Partner Violence through this type of school-based interventions.

The **GEAR against IPV** material was designed in order to support the implementation of interventions promoting gender equality as a means of primary prevention of Intimate Partner Violence in the teenage population.

11 Several activities' aim is adolescents to obtain knowledge and to exercise their skills on how to react, in the safest possible way, in case they face abuse, as a victim, as a bystander or as a perpetrator. We consider that adolescents are equipped with "protection skills" when they obtained the knowledge that allows them to recognize at a very early stage the warning signs that a relation is unhealthy and has the potential (red flags) to become violent in the future, as well as where, from whom and how to ask for help in the safest possible way in case s/he is a bystander, a victim or if a friend of her/his is abused or is abusive. The opportunity to exercise their skills is provided to adolescents via discussions and activities on the basis of realistic scenarios, as well as via role playing.

12 In the context of the GEAR against IPV II Project (Grant Agreement No: JUST/2013/DAP/AG/5408) that is currently under implementation with financial support from the DAPHNE III Programme.

The **Master Package** aims at promoting the development of National Packages, if possible, for all EU countries, which was the reason for developing it so as to include necessary instructions for facilitating the creation of appropriately tailored National Packages for other countries.

Each **National Package** should, after the Master material has been completed and appropriately culturally adapted, be a comprehensive tool for the organisation, preparation, implementation and evaluation of primary prevention of gender-based violence interventions conducted with adolescents (in schools or other settings).

A National Package can be developed for each EU country on the basis of the instructions included in all Booklets of the Master Package.

The idea of developing a **Master Package** for the material GEAR against IPV was to provide a “Guide” that can lead the development of culturally appropriately adapted National Packages for any country that wishes to implement Gender Equality Awareness Raising interventions as a means of primary and/or secondary prevention of Intimate Partner Violence.

The challenge was neither simple nor easy, as the factors that may vary from country to country (and from culture to culture) are many, related to many fields, and can affect, either directly or indirectly, the aim of the GEAR against IPV intervention.

On the basis of our experience during the development of 4 National Packages for Austria, Croatia, Germany and Greece, we would like to invite any Organization and/or professional who is interested in creating a new National Package for her/his country -or, in using an existing one- to approach the GEAR against IPV as a “live” material which, in order to effectively achieve its aims, must be adapted in such a way that will cover the needs of its target-groups in the best way possible. In other words, adaptations aiming to make the GEAR against IPV material more culturally appropriate for a particular country or for a specific cultural group and/or more user friendly for its users and/or more effective as a preventive means are not only invited but are also welcomed at all stages: from the stage of developing a new National GEAR against IPV Package through the stages of training implementers, implementing and evaluating GEAR against IPV Workshops with adolescents in school or in other settings.

Booklet I, in its entirety, aims to facilitate the adaptation process by providing numerous suggestions for possible adaptations that may be needed, while additional adaptation needs may emerge in individual countries.

Important factors for a successful transference of the GEAR against IPV approach in other countries: The factors that are considered to be crucial for the effective organization and implementation of the GEAR against IPV intervention are mostly related with the Coordinating Organization (in each country), which will undertake to create its National GEAR against IPV Package and to coordinate the intervention’s implementation:

- Must be very motivated to create material and implement interventions towards enhancing gender equality and promoting IPV primary prevention.
- Must have experience working with students and/or other group of adolescents.
- Must have access to school settings.

10.10 Key elements for the GEAR against IPV successful implementation

10.10.1 The GEAR against IPV Workshop for students

1. **Invites adolescents to a Workshop that is very close to their interests:** students are invited to participate in a Workshop entitled “Building healthy intimate relationships”, a topic for which adolescents have high interest as it is directly related to their everyday life; this, along with the realistic scenarios that are used motivates their active engagement; their involvement is further strengthened by the fact that their everyday setting, namely the school, has finally decided to “touch” a topic so close to their interests that is, usually, **not discussed openly** in the school or other settings
2. **Includes activities highly attractive for adolescents:** the entire Workshop has an experiential character, as it uses only active learning techniques; in other words, it is implemented only via interactive activities such as role playing, brainstorming, group discussions, games, drawing, etc., so that students are actively involved in the learning process. The **attractiveness of the activities’ material** that is provided to adolescents is also considered to be important in order to keep students’ interest undiminished: towards this direction, colored printouts, cards, stickers as well as markers, large papers and other materials are used. The interactive character of learning along with the attractiveness of the material increase students’ motivation to actively participate and to commit themselves to the process.
3. **Allows adolescents to “discover” the correct answers and solutions:** students are discreetly guided to find their own solutions and answers; the teacher’s role is to facilitate the discussion, and s/he must NEVER try to impose the “correct” answer to the group; in other words the **peers’ influence is used** in order to obtain knowledge as well as in order to modify towards the desired direction students’ attitudes that are either stereotypical or tolerant to violence. It is important, as a teacher, to be able to leave in students’ hands the solution (the teacher should only navigate the process towards the “correct” answer) and trust that inside the group there would be one or more students who already hold the correct attitude or more knowledge on the topic under discussion, who will lead the discussion towards the correct direction. The most important skill of the teacher is to be able to provide support so that each and every student feels empowered to freely express her/his own opinion, even in cases where it is opposite from the entire group’s opinion (see also point 4, safe environment). If the teacher tries to impose her/his opinion some students (or even the whole group) may develop resistance; even in case they don’t, they may accept the offered solution but without the **feeling of ownership**. This approach is, indeed, more time consuming but has the potential for long-lasting modifications of students’ attitudes, which could lead to future behaviour modification.
4. **Creates a safe environment for all¹³ students** where they feel free and safe to discuss sensitive subjects like gender discrimination and IPV:
 - a. **Ground rules** are set by the entire group of students who, then, commit themselves to follow them during all sessions; the ground rules’ flipchart is posted on the wall and remains there in all sessions; not only the facilitator but also the group itself have the responsibility to safeguard the respect of ground rules.
 - b. Students are **encouraged to be themselves and to open any issue** they would like: e.g. they are allowed to use all words they use among them (or others address to them), even cursing words, as long as they do not offend and they respect other members of the group.
 - c. The Workshop **starts with** activities targeting **less sensitive topics** while the more sensitive, taboo or possibly painful topics are gradually introduced at later stages, when the **team**

¹³ See also point 5 in regards to the boys’ defensive stance

bonding has been achieved and a **trust-relationship** has already been built among the students, but also between teacher and students.

- d. students are provided with the **opportunity to express their opinion anonymously**: each one writes her/his opinion and then the cards are redistributed so that each student reads an opinion but not his/her own; this technique is used especially in the beginning but also whenever the facilitator judges that it would be beneficial.
5. **Engages equally girls and boys**, as both sexes are considered equally responsible to contribute to the building of their healthy intimate relationship. However, **special consideration is needed** in order for the facilitator to effectively handle the **initial resistance and the defensive stance boys** usually develop as soon as they realize that a large part of the Workshop is going to be devoted to gender (in)equality, masculinities and femininities and the male privileges in Patriarchal societies. Typically, **boys** in the beginning of the Workshop do not enjoy discussing such topics because they **may feel that they are being “attacked” or that they will be accused of something**; however they soon realize that the GEAR against IPV approach is not in favour of girls and against the boys but in favour of both girls and boys. This realization comes via activities that aim to guide adolescents to identify the downsides of masculine behaviour and of male privileges to both boys and girls, as well as to their relationships; towards this direction is also contributing the fact that throughout the GEAR against IPV Workshop it is evident that the effort is to empower both boys and girls to be able to deal with peer/social pressure and, despite this pressure, to feel free to make their own decisions and to choose to be the person they want to be instead of trying to conform to the image of the “real man” who is a tough, macho guy or of the “lady”, who is self-sacrificed, perfect mom, wife, housekeeper, etc.. Last, but not least a strong bond seems to be developed among students but also between students and the teacher.
6. **Provides adolescents an insight on the opposite gender’s perspective** as well as an opportunity **to examine their own gender’s perspective, to assess it and to modify it** according to their own priorities and wishes and not according to the socially imposed norms. All activities are implemented with mixed groups of female and male students. In few activities the process start with boys and girls working in segregated groups in order to represent the perspective of their own gender; after this phase, each group observes or is informed about the opposite genders perspective and then in the large group they identify differences and similarities, discuss and try to understand what are the causes for them, how these impact their relationships and how they can overcome the barriers created by them. Examples of such activities (2.1.1. and 2.2.4) are presented in the ANNEX II of this paper; during such type of activities it becomes evident that, for both girls and boys, this is their first opportunity to perceive the view the opposite gender holds as well as how different it is from their own, a fact that creates great surprise to the children. Often this was their first time that someone has led them to openly discuss such kind of topics related to the intimate relationships of adolescents, to the abuse as well to the way couples are communicating their feelings, thoughts and opinions.
7. **Has material that promotes gender equality**, not only explicitly, but **also implicitly**: The layout of all students’ worksheets (that are used during the activities) are gender non-stereotypical (e.g. never connects stereotypical colors -pink and blue- with girls’ and boys’ materials respectively; instead, yellow and green is used interchangeably for the two sexes). In addition the text in all of the material (Worksheets, Handouts and Evaluation Questionnaires) that students use includes nouns and pronouns in both feminine and masculine grammatical genders and not only the generic masculine as it is the common practice.
8. It is important to **target the general population of students**, e.g. to include the entire classroom of students instead of making a selection of students who may be more sensitized. This is one of the reasons that it is suggested the Workshops to be conducted inside the school curriculum (and not outside of it).

10.10.2 The GEAR against IPV Teachers' Training Seminar

1. Experiential training of teachers via a **Simulation of a GEAR against IPV Workshop**: provides teachers a model for implementing the Students' Workshop but not only this. At least half of the Teachers' Training Seminar is conducted via a simulated GEAR against IPV Workshop; teachers are instructed to adopt the role of adolescents and participate in a Workshop that is identical with the one that they will implement with their students. This approach (which is called "through students' eyes"), was based on the rationale that it not only provides teachers with a model on how to stop using an "authoritarian" style of teaching but more importantly, it provides a "safe" environment for teachers, which enables them to more effectively and defenselessly identify, report and even modify their own stereotypical attitudes and/or behaviors towards students, as well as the use of sexist language and/or any tolerant to violence attitude or behavior they may hold. Moreover, via simulation, teachers obtain the same experience their students are expected to have during the "GEAR against IPV" Workshop, which is expected not only to enhance their implementation skills, but also to increase their empathy towards their students' experiences. In addition, the facilitator purposefully includes into the Simulated Workshop as many activities as possible of those that s/he assumes (or knows, on the basis of the needs assessment) that many or most of the teachers may:
 - Not feel comfortable to implement.
 - Hold contradictory attitudes or opinions among themselves on the topic the activity/-ies address.
 - Consider as being either ineffective or inappropriate for students.

By modeling the **"scary" activities** to teachers, they are enabled to understand that their implementation is much easier than what they may have thought; additionally, modeling the activities that have a higher probability to be **"rejected" by teachers** can lead teachers to revise any distorted attitudes they may have held, as well as to reveal their usefulness and the way they can achieve their aim¹⁴. Last but not least, the facilitator takes care to select activities in such a way as to provide her/him with the opportunity to **model** for the teachers all of the **active learning techniques**.

Last but not least, teachers are instructed to **adopt any student's type** (macho, difficult, evasive, disobedient, sweet etc) as well as to imitate students' reactions that they are **"afraid" that they cannot handle**; in this way they can experience how children deal with difficult subjects and they can mentally rehearse the teachers' role (via observing the model presented by the facilitator), thus also acquiring the skills to be able to conduct the workshops.

2. Teachers were opted to be trained as implementers (instead of external facilitators) for many reasons:
 - a. They act as multipliers and they can be a permanent task force, as they can carry out the Workshop in more schools and with longer duration, independently of geographical region and resources available.
 - b. They already have a relationship with the students, which makes the implementation more effective.
 - c. It is their duty to educate students on important subjects, as it is to enhance their students' potential to build healthy relationships .
 - d. They are willing to obtain such kind of skills because students often approach them and ask for their help for personal issues and they feel that they cannot respond properly to their needs

¹⁴ An indication of the effectiveness of this technique is the fact that all 4 activities that were implemented by 77% - 92% of teachers had been simulated during the training; only two non-simulated activities were selected by 69% of the implementers, while each of the remaining 44 activities selected by 7.8% - 53.9% of the facilitators (which is also an indication that the large number of activities enables teachers to select the most appropriate ones according to their own and their classrooms needs).

- e. Workshops conducted by teachers signify teachers and school as focal points (where students can go to ask for help for such issues like abuse); in addition to the support students may find, this also enhances the strength of the preventive message that is emitted.
- f. Students also state that teachers should carry out the project.

10.10.3 *The GEAR against IPV Material*

1. Is very structured and detailed in order to guide inexperienced teachers step-by-step, but also very flexible in order for teachers to be able to adjust the instructions to their personal style.
2. Provides a large number of activities in order for teachers to be able to select those that fit best to their classroom's needs but also to their own needs (feeling comfortable to implement).
3. Provides teachers with ready-to-be-used material per activity (verbatim instructions, students' worksheets and handouts) as well as information and examples of the expected results; in addition.
4. Provides teachers with all necessary theoretical and practical information they may need for preparing their interventions but also for appropriately responding to potential cases of child abuse or IPV that will be revealed to them in the context or after the Workshop. Teachers highly appreciate the fact that they are able to find all information and activities they need in one single material, without having to look for related or for additional information or materials.
5. Includes activities that can also be endorsed inside the official school curriculum: for example, a biologist, instead of teaching with traditional methods the differences between sex and gender, can implement one or more of the activity/-ies about sex and gender, as well as activities that are related with consenting sexual activities and sexual abuse; teachers of citizenship education can endorse any of the activities included in Modules 2 and 4; the home economics courses can endorse any of the activities in Modules 2-4; in vocational orientation courses all activities that aim to deconstruct the stereotype of traditional female and male professions from Module 2 can be implemented.

Organization, implementation and monitoring the Workshops

1. **Close monitoring** of the Workshop's organization and implementation, as well as the **availability** of the coordinating professional(s) **to support the teachers** is of utmost importance for teachers to feel safe to work with such sensitive topics. The coordinating organization should have a very active role in two phases:
 - **During the Workshops' organization by the teachers:** a) by providing to teachers feedback about the selected activities on the basis of their students' needs assessment (whenever needed) and b) by preparing and sending to the teachers all of the material, in a ready-to-be-used format, for all of the activities they have selected to implement; this is one of the most important aspects of the project because it can impair the attractiveness of the material to the students: to briefly explain, the material requires colourful printing as well as various material (stickers, colourful papers and markers, flipchart papers, etc), as well as some working hours in order to appropriately prepare the material (print, cut, separate material for different small groups, etc.); in cases where the school resources are not sufficient to support the reproduction of such materials it is **strongly recommended** that the coordinator undertakes this task; moreover, as this preparation requires a lot of time from teachers, the provision of the material ready-to-be-used is highly appreciated by them.
 - **During the Workshops' implementation by the teachers:** by closely monitoring the implementation and supporting the teachers at any issue they face and whenever asked.
2. Supportive attitude of school principals and school Authorities (like Ministry) could be a facilitator to the implementation, especially in countries where a formal permission is mandatory to be obtained. The ideal situation would be if the schools, the Ministry or any other competent authority adopted officially, permanently and mandatorily the GEAR against IPV approach and material (or any other similar intervention): this means that the Ministry of Education takes responsibility so that a) each school should mandatorily have such type of projects offered to the students and b) each school is provided the opportunity to participate (at least one teacher from every school) in the Teachers' Seminar.

10.10.4 The GEAR against IPV-II project

Similarly with the GEAR against IPV, during the GEAR against IPV-II the following activities are included:

- **Revision and update of the Master Package** that was developed in the context of the GEAR against IPV project.
- Development, cultural adaptation and evaluation of three **National Packages** (for Cyprus, Romania, Spain) and update of the existing Greek and Croatian National Packages (revised editions).
- Implementation and evaluation of **seminars** for ~290 teachers and professionals [each seminar's duration: 24 hours].
- Implementation and evaluation of ~1.300 **adolescents' awareness raising workshops** in secondary schools and other settings (minimum duration of each workshop: 13 teaching hours).

The **new elements** that have been added in the GEAR against IPV-II project are:

- Pilot-test the GEAR against IPV intervention with adolescents/young people (12+ years old) belonging to high risk/vulnerable groups¹⁵, and teachers/professionals who daily work with them; this group is in increased risk for both IPV victimization and perpetration; for this reason, it is important to pilot-test whether the material is equally appropriate & the intervention is equally effective with high-risk groups, as compared with groups of the general population.
- **Mapping of preventive and supportive initiatives for IPV and Sexual Violence in adolescents** in the 5 participating countries.
- **Sensitize Teens' general population via peer-dissemination**
 - 5 **peer-to-peer informational and awareness raising campaigns on gender-based violence**, via material and messages that will derive from adolescents' creations during the workshops in each country.
 - **presentation of the project's results** in 5 National Conferences with the active involvement of adolescents and teachers who participated in all of the workshops conducted.
- **European Conference** in Athens, aiming to the wide dissemination of the GEAR against IPV approach and its results, as well as to the promotion of developing new National Packages for all EU Member States, candidate and potential candidate countries.

15 Children that have been removed from home due to child abuse and/or neglect and/or children exposed to parental IPV

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11 Safer together early intervention service in England

Lorraine Radford and Nicky Stanley

11.1 Summary

Safer Together Early Intervention Service addresses an important gap in practice and research. The broad aims of the project are to provide earlier help and support to adult female victims of domestic violence and their children to promote recovery, independence and prevent further violence. Safer Together is made up of a consortium of specialist domestic violence service providers in Lancashire, England. These provide 1-to-1 practical and emotional support for mothers and children who have experienced domestic violence, a key worker who conducts assessments, coordinates and facilitates access to services required, plus seven specialist domestic violence recovery and tertiary prevention services. A pre and post test multiple methods evaluation has found promising results on standardised measures of change. Further research is needed to support these early results.

11.2 Practical Information on the project

- a. Name of the Project (Original Title): Safer Together Early Intervention Service.
- b. English Title: Safer Together Early Intervention Service.
- c. Country: England, North East Region, Lancashire.
- d. Organisation: Safer Together consortium (part of Greater Together Lancashire).
- e. Contact information: Safer Together coordinator Louise Neville/Jim Cross, Domestic Abuse Early Support Coordinator Lancashire, Greater Together, Young Lancashire, Fishergate Hill, Preston, Lancs PR1 8JB .
Louise Tel: 01254 879855 Mobile: 07551 125 466.
Jim Tel: 01772 556127 Email: Jim.cross@younglancashire.org.uk
- f. Website: Safer Together Lancashire <http://www.saferlancashire.co.uk/2011/domestic/index.asp>

11.3 Target group

The target groups are adult women living in the county of Lancashire, excluding those living in the Blackpool City Council area, and their children under the age of 18 years, who have experienced domestic violence. All of the families have at least one school aged child and will have been assessed via a family assessment as having unmet needs at 'coping' or 'struggling to cope' levels on the Lancashire Continuum of Need Assessment (Lancashire County Council, 2014).

Safer Together early help services do not work with men or with perpetrators. Ethnic minorities are included and the services have specialist outreach workers for ethnic minority families. During the first 15 months of Safer Together it was expected that 750 families would make use of the services but in the first 12 months only 473 families were referred because the projects took longer to establish than expected.

11.4 Level of prevention

Tertiary for the adult and the child's exposure, although the children and young people do not necessarily have previously identified behavioural problems or symptoms of psychological distress.

11.5 Method

a. Background

Current government policy in England for supporting vulnerable children (Allen, 2011) and policy on domestic violence (HM Govt, 2014) emphasises the need for primary prevention and early intervention, but practice and research evidence to help inform this work with adults and children living with domestic violence is limited and has focused predominantly on managing high risk cases (HMIC, 2014; Guy, 2014; Peckover, 2013; Radford et al, 2011). While resilience based and differentiated response models towards children exposed to domestic violence are well regarded by national and international researchers in this field (Cross et al, 2012; English et al, 2005; Friend et al, 2008; Gerwitz & Edleson, 2007), the evidence base on effective early interventions to improve the safety and wellbeing of children and prevent adverse impact upon the future generation is very limited (Rizo et al, 2011; Stanley, 2011). The Safer Together service in Lancashire aimed to address the early help gap in the continuum of care for children and families and, via an independent pre and post intervention evaluation, develop new knowledge on impact and outcomes. Eight ngo domestic violence service providers, covering twelve different areas of Lancashire, form the Safer Together consortium in which the early intervention services are based. The Safer Together services for adults and children who have experienced domestic violence are wide ranging and cover primary, secondary and tertiary prevention. Services provided overall include:

- Refuges and Safe Houses.
- Independent Domestic Violence Advocate Services (IDVA).
- Outreach and Floating Support.
- Specialist domestic abuse children and young people's services including: 1 to 1 support, family support, positive activities, youth and play schemes, perpetrator programmes, children's IDVAs and advocacy, therapeutic support, safeguarding assessment and support, helplines, group intervention and parallel mother and child programmes. (Offered as well under early intervention services).
- Parenting and Strengthening Families programmes - 'Incredible Years', 'Freedom Programme', 'Recovery Toolkit', 'What About Me?' programme, 'You, Me and Mum', 'Helping Hands', 'Strengthening Families 10-14'. (Offered as well under early intervention services).
- Sanctuary schemes looking at practical safety in the home, window locks, alarms etc..
- Perpetrator programmes.
- Primary prevention services, including educational and awareness work.
- Training.
- Support to Voluntary and Statutory sectors.
- Helplines.

The Safer Together early intervention services, which are the focus of this country report, involve a key worker (called an Early Intervention Officer, EIO) allocated to the family to assess needs and coordinate the provision of services tailored to needs. Services include a 12 week 1-to-1 support programme provided individually to the mother and each of the children; specialist support and tertiary prevention work with children and young people; parenting, group and peer support for the mothers. The initial aim of the Safer Together early intervention service was to provide services for mothers and children working in parallel groups, drawing on promising research evidence that this approach would bring the best outcomes (Graham-Bermann et al, 2009). The range of services provided for child support and early intervention work were set up to enable this parallel group approach.

Impact is measured against child well-being outcomes and standardised measures of change specific to the early intervention services. The child wellbeing outcomes for Lancashire are developed from the Every Child Matters Framework (HM Govt, 2003) and cover 5 outcome areas - good health, safety, enjoyment and achievement, making a positive contribution to community/society and achieving economic wellbeing. The eight services provide different intervention programmes for mothers and children but outcome measures used - Family Star Plus, My Star and Empowerment Star - are standardised across all the services.

Early intervention services are funded on a 'payment by results' basis with income of up to £4,000 per family coming to the local government funders via the central government's 'troubled families' pro-

gramme (<https://www.gov.uk/government/policies/support-for-families>) . Payment by results means that partial payment is made when a service takes on a family. Full payment is only made if expected results are met, based on standardised assessment of agreed criteria of change. Payments are made to the services on a family basis regardless of family size. So if a family has four children and all four receive services, or if a family has one child, the same payment is made regardless of the differing amount of work involved.

b. Methodology

Each service in the Safer Together consortium employs specialist support workers ('Domestic Abuse Early Intervention Officers', EIOs) to cover all 12 districts. A Lancashire wide coordinator supports the staff and ensures consistency of service delivery across the county.

The target group of adult women and their children would be identified first by a referral service in contact with the family, such as the police, school, doctor, health visitor, children's centre, midwife etc. The route into the service is via identification of domestic violence and an assessment of the child's unmet needs. There are many pathways into the service and the focus for eligibility remains largely risk based. Referral services who encounter cases of domestic violence are expected to identify the level of domestic violence risk using a standardised measure, the CAADA DASH risk assessment tool. Domestic violence risk is assessed as either high, medium or standard. Referral services in contact with children may also conduct an assessment of the children's needs, using an agreed common assessment form, to assess needs across the Lancashire continuum of care needs (see Appendix). If required, families at standard or medium risk of domestic violence where the parent is also assessed as just 'coping' or 'struggling to cope' will be referred to Safer Together early help services. High risk families are not usually covered by Safer Together services because they are given one to one advocacy with an Independent Domestic Violence Advocate (IDVA). High risk often also means that children are at risk of significant harm so the family is referred to child protection services. In some cases a mother at high risk with support from an IDVA may need support for her children too and the family might then be referred to the early intervention service. Risk levels are not static and some women and children assessed as medium or standard risk may have previously been assessed at a higher level of risk. Lancashire additionally has a process for escalation and de-escalation, reviewing cases where risk increases or risk declines to consider what services, if any, are currently needed. The EIOs may therefore take on families that were previously high risk where the risk has declined and the care support needs have consequently 'de-escalated'.

Once the referral is made the EIO makes contact with the (victim) parent, often by telephone, to follow-up and offer the early intervention service. Not all families referred to Safer Together will choose to take up the service. Women who do engage most often do so because they want help for their children. All families undergo a family assessment at the beginning and end of the intervention using the 'Family Outcomes Star', the 'Empowerment Star' (for women) and the 'My Star' (for children and young people of different ages) (Burns & MacKeith, 2011; 2013a; 2013b).

Services are delivered from community-based venues and aim to liaise with other agencies including the Multi Agency Safeguarding Hub (MASH), which provides an integrated assessment, planning and referral process and facilitates sharing of data across different agencies. Where appropriate and safe, early intervention officers may work within the family's homes. In many cases the perpetrator will still be residing in the home so work will need to be undertaken at an alternative, safe venue. Interventions for children and young people may take place in schools, colleges, pupil referral units, youth zones, children's centres and other services' buildings where appropriate. Services can be provided between 8.00am and 9.30pm with flexibility so that out of hours support is available. Support can also be given via telephone, Internet, social networking sites and text.

The early help service offers families from across Lancashire 1-to-1 support, 12 week group work programmes, parenting programmes and peer support. Coordinated working across services is achieved via the key worker (Early Intervention Officer, EIO) who also attends multi agency meetings at the time of assessment of need (CAF meetings) and while services are being provided (the Team Around the Family, or TAF meetings).

EIOs work with families to help them identify their own solutions, develop family skills, interests and knowledge and build their capacity and capability to cope with adversity and manage vulnerabilities. They aim to support and empower families to develop and maintain positive social connections within their local communities. Structured Peer Support is offered within approximately 6 weeks from referral to allow time for service users to gain confidence and form friendships. Table 1 shows the approved group and individual programmes that can be offered for women, children and young people to help them overcome the adverse consequences of living with domestic violence and to prevent future violence.

Table 1: Domestic Abuse Early Intervention Services in Lancashire

Name	Duration	Target Audience	Description
Freedom Programme www.freedomprogramme.co.uk	12 week	Women victims	Explores attitudes/beliefs of perpetrators and the responses of victims, addresses how children are affected by the abuse and how their lives can be improved when abuse is removed.
Helping Hands http://www.womensaidni.org/about-us/our-work/preventative-education/working-with-children-in-primary-schools/		Children and young people	Addresses challenging issues of personal space, safety planning & awareness of acceptable and unacceptable behaviours.
Recovery Toolkit for adults http://www.suepenna.co.uk/the-recovery-toolkit.html	12 week	Women victims not living with perpetrator	Looks at ways to develop positive coping strategies.
Recovery Toolkit for children	8 week	Children and young people	Designed to run alongside the adult programme which is informed by Trauma Focused CBT and addresses areas such as self-esteem, who is my family, talking positive, handling difficult feelings, healthy relationships and trust.
You, Me and Mum http://www.womensaidni.org/themainevent/wp-content/uploads/2012/04/you-and-me-mum-leaflet.pdf	10 week	Mothers	Helps mothers who have experienced DV to explore their role as mothers, the impact of DV upon their child(ren), and their relationship with their child(ren). Aims to promote the ethos of self-help and empowerment
What about me (Canadian Programme) http://www.lfcc.on.ca/what_about_me.pdf		Children (4-16 years)	Reduces children's self-blame, feelings of isolation, enabling children to express difficult feelings in safe ways, develop skills to ensure own relationships are safe, healthy, and develop vital safety planning. The programme includes a mums group helping them to talk to the children about the violence and to cope with the impact of the violence on their children.
Talking to my Mum		Children (5-8 years)	Picture workbook to help mothers and children affected by domestic abuse and has found to encourage communication between mum and child(ren).

c. Implementation

The maximum period of involvement with the early intervention service for one-to-one support is 12 weeks. Other services and programmes have time limits of between 8 to 12 weeks (see table 1). In practice however it has been difficult for EIOs to get families access to interventions within a 12 week window and run groups for mothers and groups for children simultaneously.

d. Execution

Staff work in the ngo domestic violence sector and are all paid employees. Qualifications vary widely from post graduate qualifications, to higher (graduate) and lower level (NVQ) youth and child care qualifications. All Safer Together partners have staff who receive specialist training on domestic violence, on the programmes they deliver, on culturally appropriate provision and assessing risk. The workforce is culturally diverse and includes staff who speak the following languages: English, Urdu, Punjabi, Pushto, Romanian, Hungarian, Polish, Arabic, Gujarati, Bengali, French, German and Spanish. Safer Together services work in partnership to ensure that where translation services are required for families these can be provided. Staff allocated to families work as key workers coordinating and delivering services on an outreach basis, meeting with the family at home or at an alternative safe venue, such as at school.

e. Results

Of the 473 families taking part in the early intervention services from January 2014 to December 2014, 6% of children were aged under 4 years, 61% between 5 to 11 years, 27% between 12 to 15 years and 6% were 16 to 17. 50% were boys and 50% girls. 86% were of white British ethnicity. Outcome data collected for the project was evaluated independently by researchers at the University of Central Lancashire (see below). While the expected target number of families was not achieved, the referral rates increased as the services became established. Results from the first year show positive outcomes achieved for children involved with services as measured on the My Star, Empowerment Star and Family Star. The Outcomes Star tools, provide a simple pictorial method - the star shape - which professionals use when working with adults and children to assess and measure change across certain domains, taking into account strengths as well as risks/severity. By grading self-assessed wellbeing across these domains on a scale of 1 to 5 the client and professional can assess the direction of change as well as the outcomes. The My Star measure is designed for working with vulnerable children. It covers eight areas - Physical health, Where you live; Being safe; Relationships; Feelings and behaviour; Friends, Confidence and self-esteem; Education and learning.

The My Star measure can be used alongside the Family Star, which is a similar tool used with the parent. The Family Star covers ten areas, similarly graded to capture difficulties and steps taken to address these - Physical health; Wellbeing; Meeting emotional needs; Keeping children safe; Social networks; Education and learning; Boundaries and behaviour; Family routine; Home and money; Progress to work. The five step journey of change in the Family Star consists of Step 1 - stuck; Step 2 - accepting help; Step 3 - trying; Step 4-Finding what works; Step 5 - Effective parenting.

The Empowerment Star measure was specifically designed for working with women who have experienced domestic violence and piloted in the UK. The Empowerment Star is based on a theory of change that identifies ten core areas and steps women go through on the journey to empowerment, independence and recovery. The ten core areas covered are: Safety; Accommodation; Support Networks; Legal issues; Health and wellbeing; Money; Children; Work and learning; Empowerment and self-esteem. The model of change in the Empowerment Star charts the journey to empowerment on a 5 point scale for each core area from 1. Not ready for help, 2. Accepting help, 3. Believing, 4. Learning and rebuilding, 5. Independence and choice.

Most of the work undertaken by Safer Together early intervention services was on a one to one basis with families. There were practical difficulties in getting access to the group programmes on offer as children and young people had to wait for a new group to start in order to join. Mothers were more likely to want services for their children than for themselves, often because their own needs were met elsewhere or because they did want a service themselves. Due to the limited time since the services developed, it is not possible at this early stage to predict whether or not the beneficial impact of the service will have any influence for the children that lasts into adulthood.

11.6 Gender perspective

The Safer Together consortium is made up of specialist domestic violence service providers that adopt a gender equality perspective. This is reflected in the assessment measures used - for example the Empowerment Star measure requires an understanding that freedom from abuse requires empowerment for women, with independence and choice as goals. One of the journeys of change charted (Money) is the journey to financial independence. A gender perspective on violence is also clear in some of the group programmes offered to women, such as the Freedom Programme, which is designed to enable women to recognise the power and control aspects of domestic violence and the impact on themselves and their children. The children's projects also give an indication of the gender perspective in preventive work on acceptable behaviours.

Much of the emphasis in the early intervention programmes is on enabling individual change, building safety, independence and changing attitudes among women, children and young people. The early intervention services do not work with perpetrators.

11.7 Prevention of intergenerational factors: an interconnection between factors

The inter-generational and overlapping aspects of the violence are not explicitly covered in a single document or theory of change. The assessment model is drawn from child protection social work and is based on an ecological perspective (Belsky, 1980 & 1993; Bronfenbrenner, 1986 & 2011) which views root causes of abuse and neglect as being the result of multiple risk factors, protective factors and situational influences interacting at the levels of the individual, the family, community and broader societal context.

11.8 The effectiveness of the project

A mixed methods evaluation using quantitative and qualitative methods recently completed by researchers at the University of Central Lancashire found evidence of positive change in child safety and wellbeing, measured on entry to the programme, on exit and followed up shortly afterwards (Radford et al, 2015). Due to the lack of a comparison group, short period of follow up and variability in programme delivery, the current evidence can be, at best, rated as promising. Further research over a longer follow up period is needed to support these early findings. To be concise, only the quantitative findings are presented here.

Quantitative analysis of the pre and post intervention outcome measures was only possible where complete sets of data existed. Data for mothers, using the Empowerment Star and the Family Star Plus measures was limited as many mothers did not want services for themselves but wanted support for their children. All three outcomes measures however demonstrated positive pre- to post-test change. My Star (MS) demonstrated a mean increase of 17% (n=250) on child service users' total scores between initial completion pre-programme and completion post-programme with only 2% (n=6) of service users scoring lower on their post-test total scores than their pre-test scores. Family Star Plus (FSP) (used with mothers) demonstrated a mean total score increase of 19% (n=20), with only 5% (n=1) achieving lower scores at post-test than at pre-test. The Empowerment Star (ES) (used with mothers) demonstrated an even larger mean increase in total scores of 33% (n=17) with only 12% (n=2) with reduced scores at post-test. However, although My Star achieved a high response rate of 250 young people, Family Star Plus and Empowerment Star only achieved response rates of 20 and 17 respectively, meaning that the data is less likely to be representative of the population as a whole.

In terms of the levels of need identified in the sample at pre-test (using the continuum of need), 60% (n=239) were categorised as "Just coping", with the remaining 40% (n=159) identified as "Struggling to cope". At post-test, although the number of service users identified as "Not coping" increased from 0 to 10% (n=35), only 5% (n=15) indicated they were "Struggling to cope", with 49% (n=165) identified as "Just coping". Encouragingly, 36% (n=121) of service users were categorised as "Thriving" by the end of the programme (see Figure 2 bar chart for pre- and post-test frequencies).

Analytical strategy

As the data was ordinal in nature and not normally distributed, the nonparametric test equivalent of the t-test (Wilcoxon signed-rank test) was used to assess statistical difference between the pre- and post-test data on all three measures. Tests such as the Wilcoxon use the median as the measure of central tendency rather than the mean, and do not require that data be normally distributed.

Results

Table 2 shows that the median scores of the post-test conditions were all higher than the median scores of the pre-test conditions. The Wilcoxon signed-rank test demonstrated that in each case this difference between pre- and post-test was statistically significant. See the breakdown for each test below.

- There was a significant increase in the total score of the Family Star Plus measure from pre-test (Median = 72) to post-test (Median = 84), $Z = -3.847$, $p < .0001$, and the increase was large ($r = -.61$).
- There was also a significant increase in the total score of the My Star measure from pre-test (Median = 31) to post-test (Median = 36), $Z = -13.207$, $p < .0001$, and the increase was also large ($r = -.59$).
- The total score of the Empowerment Star also showed a significant increase from pre-test (Median = 49) to post-test (Median = 66), $Z = -3.220$, $p = .001$, and the increase was again, large ($r = -.55$).

See Table 3 for a breakdown of the Z scores and probability levels and Figure 1 bar chart for the mean scores.

Table 2: Descriptive statistics

Measure	Descriptive	Pre-test	Post-test
Family Star Plus (N=20)			
	Mean	68	81
	Median	72	84
	Range	61	71
My Star (N=250)			
	Mean	30	35
	Median	31	36
	Range	30	20
Empowerment Star (N=17)			
	Mean	51	68
	Median	49	66
	Range	43	43

Table 3: Inferential statistics

	Median Scores			Wilcoxon signed-rank		
	Pretest	Posttest	Change (%)	N	Z	p
Family Star Plus	72	84	12 (17%)	20	-3.847	.000
My Star	31	36	5 (16%)	250	-13.207	.000
Empowerment Star	49	66	17 (35%)	17	-3.220	.001

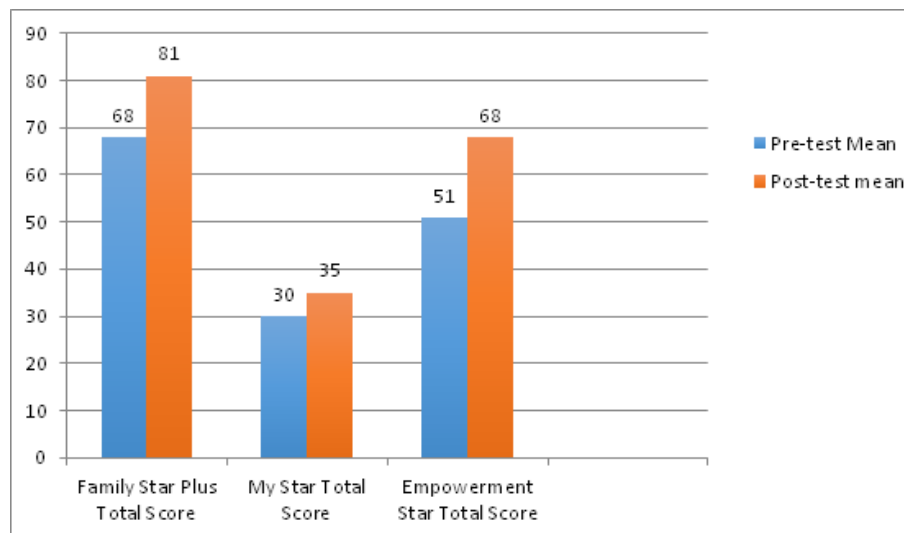


Figure 1: Total Mean Scores Pre- and Post-test

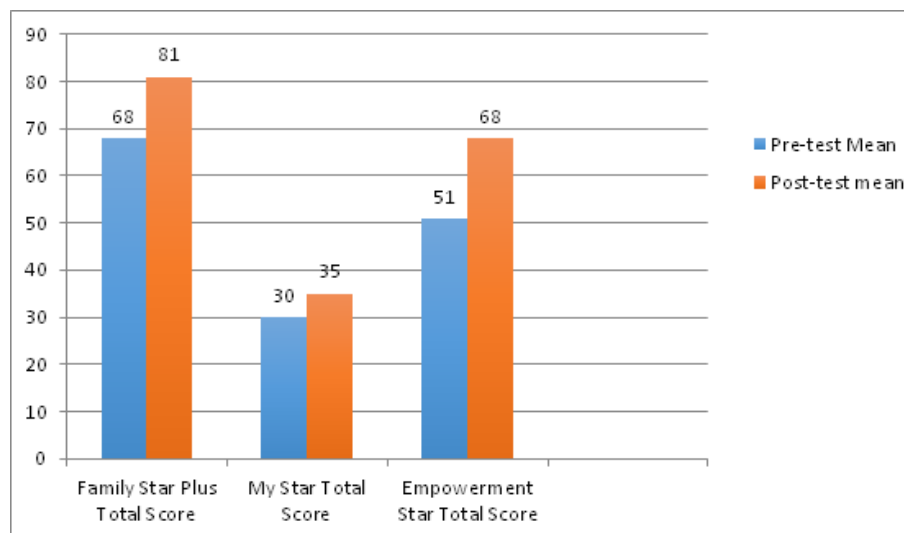


Figure 2: Continuum of Need Frequencies Pre- and Post-test

Qualitative data from interviews with mothers and children confirm that they felt supported by the early intervention services. The one to one support work and the accessibility of the children's services, often provided at school, were particularly said to be helpful. Mothers reported improvements in children's behaviour and problems in school. There were however some exceptions where outcome measures suggest that a child's wellbeing deteriorated. These require further investigation.

Service providers found the My Star and Empowerment Star tools very useful for working with families although few adults or children mentioned these tools. The data obtained from the research does not permit conclusions to be made about whether or not a gender empowerment perspective contributed to the promising results found.

A more rigorous four year evaluation of early intervention responses is currently underway in Blackpool's Step Up project.

11.9 International applicability

The project is likely to be of international interest because it addresses a significant gap in domestic violence prevention work. The child centred and coordinated key worker could be an approach that could be applied and tested in other European contexts. The early intervention approach builds a new

service on already existing expertise within specialist domestic violence organisations which exist in most other European countries.

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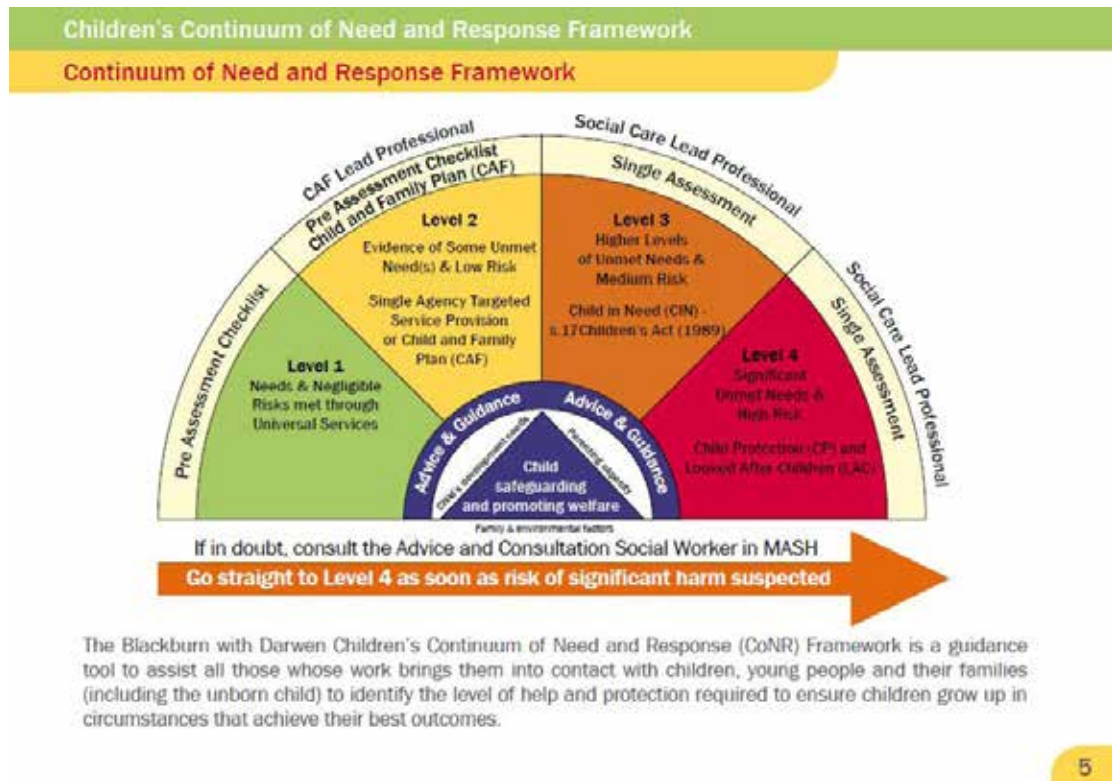
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Appendix



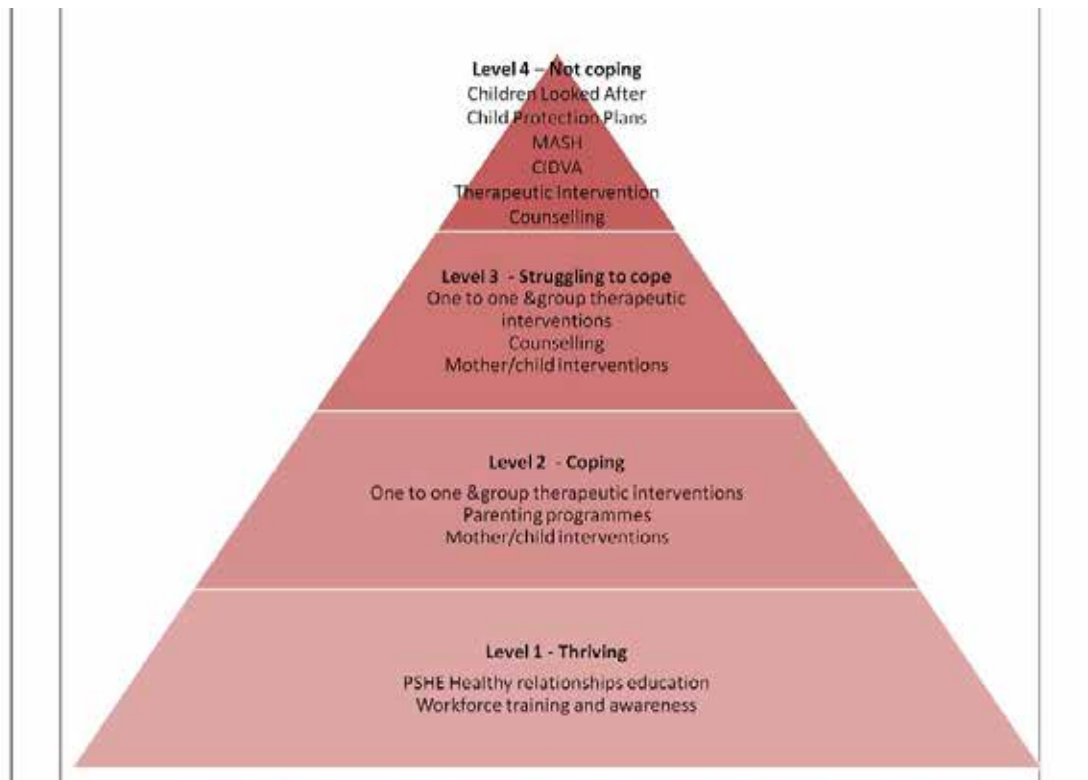
The Lancashire Continuum of Need (CON) has the following four levels of need that can be assessed:

- Level 1 Children, young people and families whose needs are met by universal services and are thriving.
- Level 2 Children, young people and families who have additional unmet needs and are just coping, thus may be in need of Early Support from Services.
- Level 3 Children, young people and families who are struggling to cope and need a coordinated targeted response.
- Level 4 Children, young people and families who are not coping and are more likely to need a response from a specialist service (4a S17 children in need, 4b S47 child protection).

The continuum of need sets out examples of outcome based indicators for each of the levels of need that practitioners might consider when making assessments. These cover outcomes relating to the child's health and wellbeing, safety from harm, ability to contribute and engage in the communities in which they live and their aspirations and achievements. Examples of indicators of a child's safety at Level 1 for example include the child having positive attachments with caregivers; having stable home environments; being able to recognise unsafe activities, places, etc; having secure relationships.

The Domestic Abuse early intervention response was designed to be part of a holistic care response for children, victims and perpetrators across this continuum of need. The focus for the domestic abuse early intervention response, Safer Together, was on families where needs were assessed at levels 2 and 3, in the middle of the continuum of need. The levels of care services matched to different levels of need are illustrated below.

Domestic Abuse Continuum of Care in Lancashire



It is not assumed that children's needs will be static. Needs may change and escalate to a higher level where more support is required, or they may de-escalate to lower levels where families are thriving and require less monitoring and support.

12 *Spanish legislation: the policy and law on intergenerational violence in Spain*

Bettina Steible and Teresa Freixes

12.1 *Summary*

Presented as a world model in the fight against gender violence, the Spanish legislation and policy in this matter attempts to provide a holistic and coordinated approach which resorts to the “3 Ps”: prevention, punishment and protection. Indeed, while perpetrators are condemned to traditional penal sanctions, they may also be subjected to barring orders, prohibition of contact or restraining orders. Victims may also benefit from other protection measures of civil, economic and social nature. The legislation therefore intends to send a strong message to the society as a whole, according to which gender and domestic violence is unacceptable and perpetrators shall not remain unpunished.

An important element of the legislation is prevention. In this regard, Organic Act 1/2004 of 28 December on Comprehensive Protection Measures against Gender Violence¹⁶ emphasizes the need to prevent violence before it occurs. Even though it principally applies to victims of gender violence, it also includes measures aimed at children and the elderly, and is completed by other pieces of legislation relating to intergenerational violence. In this regard, the Spanish approach mainly deals with prevention through two aspects: education and communication, thanks to initiatives aiming at the general public and targeted groups. Primary prevention focuses mainly on education whereas secondary and tertiary prevention follow the ecological model of intervention.

Thus, prevention takes place at institutional, societal, community, and individual levels, and follows a multi-factored approach. It attempts to raise awareness both amongst the general public and targeted groups, and break the silence surrounding this phenomenon. It also promotes non-violent educative models within the family. Moreover, it intends to challenge gender stereotypes, notably through education and collaboration with the private sector. The work conducted with the media in order to change the image of women is crucial in this regard. Special attention is also paid to the training of the professionals involved in the protection of victims of domestic violence, in order to appropriately respond to their needs and to avoid re-victimization.

It should be noted that the gender perspective is omnipresent in the Spanish legislation relating to the prevention of violence within the family. The subjacent idea of the Spanish policy is that equality, respect for human dignity and civil liberties must be considered as priority objectives at all levels of socialisation.

Gender violence is therefore considered as an expression of discrimination, inequality and the power relationships prevailing amongst men and women¹⁷. The promotion and achievement of gender equality is indeed considered as one of the most efficient means to eradicate domestic violence, in particular with regard to the intergenerational transmission of violence.

However, the focus on women as the main victims of domestic violence tends to overshadow the other victims, namely children and the elderly. Although children benefit from specialized protection, elder abuse is just one form of domestic violence and is not criminalized as a specific crime. If approved, the future adoption of the different pieces of legislation on the protection of minors¹⁸ and the elderly¹⁹ is therefore encouraging, as it will give more visibility to these phenomena and provide a greater protection to these groups which are particularly vulnerable to domestic violence.

16 Organic Act 1/2004, of 28 December, on Comprehensive Protection Measures against Gender Violence (*Ley orgánica 1/2004 de medidas de protección integral contra la violencia de género*) (hereafter ‘Organic Act 1/2004’).

17 Ibid., art. 1..

18 Proyecto de ley de modificación del sistema de protección a la infancia y a la adolescencia; Proyecto de ley orgánica de modificación del sistema de protección a la infancia y a la adolescencia.

19 Ministerio de Sanidad, Servicios sociales e Igualdad (2014). *Propuestas para el desarrollo de las orientaciones del Consejo de la UEm de 6 de diciembre de 2012, relativas a las personas mayores*.

12.2 Policy or law on intergenerational violence

The Spanish Constitution enshrines the protection of the family as a guiding principle of the general social and economic policy of the country in article 39. Spanish legislation has further developed family protection and different instruments have been adopted in this regard. Intergenerational violence is not dealt with as such, so that one must turn to the legislation on domestic violence, criminalized by articles 153 and 173(2) of the Criminal Code.

The most important pieces of legislation in this matter are Act 27/2003, of 31 July, on the Protection Order for victims of domestic violence²⁰, Organic Act 1/2004, and Organic Act 11/2003, of 29 September, on concrete measures in the field of citizen security, domestic violence and the social integration of foreigners²¹. The current legislative activity also demonstrates that this topic is high on the agenda. In this respect, two bills on the protection of childhood and adolescence were recently approved by the Government and transferred to the Parliament²², and a 'Statute of the elderly' (*Estaduto de los mayores*)²³ is currently being debated. If approved, these bills will provide greater protection to minors and the elderly with regard to intergenerational violence. One should bear in mind that intergenerational violence is a shared competence between the central and autonomous authorities. As a result, one should refer to the laws enacted by the different Autonomous Communities within the scope of their powers, besides State legislation.

The Spanish legal order provides different responses to the phenomenon of domestic violence in general and of intergenerational violence in particular. The underlying idea is to provide a holistic and coordinated approach that resorts to criminal measures against the perpetrator, as well as civil and social protection measures aimed at victims²⁴. However, while there is a specific legal response provided to victims of gender violence, the situation is more nuanced regarding intergenerational violence.

While children benefit from a specific protection²⁵, this is not the case of the elderly, whose protection is organised within the more general framework of domestic violence. In addition, if adopted, the draft organic act modifying the system of protection of childhood and adolescence will recognize children as direct victims of gender violence for the first time.

Criminal measures

Act 27/2003 introduced a swift and simple procedure to adopt protection measures aimed at victims of domestic violence when they are in an objective situation of risk²⁶, or if needed during the criminal proceedings²⁷. These include barring orders, restraining orders and prohibition of contact²⁸. It should be highlighted that a protection order's infringement equals to a violation of a security or precautionary measure and constitutes a crime punishable by imprisonment²⁹.

Although it does not detail specific offences, Act 27/2003 refers to the existing ones under the current criminal legislation. In this regard, Organic Act 11/2003³⁰ amended articles 153 and 173.2 of the Criminal Code, so as to modify the crime of domestic violence. In particular, it enlarged the different types of domestic violence and increased the penalties related to domestic violence crimes.

In this respect, the aggressor shall be punished with a sentence of imprisonment or community service and, in all cases, shall be deprived of the right to own and carry weapons. The Criminal Code

20 Act 27/2003, of 31 July, on the Protection Order for victims of domestic violence (*Ley 27/2003, de 31 de Julio, reguladora de la Orden de protección de las víctimas de violencia doméstica*) (hereafter 'Act 27/2003').

21 Organic Act 11/2003, of 29 September, on concrete measures in the field of citizen security, domestic violence and the social integration of foreigners (*Ley orgánica 11/2003, de 29 de septiembre, de medidas concretas en materia de seguridad ciudadana, violencia doméstica e integración social de los extranjeros*) (hereafter 'Organic Act 11/2003').

22 Proyecto de ley de modificación del sistema de protección a la infancia y a la adolescencia; Proyecto de ley orgánica de modificación del sistema de protección a la infancia y a la adolescencia.

23 Ministerio de Sanidad, Servicios sociales e Igualdad (2014). *Propuestas para el desarrollo de las orientaciones del Consejo de la UEm de 6 de diciembre de 2012, relativas a las personas mayores*.

24 Act 27/2003.

25 Organic Act 1/1996, of 15 January, on the legal protection of minors, amending the Civil Code (*Ley orgánica 1/1996, de 15 de enero, de protección jurídica del menor, de modificación parcial del código civil y de la ley de enjuiciamiento civil*) (hereafter 'Organic Act 1/1996').

26 Ibid., art. 2(1).

27 Ibid., art. 2(11).

28 Organic Act 1/2004, art. 64.

29 Criminal Code, art. 468.

30 Organic Act 11/2003.

foresees aggravating circumstances in the event that the offence is perpetrated in the presence of minors, or using weapons, or when it takes place in the common dwelling or in the dwelling of the victim, or when perpetrated in breach of a protection measure, or a precautionary or security measure of the same nature³¹.

Even though Organic Act 1/2004³² aims to protect victims of gender violence, it also includes broader provisions and affects the other members of the family as well. It amended the articles 148, 171 and 172 of the Criminal Code so as to create a specific category of serious assault subject to increased penalties and minor instances of coercion and threats against women, minors and adults lacking capacity. Furthermore, the bills on the protection of childhood and adolescence recognize minors as direct victims of gender violence and create the possibility to adopt precautionary measures in this regard.

Civil measures

Civil measures may be granted upon request of the victim, their legal representative, or the Public Prosecutor Office if there are minors or adults lacking capacity³³.

These measures may last for 30 days, and may be extended, modified or suspended by the competent court³⁴.

With regard to victims of domestic violence in general, they include the establishment of maintenance allowances³⁵.

Concerning children, they include new custody, visiting rights, contact and access arrangements³⁶, foster³⁷ and shelter³⁸ placement, or any other measures deemed necessary to avoid risks for or harm to minors³⁹. The same reasoning applies with regard to adults lacking capacity suffering from domestic violence⁴⁰.

Social measures

Pursuant to Act 27/2003, the protection order also implies that the local, regional and national institutions apply the social protection measures at their disposal within their respective legal systems. In particular, it foresees the allocation of the use and enjoyment of the house⁴¹.

Organic Act 1/2004 also includes different types of economic and social measures⁴², namely, information to victims, social, psychological and economic support to victims, monitoring of women's rights claims, educational support to the family unit, training on equality values and conflict-solving skills, support to employment training and insertion, and legal aid⁴³.

As regards children, they may benefit from social measures as descendants of victims of gender violence or as victims themselves. These include the immediate school enrolment in case of change of residence⁴⁴, social assistance⁴⁵, and free legal aid⁴⁶.

It should also be noted that elder women suffering from gender violence are considered as priority groups in the access to subsidized housing and retirement homes⁴⁷.

Finally, the prison authorities shall provide specific training for inmates sentenced for crimes related to gender violence⁴⁸.

31 Criminal Code, arts. 153 and 173(2).

32 Organic Act 1/2004.

33 Act 27/2003, art. 1(7).

34 Ibid.

35 Ibid.

36 Organic Act 1/1996, Title II, Chapter II; Organic Act 1/2004, arts. 65 and 66.

37 Ibid., art. 20.

38 Ibid., art. 21.

39 Act 27/2003, art. 1(7).

40 Criminal Code, art. 153 and 173(2).

41 Act 27/2003, art. 1(7).

42 Organic Act 1/2004, art. 19(2).

43 Ibid., art. 20.

44 Ibid., art. 5.

45 Ibid., art. 19(5).

46 Royal Law-Decree 3/2013 (*Real Decreto-Ley 3/2013, de 22 de febrero, por el que se modifica el régimen de las tasas en el ámbito de la Administración de Justicia y el sistema de asistencia jurídica gratuita*).

47 Organic Act 1/2004, art. 28.

48 Ibid., art. 42.

12.3 Policy or law on prevention of intergenerational violence

Much of the policy on prevention of intergenerational violence rests on the prevention of gender violence. Among the different acts dealing with violence within the family, Organic Act 1/2004 puts much emphasis on the necessity to prevent gender violence, besides punishing perpetrators and protecting victims.

Organic Act 1/2004 entails preventive awareness measures amongst citizens, providing the authorities with effective instruments to fulfil this goal in the educational, social services, health, advertising and media spheres (art. 2). In this regard, it foresees the adoption of a National Awareness and Prevention Plan regarding violence against women, which was adopted in 2007. In addition, several action plans and strategies have been adopted in this matter, such as the National Strategy for the Eradication of Gender Violence (2013-2016), the Plan against Gender-based Violence in the Immigrant Population (2009-2012)⁴⁹, and the National Strategic Plan for Childhood and Adolescence (2013-2016)⁵⁰. No official plan or strategy has been found in relation to elder abuse specifically.

In the light of these elements, the main elements of the Spanish strategy to prevent violence within the family may be divided into two main areas: communication and education. Both areas touch upon the different types of prevention (primary, secondary and tertiary).

Communication

There are many actions undertaken in this regard since there are different awareness campaigns aimed at citizens and/or some specific sectors of the society. These campaigns aim to raise awareness, promote breaking the silence, involve the society as a whole in the eradication of violence against women, inform victims about their rights, and obtain the social rejection of perpetrators.

At societal level, the message conveyed is that any form of domestic violence is a violation of human rights and should not be tolerated. In this regard, citizens are encouraged to collaborate in the detection and notification of situations of abuse and reinforce professionals' training and counsel. Concerning child abuse, these campaigns attempt to challenge traditional educative models and to promote non-violent educative models as well as the eradication of physical punishment within the family.

To do so, innovative technologies are used in order to promote the active participation of society as a whole in breaking the silence in situations of violence against women, and to give visibility to the instruments available to victims.

In this regard, the Secretary General for Equality (hereafter 'SGE') has organized awareness campaigns aimed at the public in general. The Women Institute has also co-financed awareness campaigns jointly with the Autonomous Communities. It should be noted that some campaigns target specifically the youth and adolescents, in order to help them identify violence at its early stage.

In addition, concerning child abuse, the public authorities have co-organized awareness campaigns together with NGOs. It is worth mentioning the "My well being is your responsibility" campaign (*Mi bienestar es tu responsabilidad*), which started in 2006 and ended in 2011. "Disciplining is not beating" (*Corregir no es pegar*) stands out as one of the most relevant awareness campaigns to promote positive, non-violent forms of discipline.

At institutional level, campaigns have been used to mobilise both the public and the private sector in prevention. By way of example, the SGE has organized events in the sports industry to raise awareness and engage sports professionals in the fight against gender prejudices and violence.

Collaboration with the private sector is indeed considered as essential. Public authorities have disseminated, in collaboration with trade unions and employer organizations, information on the rights of women victims of gender violence, with the aim of encouraging these women to break the silence. Within this context, the authorities have undertaken awareness-raising actions in the corporate sector

49 Plan against gender-based violence in the immigrant population. Available in English at: [www.msssi.gob.es/ssi/violenciaGenero/Documentacion/medidasPlanes/DOC/Plan_atencion_prevencion_violencia_genero_poblacion_extranjera_inmigrante\(2009_2012\)_INGLES.pdf](http://www.msssi.gob.es/ssi/violenciaGenero/Documentacion/medidasPlanes/DOC/Plan_atencion_prevencion_violencia_genero_poblacion_extranjera_inmigrante(2009_2012)_INGLES.pdf) (Last consultation: 15/03/2015).

50 Ministerio de Sanidad, Servicios Sociales e Igualdad (2013). *National Strategic Plan for Childhood and Adolescence, 2013-2016*. Madrid. Available in Spanish at: www.observatoriodelainfancia.msssi.gob.es/documentos/PENIA_2013-2016.pdf (Last consultation: 15/03/2015).

through the initiative “Companies for a society free of gender violence” (*Empresas para una sociedad libre de violencia de género*)⁵¹.

Some awareness campaigns target specific groups because of their vulnerability to domestic violence, such as immigrant women, women living in rural areas, or 65+ year-old women⁵².

There are also measures taken at the individual level to support victims of gender violence. Generally speaking, these measures aim to help women break away from violence so that silence does not increase their solitude, isolation and vulnerability, and to bring the institutional system to them. In this regard, public authorities attempt to promote and provide information on the resources available to offer comprehensive advice to women victims of gender violence, particularly women who have not yet filed a complaint. One could also refer to the awareness and prevention programmes that have taken place in prison with victims or possible victims of gender violence.

It is worth mentioning the creation of an application for smartphones aimed at women who suffer or have suffered gender-based violence, their friends and relatives. It provides information on how to identify situations of gender violence, how to act in these situations and the resources made available to victims⁵³.

There have also been awareness-raising initiatives encouraging men’s involvement in combatting gender violence. By way of example, Castile and Leon organized the ‘Meetings for equality’ (*Encuentros por la Igualdad*) in 2009 and 2010, whose objective was to raise awareness amongst men about the active role they can play in the construction of a more equal society⁵⁴. There have also been psycho-socio-educative programmes of intervention aimed at perpetrators in most autonomous communities⁵⁵.

Concerning child abuse specifically, there are also individual prevention measures aimed at supporting families and intervening with violent groups⁵⁶.

Education

Concerning education, a distinction must be drawn between education aimed at the society at large and trainings aimed at professionals involved in the prevention and eradication of violence. The overall objective is to educate citizens for them to acquire the necessary knowledge, values, behaviours and skills to prevent future violence.

Regarding the former, there are initiatives undertaken throughout children’s education⁵⁷. At a very early stage, pre-school education shall develop conflict-solving skills. Then, primary and secondary education shall assist students in the development of peaceful conflict resolution and teach them about gender equality and its consequences. Upper secondary education and professional training will develop students’ ability to consolidate their personal, social and moral maturity, so they act responsibly and independently, and to analyse and criticize gender inequalities and foster real, effective equality between men and women.

Adults also constitute a target group of the prevention policy⁵⁸ insofar as adult education shall also promote the development of the above-mentioned principles. In the same way, Universities shall introduce and foster teaching and research on gender equality across the full range of academic studies and activities.

51 For more information, see: www.msssi.gob.es/ssi/violenciaGenero/Sensibilizacion/AMBITOEMPRESARIAL/ho-me.htm.

52 Ministerio de Trabajo y Asuntos Sociales (2006). *Balance de resultados de la aplicación de la Ley Orgánica 1/2004, de 28 de diciembre, de Medidas de Protección Integral contra la Violencia de Género*. Madrid. p. 17.

53 For more information, see: www.msssi.gob.es/ssi/violenciaGenero/Sensibilizacion/AplicacionLibres/ho-me.htm.

54 Ministerio de Sanidad, Política Social e Igualdad (2013). *Actuaciones de la Comunidades Autónomas en cumplimiento de la Ley Orgánica 1/2004, de 28 de diciembre, de medidas de protección integral contra la violencia de género*, p. 28. Available at: [www.msssi.gob.es/ssi/violenciaGenero/Documentacion/seguimientoEvaluacion/DOC/ActuacionesCCAA\(2005-2012\).pdf](http://www.msssi.gob.es/ssi/violenciaGenero/Documentacion/seguimientoEvaluacion/DOC/ActuacionesCCAA(2005-2012).pdf) (Last consultation: 15/03/2015).

55 Ibid., p. 30.

56 Ministerio de Sanidad, Servicios Sociales e Igualdad (2013). *National Strategic Plan for Childhood and Adolescence, 2013-2016*. Madrid. Available in Spanish at: www.observatoriodelainfancia.msssi.gob.es/documentos/PENIA_2013-2016.pdf (Last consultation: 15/03/2015).

57 Organic Act 1/2004, art. 4.

58 Ibid.

There are also training initiatives aimed at professionals involved in the protection of victims of gender violence and child abuse⁵⁹. In this regard, different training courses on the prevention and early detection of gender violence have taken place in the health sector, social services, elder homes and security forces.

Moreover, an important effort of training has been made regarding judges, public prosecutors, secretaries and other professionals working in the field of justice. Bar associations are also under the obligation to offer specialized training courses that include gender violence issues to future lawyers. Such training shall in all cases focus on the victims' vulnerability.

Finally, another important element of prevention is the introduction of tests on the gender violence legislation in the programmes of civil service entry exams.

There are also activities on gender equality and early prevention of gender violence aimed at professors. A series of initiatives aimed at raising awareness among the educational community on gender violence and the development of non-sexist didactic materials have also taken place.

12.4 Target group

In the absence of any comprehensive legislation on this phenomenon, one should refer to the legislation dealing with domestic violence. Pursuant to Act 27/2003, the target groups are the "victims of domestic violence", i.e. the persons mentioned in the articles 153 and 173 of the Criminal Code. Generally speaking, one could say that the victims of domestic violence are usually identified as women, children, and 'especially vulnerable persons'. Conversely, men are generally referred to as perpetrators.

Victims

Concretely, pursuant to Article 173(2) of the Criminal Code, which deals with 'regular' domestic violence, the victims of domestic violence may be the following:

- The spouse or *de facto* partner, the former partner or spouse, including the partner not living with the offender.
- The descendants, ascendants or biological, adopted or fostered siblings, including those of the spouse or partner.
- Minors or persons lacking capacity who live with them, or who are subject to the parental rights, guardianship, care, foster care or safekeeping of the spouse or partner.
- Persons belonging to the core family unit in accordance with any other relationship.
- Especially vulnerable persons who are subject to custody or safekeeping in public or private centres.

The scope of application is therefore quite broad, as it envisages formal and informal relationships, as well as horizontal and vertical relationships.

It should be noted that there is much emphasis on women as victims of domestic violence in the Spanish legal order. In this regard, article 153 of the Criminal Code, which deals with bad treatments that are not 'regular', seems to grant a greater protection to women than to men. Article 153(1) refers to the female partner and the 'especially vulnerable persons' who live with the offender as victims, and punishes the offence with imprisonment sentences of six months to one year, among others. On the other hand, article 153(2) refers to the persons mentioned in article 173(2) as victims, but the sanctions are lower, the imprisonment sentences being of three months to one year. More importantly, the Organic Act 1/2004 on Comprehensive Protection Measures against Gender Violence clearly defends a position of protection of women, as victims of gender violence. Moreover, it seems that the denomination "gender violence" has tended to supplement that of "domestic violence" in the legislation and

⁵⁹ Ministerio de Sanidad, Servicios Sociales e Igualdad (2013). *National Strategic Plan for Childhood and Adolescence, 2013-2016*. Madrid. Available in Spanish at: www.observatoriodelainfancia.msssi.gob.es/documentos/PENIA_2013-2016.pdf (Last consultation: 15/03/2015).

policy over the last years. By way of example, there have not been recent strategies in the field of domestic violence, as they have been replaced by strategies and plans dealing with gender violence⁶⁰.

Some categories of women are recognised in the National Strategy for the Eradication of Gender Violence as groups of people particularly vulnerable to gender violence, namely, women with disability, elder women, women living in rural areas, or immigrant women.

Moreover, there is also a strong focus on children. The latter are referred to in many pieces of legislation dealing with domestic violence, including gender violence, and their specific protection is also enshrined in the civil legislation on minors. In this regard, children benefit from an extensive protection in civil matters, which binds all the public authorities, specialized institutions, the members of the family, as well as citizens in general⁶¹. It is worth noting that the presence of minors constitutes an aggravating circumstance in case of domestic violence.

Minors therefore benefit from a protection as direct and indirect victims of violence within the family. In this regard, Organic Act 1/2004 addresses their protection, not only to safeguard their rights as minors, but also to ensure the effectiveness of the protection measures granted to women. What is more, the National Strategy for the Eradication of Gender Violence also identifies them as particularly vulnerable to gender violence. Thus, exposure to gender violence and suffering from direct abuse are considered as the same phenomenon. The use of children as instruments of violence against women is also highlighted.

The case of the elderly is more complex. There is no specific offence relating to elder abuse as it is defined as one form of domestic violence in article 173(2) of the Criminal Code. In addition, one could think that the different references to the “especially vulnerable persons” living with the aggressor include the elderly, so that they actually benefit from a broad protection. This also highlights the fact that violence against ascendants remains an unknown phenomenon amongst the society.

Thus, it seems that Organic Act 1/2004 established three different levels of protection⁶². Firstly, women, as spouses, de facto partners, former spouses, and former *de facto* partners benefit from a maximal protection. Secondly, the remaining members of the family sharing the house with the aggressor, including descendants and ascendants, benefit from an intensified protection. Finally, the other persons that do not fall under these categories benefit from a normal protection.

Perpetrators

Even though the legislation on domestic violence envisages any member of the family as a possible abuser, it tends to characterize men as perpetrators, a situation which is also reflected in the statistics on domestic violence.

Finally, minors are not solely envisaged as victims, but also as perpetrators. In this regard, Memorandum 1/2010, which deals with juvenile proceedings in case of bad treatment perpetrated by minors against their ascendants, highlights the proliferation of this type of violence. It emphasizes the fact that perpetrators usually are male teenagers living in single-parent families, although it also acknowledges that the profile of minors as perpetrators is changing, as there is an increasing proportion of female perpetrators⁶³.

12.5 Gender perspective

The gender perspective is omnipresent in the Spanish legislation relating to violence within the family. The subjacent idea of the Spanish policy is that equality, respect for human dignity and civil liberties must be considered as priority objectives at all levels of socialisation. Gender violence is therefore considered as a manifestation of discrimination, inequality and gender relationships of power⁶⁴. In this regard, Organic Act 1/2004 clearly introduces the notion of gender equality as a requirement necessary

60 See, for example: National Strategy for the eradication of violence against women 2013-2016 (*Estrategia nacional para la erradicación de la violencia contra la mujer 2013-2016*). Available at: www.msssi.gob.es/ssi/violenciaGenero/EstrategiaNacional/pdf/EstrategiaNacionalCastellano.pdf (Last consultation: 15/03/2015).

61 Organic Act 1/1996, preamble.

62 GRACIA IBÁÑEZ J. (2012), “El maltrato familiar hacia las personas mayores. Un análisis sociojurídico”. *Prensas Universitarias de Zaragoza*. pp. 306-311.

63 Memorandum 1/2010, p. 2.

64 Organic Act 1/2004, art. 1.

for the eradication of gender violence. In particular, it establishes a framework of protection for victims of gender violence, thanks to a comprehensive, multidisciplinary perspective based on education and socialisation.

Firstly, the Organic Act reflects the idea that gender violence is not acceptable within the Spanish society and must be considered as a more serious crime than those where no intimate relationship exists, by making abuse against a female partner an aggravating circumstance in judicial proceedings. In this respect, new courts specifically trained to hear gender violence cases were created.

Secondly, it explicitly aims to challenge gender stereotypes. The Organic Act attempts to challenge the patriarchal system of interaction between men and women, put an end to the pathways of perpetration of gender-based violence, and enter into a new paradigm of identity and relationship that corresponds to modern democracies. To do so, it aims to provide new models of men and women. Pursuant to the National Awareness and Prevention Plan regarding violence against women, this change is made possible thanks to the concepts of citizenship, autonomy and empowerment.

In this respect, the Spanish policy explicitly addresses the issue of the role of women within the society, as it attempts to reinforce an image of women that respects their dignity and equality, in particular in the advertising world. In this regard, collaboration with media organizations is extensively addressed, and several measures are foreseen in the National Strategy for the Eradication of Gender Violence (2013-2016) in this regard. These include the elaboration of a textbook aimed at media professionals with recommendations on the adequate approach to present news on violence against women, the elaboration a code of advertising conduct that promotes the elimination of sexist and stereotypical content and promotes the prevention of violence against women, or the creation of awards for young journalists reporting on gender violence.

Special attention has been paid to the sports industry, traditionally considered as a manly environment. The Secretary General of Equality has organized several meetings to disseminate information about gender violence in this regard.

Another means to change the model of social relationships amongst men and women is through education, with the creation of programmes aiming to eradicate the intergenerational transmission of violence. Education is therefore based on human rights and includes several awareness and training programmes on gender violence, as well as on the notion of gender equality. In this regard, it should be noted that the gender perspective is also present in the protection of minors, as the latter are considered as indirect victims of gender-based violence⁶⁵ and are therefore included in the official statistics on gender-based violence.

In addition, the Ministry of Health promotes actions and programmes that foster educative models to prevent and eradicate violence through the concept of positive parenting.

Thirdly, Spanish legislation also includes measures to empower women, especially with regard to victims of gender violence. Pursuant to the National Awareness and Prevention Plan regarding violence against women, women empowerment is made possible only if the concept of masculinity, based on power, is reviewed.

In particular, Organic Act 1/2004 attempts to empower women by guaranteeing the employment conditions necessary to reconcile the contractual requirements with the special circumstances of workers or civil servants suffering from gender violence, and by guaranteeing women's economic rights in order to facilitate their social integration⁶⁶. By way of example, an awareness initiative involving the private sector (56 companies) has taken place in order to improve the insertion of victims into the labour market and to raise awareness amongst the public in general⁶⁷.

Finally, the gender perspective is perceptible regarding violence against the elderly insofar as elder women are recognized as a group more vulnerable to violence in the National Strategy for the Eradication of Violence against Women (2013-2016). The necessity to disseminate information and materials to the elderly and to give visibility to this phenomenon is acknowledged.

65 Ministerio de Sanidad, Servicios Sociales e Igualdad (2013). *National Strategic Plan for Childhood and Adolescence, 2013-2016*. Madrid. Available in Spanish at: www.observatoriodelainfancia.msssi.gob.es/documentos/PENIA_2013-2016.pdf (Last consultation: 15/03/2015).

66 Organic Act 1/2004, art. 2.

67 "Empresas por una sociedad libre de violencia de género" campaign. More information at: www.msssi.gob.es/ssi/violenciaGenero/Sensibilizacion/AMBITOEMPRESARIAL/home.htm (Last consultation: 15/03/2015).

12.6 Prevention of intergenerational violence: an interconnection between factors

Concerning children as victims of domestic violence in general, even though the policy and legislation on child abuse does not clearly identify risk factors, a study commissioned by the Ministry of Health provides some guidance⁶⁸. It focuses on different types of risk factors:

- Perpetrator: there are biological and psychological risk factors, including emotional (absence of empathy, problems of self-esteem, anxiety and negative feelings), cognitive (unmet expectations of the child and cognitive distortions) and behavioural factors (impulsive behaviour, difficulty to manage negative feelings, lack of communication and interaction with the child and high levels of expectations; drug and alcohol use).
- Victim: behavioural issues (such as hyperactivity), psychological issues, health issues, or disability are identified.
- Family environment: The following risk factors are highlighted: history of child abuse, existence of domestic violence amongst parents, broken families. Moreover, the neglecting and authoritative educative models constitute risk factors too.
- Sociocultural factors: the lack of social networks, labour instability, low level of education, precarious living conditions or low socio-economic status are identified.

In this regard, pursuant to Organic Act 1/1996, public authorities shall protect minors through the prevention and reparation of situations of risk by creating the appropriate services, custody or even guardianship arrangements, where necessary⁶⁹. It should be noted that citizens in general and professionals in particular shall inform the authorities about possible situations of risk or abandonment, without unnecessarily intervening in the child's life⁷⁰. In case of situation of risk that does not require the establishment of a guardianship, the public authorities' action shall guarantee the rights of the minor and aim to diminish the risk factors and social obstacles that affect the social and personal situation of the minor, as well as to promote the protective factors of the minor and their family⁷¹. Upon the assessment of the situation of risk, the competent public authority shall undertake the relevant actions to reduce it and monitor the evolution of the minor within the family⁷².

Moreover, the focus is not merely on women as victims of gender violence but is also shifting towards children as victims of gender violence. In this regard, pursuant to Organic Act 1/2004, the children of victims of gender violence shall benefit from a comprehensive social assistance in order to prevent situations where minors may suffer from psychological or physical abuse⁷³. In this respect, pursuant to a 2011 macro survey on gender violence, 64.9% of the women who have suffered from abuse had children when such violence occurred. When asked about whether minors suffered directly from situations of violence, 54.7% of women responded affirmatively, which corresponds to 6.2% of minors in Spain. Thus, one of the main objectives of the National Strategic Plan for Childhood and Adolescence is to provide visibility and protection to these children, hence their recognition as direct victims of gender violence in the bills on the protection of childhood and adolescence.

Furthermore, different documents refer to the risk of intergenerational transmission of violence in families where gender violence exists. In this regard, the National Strategy for the Eradication of Gender Violence underlines that gender violence can leave "emotional scars and lead to the repetition of this form of violence in the future, perpetuating this violent behaviour in society. Suffering direct or indirect gender violence generates all kinds of problems in minors, making it vitally important to provide them with assistance to help them in their recovery"⁷⁴.

Concerning minors as abusers, Memorandum 1/2010 emphasizes the need to resolve conflicts in the most educative manner and within the minor's environment. It encourages the development of pro-

68 Sanmartín Esplugues, J. (Dir.) (2011). *Maltrato Infantil en la familia en España - Informe del Centro Reina Sofía*. Madrid: Ministerio de Sanidad, Política Social e Igualdad. pp. 11-13.

69 Organic Act 1/1996, art. 12.

70 Ibid., art. 13.

71 Ibid., art. 17.

72 Ibid.

73 Organic Act 1/2004, art. 19(5).

74 National Strategy for the eradication of violence against women 2013-2016 (*Estrategia nacional para la erradicación de la violencia contra la mujer 2013-2016*), p. 84. Available at: www.msssi.gob.es/ssi/violenciaGenero/EstrategiaNacional/pdf/EstrategiaNacionalCastellano.pdf (Last consultation: 15/03/2015).

grammes implementing alternative measures to detention, which appear to be very effective with minors condemned on the grounds of bad treatment against their ascendants. It establishes a system of early detection of situations of gender violence and child abuse, with the collaboration of the educational, health, police and social institutions. Moreover, the National Strategic Plan for Childhood and Adolescence promotes the use of support programmes to families suffering from ascending abuse.

Regarding elder abuse, the Protocol of action in the health sector in case of gender violence identifies a series of risk factors regarding violence against elder women, namely:

- The existence of long-lasting abuse, alongside the development of feelings of defencelessness, incapacity and impotence impede the abused person to even consider alternatives to their situation.
- The increasing willingness of some men to better control the time spent by their wives upon retirement.
- Economic dependence; low income.
- The absence of witnesses or mediation upon the children's emancipation.
- The feeling of guilt if they leave their husbands.
- An increased home workload as a result of the return of children to their parents' house, sometimes with their own children.
- The necessity to provide care to their dependent or ill husbands.
- Illness or disability.

It should be noted that elder women are considered as one of the most vulnerable groups to domestic violence, as a result of the conjunction between ageing and gender inequality. In this regard, if there are some references to the need to provide protection to elder women, the gender perspective is not sufficiently taken into consideration in the studies on elder abuse⁷⁵. One important element of action is therefore to raise awareness, both amongst the society as a whole and amongst possible victims, as acknowledged by the future Statute of the Elderly and the National Strategy on the eradication of gender violence.

Against this background, the Spanish legislation and policy is based on different axis, especially education and communication. As explained above (point 3), the Spanish strategy takes place at all levels - societal, institutional, community or individual - and it pursues different goals, including:

- Raising awareness amongst the society through the organization of general and targeted campaigns, in order to break the silence and the circle of abuse.
- Challenging gender stereotypes, notably by collaborating with media organizations in order to fight against sexism and present a good image of women, and through education.
- Involving men and boys.
- Empowering women.
- Training adequately the professionals involved in the fight against domestic and gender violence to ensure that they properly address the needs of victim and to avoid re-victimization.

Concerning primary prevention, the Spanish legislation and policy focuses mainly on education. By educating boys and girls in the light of equality, they will acquire the knowledge and skills that will improve their personal autonomy and the existing relationships between men and women, and will eventually lead to the eradication of violence⁷⁶.

Concerning secondary and tertiary prevention⁷⁷, the ecological model of intervention applies. Besides understanding the causes of violence, it also emphasizes the need to act at different levels, including⁷⁸: combating individual risk factors; working on inter-personal relationships and attempt to create more healthy family environments; ensuring that public spaces do not increase the possibilities of violence; and combating gender inequality.

⁷⁵ Ibid.

⁷⁶ See: Federación Española de Municipios y Provincias (2007). *Guía para Sensibilizar y Prevenir desde las Entidades Locales la Violencia contra las Mujeres*. Madrid.

⁷⁷ It should be noted that secondary and tertiary prevention are largely dealt with by local authorities.

⁷⁸ See: Federación Española de Municipios y Provincias (2007). *Guía para Sensibilizar y Prevenir desde las Entidades Locales la Violencia contra las Mujeres*. Madrid.

12.7 Effectiveness of the current policies or laws

There are different institutions in charge of monitoring the correct application and effectiveness of the legislation on domestic and gender violence, namely the Government Delegation against Gender Violence⁷⁹ and the Observatory against Gender and Domestic Violence⁸⁰. The Government is under the obligation to present a report to the Parliament on the effectiveness of Organic Act 1/2004 three years upon its entry into force. In addition, the Childhood Observatory is responsible for the evaluation and monitoring of the actions plans and policies on child protection.

Regarding protection measures, the Ministry of Justice collects statistical data on a specific database, which are easily accessible to the general public through the annual reports of the Observatory on violence against Women⁸¹ and the publications of the Ministry of Justice on this matter. Concerning children, a register on child abuse (*Registro Único de Maltrato Infantil*) was created to collect data on child abuse throughout Spain; however, these data are provided at the Autonomous Community level, thus entailing problems of harmonization, and they are not automatically updated⁸².

It should be noted that while there are several evaluation studies on gender violence⁸³, no similar studies have been found concerning child abuse or elder abuse at national level. In this regard, the 2011 report on Child abuse within the family in Spain of the Queen Sofia Centre⁸⁴ does provide information on child abuse in general, but its data are insufficient and out-dated. In the same way, the conclusions of the evaluation of the first National Strategic Plan for Childhood and Adolescence (2006-2009) can be found on pp. 9-16 of the second National Strategic Plan for Children and Adolescents 2013-2016, but they do not provide many details about child abuse within the family. Besides, no evaluation studies of specific awareness campaigns have been found.

Generally speaking, it is reasonable to say that victims of domestic violence are well protected thanks to the current legislation in force. They have access to more information and resources to break the circle of violence, and benefit from social and economic rights⁸⁵.

Evaluation suggests that the implementation of the legislation on gender and domestic violence has resulted in greater social awareness. In this regard, a 2005 study highlights that 9 out of 10 Spaniards consider gender violence as a totally unacceptable phenomenon⁸⁶.

As emphasized by Hester and Lilley, “education and targeted training of professionals, social welfare support and extended rights for victims within the workplace have all contributed to an improved social awareness of the issue, empowering women to leave violent relationships, an increase in third party reporting including people close to the victim, and an understanding of gender-based violence as a common and social problem, rather than a personal or private matter”⁸⁷.

79 See: www.msssi.gob.es/ssi/violenciaGenero/DelegacionGobiernoVG/home.htm.

80 See: www.poderjudicial.es/cgpi/es/Temas/Violencia-domestica-y-de-genero/El-Observatorio-contra-la-violencia-domestica-y-de-genero.

81 See: <http://www.msssi.gob.es/ssi/violenciaGenero/ObservatorioEstatal/home.htm>.

82 Save the Children (2013). *De las palabras a los hechos. Informe de evaluación del cumplimiento de la Agenda de Infancia 2012-2015: Dos años después de las elecciones generales*, p. 7. Available at: www.savethechildren.es/ver_doc.php?id=174 (Last consultation: 29/03/2015).

83 Ministry of Health (2008). *Evaluación de la aplicación de la Ley Orgánica 1/2004 de 28 de diciembre. Medidas de protección contra la violencia de género*. Madrid. p. 3. Available at: www.msssi.gob.es/ssi/violenciaGenero/Documentacion/seguimientoEvaluacion/DOC/InformeTresLey.pdf (Last consultation: 15/03/2015); Ministry of Health (2009). *Informe de Evaluación del Plan Nacional de Sensibilización y Prevención de la Violencia de Género 2007-2008*. Madrid. Available at: www.msssi.gob.es/ssi/violenciaGenero/Documentacion/seguimientoEvaluacion/DOC/EjecucPlan.pdf (Last consultation: 15/03/2015); Ministry of Health (2013). *Actuación de las Comunidades Autónomas en cumplimiento de la Ley Orgánica 1/2004, de 28 de diciembre, de Medidas de Protección Integral contra la Violencia de Género*, Madrid. Available at: [www.msssi.gob.es/ca/ssi/violenciaGenero/Documentacion/seguimientoEvaluacion/DOC/ActuacionesCCAA\(2005-2012\).pdf](http://www.msssi.gob.es/ca/ssi/violenciaGenero/Documentacion/seguimientoEvaluacion/DOC/ActuacionesCCAA(2005-2012).pdf) (Last consultation: 15/03/2015).

84 Sanmartín Esplugues, J. (Dir.) (2011). *Maltrato Infantil en la familia en España - Informe del Centro Reina Sofía*. Madrid: Ministerio de Sanidad, Política Social e Igualdad.

85 Ministry of Health (2008). *Evaluación de la aplicación de la Ley Orgánica 1/2004 de 28 de diciembre. Medidas de protección contra la violencia de género*. Madrid. p. 3. Available at: www.msssi.gob.es/ssi/violenciaGenero/Documentacion/seguimientoEvaluacion/DOC/InformeTresLey.pdf (Last consultation: 15/03/2015).

86 Federación Española de Municipios y Provincias (2007). *Guía para Sensibilizar y Prevenir desde las Entidades Locales la Violencia contra las Mujeres*. Madrid. p. 40.

87 Hester, M., & Lilley, S.-J. (2014). *Preventing violence against women: article 12 of the Istanbul Convention – A collection of papers on the Council of Europe Convention on preventing and combating violence against women and domestic violence*. Council of Europe. p. 16.

Moreover, some key elements of the prevention policy appear to be quite successful. By way of example, the media can become important elements of prevention as a 2009 study has shown. Indeed, the probability of death as a result of gender violence is reduced by 10% upon the broadcast of news on political measures and actions undertaken on this matter⁸⁸.

However, a 2015 study based on the results of 2.500 interviews with persons between 15 and 29 years old also presents worrying data. Only 66% of the respondents consider that controlling women's lives is a form of gender violence that is totally unacceptable⁸⁹, thus demonstrating the need to focus efforts on less visible forms of violence as well. Moreover, this study highlights that the perception of gender inequalities is lower amongst the youth in comparison with the rest of the population.

In addition, it is worth mentioning the differences amongst women and men, as the former reject gender violence in a more important manner than the latter, thus emphasizing the need to involve more men and boys in the fight against this scourge, and to conduct more preventive measures in this sense.

Concerning elder abuse, some authors consider that the problem is not so much at the legal level, but rather at the awareness level, including in the judicial context⁹⁰.

12.8 Projects following the policy or law

A description of the projects. Are there any results available of evaluation studies? What makes these projects effective or promising? What are the key elements in the project? And how is the effectiveness interrelated with the gender perspective? What is the effect of this gendered approach? Are these projects present all over the country? Or only in specific regions? Are the projects structural or only temporary?

Many different projects have been conducted following the legislation on intergenerational violence. These projects normally involve governmental and non-governmental actors, and may take place at European, national, regional or local level.

In this regard, here are a few projects in order to prevent child abuse. These projects have all been conducted at least partially by FAPMI, the Federation of associations against child abuse:

- **PREMI:** Programme of prevention of child abuse.
This programme aims to raise awareness and prevent child abuse in all its forms. It mainly consists of two axes: 1) prevention initiatives in the education and family sectors, and 2) prevention initiatives in the health sector. To do so, special emphasis is put on the promotion of peaceful conflict resolution and early detection of abuse.
It involves two autonomous communities, namely Castile and Leon and Asturias.
- **PREVI:** Programme of prevention of sexism and violence among minors.
This programme aims to conduct awareness, prevention and empowerment activities both within the family and the educational community, in order to prevent and detect at an early stage this type of situations. It involved three autonomous communities, namely Murcia, Castile and Leon, and Cantabria.
- **Programme of family education and positive parenting.**
This programme follows three main axes: 1) actions to encourage the good treatment of minors; 2) actions to develop parenting skills; and 3) actions to develop parenting skills among groups at risk ('Cuidame' project). The two first sets of actions take place in Andalusia and Cantabria, while the third one takes place in Andalusia and Murcia.
- **Justice and childhood:** Recommendations and good practices to improve the attention to children and adolescents in the legal field.

88 Loro Redondo J. "Acciones de sensibilización, concienciación y prevención dirigidas a las mujeres mayores". In *Imsero* (2014). *Aspectos claves en la prevención del maltrato y la violencia de género hacia las mujeres mayores*, Jornadas de los 18 y 20/11/2014. p. 15.

89 Delegación del Gobierno para la Violencia de Género. (2015). *La percepción de la violencia de género en la adolescencia y la juventud. Informe realizado por Verónica de Miguel Luken*. Madrid: Ministerio de Sanidad, Servicios Sociales e Igualdad.

90 Gracia Ibáñez, J. (2012). *El maltrato familiar hacia las personas mayores. Un análisis sociojurídico*. Zaragoza: Pressas Universitarias de Zaragoza. p. 312.

This project started in 2009 and is present all over the country. It aims to a) guarantee that children and adolescents are not re-victimized when they are involved in judicial proceedings; b) provide information of both legal and psychosocial nature to the professionals who surround minors in the judicial process in order to offer the best possible care and prevent mistreatment caused by the functioning of the institution itself; c) influence decision makers in the field of minors and judicial administration; d) monitor the changes relating to the participation of minors in judicial proceedings and encourage opportunities for discussion and exchange of best practices.

It involved a large number of professionals and academics, and many of the proposals stemming from it are included in the above-mentioned bills on the protection of minors, such as the clarification of the concepts of risk, abandonment and parental authority, or the obligation to provide specialized training to all the professionals involved in the attention to minors who suffer from violence.

Another project regarding elder violence is especially worth mentioning: 'Stop violence against elder women!' (¡Stop a la violencia contra las mujeres mayores!). It is a Daphne-funded programme coordinated by the UNAF. It started in 2011 and ended in 2013. Upon the analysis of the situation in the different countries involved in the project (IT, PT, SL, FR, ES, and BG), some priority aspects were identified: the lack of knowledge about this phenomenon; the difficulty to recognize and intercept the different types of abuse in elder homes; the difficulty for the elderly to identify and talk about abuse; and the importance of community networks.

Among these projects, some clearly adopt a gender perspective. On the one hand, the PREVI and positive parenting programmes explicitly aim to challenge gender stereotypes, change the image of women in education, involve men in this process, and eventually promote gender equality in order to eradicate violence within the family.

On the other hand, the Daphne programme on violence against elder women also adopts a gender approach but from a different perspective, as it intends to raise awareness and give visibility to a phenomenon that remains largely unknown amongst the society. As emphasized by the authors of the project, the gender perspective of elder abuse is hardly analysed despite its importance to identify the specific aspects of ageing and the persisting gender inequalities⁹¹. As mentioned above, elder women are more vulnerable to violence within the family than elder men because they constitute the majority of the elderly and are one of the most vulnerable groups of the society.

12.9 Practical Information on specific projects

- a. PREMI: Programa de prevención del maltrato infantil.
- b. PREMI: Programme of prevention of child abuse
- c. Spain (Castilla y León; Asturias)
- d. FAPMI
- e. Contact information: fapmi@fapmi.es
- f. Website: www.fapmi.es/contenido1.asp?sec=25&pp=1
- g. Short description of the project: This programme aims to raise awareness and prevent child abuse in all its forms and focuses on the education, family and health sectors.
- h. PREVI: programa de prevención de la violencia entre iguales y de género en población infantil y juvenil.
- i. Programme of prevention of sexism and violence among minors
- j. Spain (Murcia Castile and Leon, and Cantabria)
- k. FAPMI
- l. Contact information: fapmi@fapmi.es
- m. Website: www.fapmi.es/contenido1.asp?sec=25&pp=1
- n. Short description of the project: This programme aims to conduct awareness, prevention and empowerment activities both within the family and the educational community.

⁹¹ <http://unaf.org/wp-content/uploads/2013/07/Dossier-Daphne.pdf>.

- a. Programa de educación familiar y de parentalidad positiva.
 - b. Programme of family education and positive parenting
 - c. Spain
 - d. Organisation: Ministry of Health; FAPMI
 - e. Contact information: fapmi@fapmi.es
 - f. Website: www.fapmi.es/contenido1.asp?sec=25&pp=1
 - g. Short description of the project: This programme aims to promote non-violence educative models within the family.
-
- a. Justicia e infancia: buenas prácticas y recomendaciones para la mejora de la atención a niños, niñas y adolescentes en el ámbito jurídico.
 - b. English Title: Justice and childhood: Recommendations and good practices to improve the attention to children and adolescents in the legal field.
 - c. Country (or even more specific: region): Spain
 - d. Organisation: FAPMI
 - e. Contact information: Tomás Aller Floreancig, Coordinator. Email: tomas.aller@fapmi.es
 - f. Website: www.fapmi.es/contenido1.asp?sec=52&pp=1
 - g. Short description of the project: This project aims to guarantee that children and adolescents are not re-victimized when they are involved in judicial proceedings.
-
- a. Stop a la violencia contra las mujeres mayores.
 - b. English Title: Stop violence against elderly women
 - c. Country (or even more specific: region): Spain, Italy, Portugal, Slovenia, France and Bulgaria.
 - d. Organisation: UNAF
 - e. Contact information: Carmen Sánchez Moro, sociologist and coordinator of the project. Email: carmensmoro@outlook.com
 - f. Website: <http://unaf.org/inicio/proyecto-europeo-daphne-stop-a-la-violencia-contra-las-mujeres-mayores/>
 - g. Short description of the project: This European project aims to stop violence against 65+ year-old women and raise awareness about this largely unknown phenomenon.

12.10 Sources:

Legislation

Spanish Constitution.

Criminal Code (*Ley Orgánica 10/1995, de 23 de noviembre, del Código Penal*, «BOE» núm. 281, de 24/11/1995.)

Civil Code.

Bill modifying the system of protection of childhood and adolescence (*Proyecto de ley de modificación del sistema de protección a la infancia y a la adolescencia*).

Bill of organic act modifying the system of protection of childhood and adolescence (*Proyecto de ley orgánica de modificación del sistema de protección a la infancia y a la adolescencia*).

Ministerio de Sanidad, Servicios sociales e Igualdad (2014). *Propuestas para el desarrollo de las orientaciones del Consejo de la UEm de 6 de diciembre de 2012, relativas a las personas mayores*.

Memorandum 1/2010 (*Circular 1/2010 sobre el tratamiento desde el sistema de justicia juvenil de los malos tratos de los menores contra sus ascendientes*).

Organic Act 8/2006, of 4 December, on the criminal responsibility of minors (*Ley Orgánica 8/2006, de 4 de diciembre, por la que se modifica la Ley Orgánica 5/2000, de 12 de enero, reguladora de la responsabilidad penal de los menores*).

Act 39/2006, of 15 December, promoting personal autonomy and assistance of dependent people (*Ley 39/2006, de 14 de diciembre, de promoción de la autonomía personal y atención a las personas en situación de dependencia*).

Organic Act 1/2004 of 28 December on Comprehensive Protection Measures against Gender Violence (*Ley orgánica 1/2004 de medidas de protección integral contra la violencia de género*).

Organic Act 11/2003, of 29 September, on concrete measures in the field of citizen security, domestic violence and the social integration of foreigners (*Ley orgánica 11/2003, de 29 de septiembre, de medidas concretas en materia de seguridad ciudadana, violencia doméstica e integración social de los extranjeros*).

Act 27/2003, of 31 July, on the Protection Order for victims of domestic violence (*Ley 27/2003, de 31 de Julio, reguladora de la Orden de protección de las víctimas de violencia doméstica*).

Organic Act 1/1996, of 15 January, on the legal protection of minors, amending the Civil Code (*Ley orgánica 1/1996, de 15 de enero, de protección jurídica del menor, de modificación parcial del código civil y de la ley de enjuiciamiento civil*).

National Strategy for the eradication of violence against women 2013-2016 (*Estrategia nacional para la erradicación de la violencia contra la mujer 2013-2016*). Available at: www.msssi.gob.es/ssi/violencia-Genero/EstrategiaNacional/pdf/EstrategiaNacionalCastellano.pdf.

Ministerio de Sanidad, Servicios Sociales e Igualdad (2013). *National Strategic Plan for Childhood and Adolescence, 2013-2016*. Madrid. Available in Spanish at: www.observatoriodelainfancia.msssi.gob.es/documentos/PENIA_2013-2016.pdf (Last consultation: 15/03/2015).

Protocol for health action in case of gender violence (*Protocolo común para la actuación sanitaria ante la Violencia de Género. 2012*).

Protocol for the Establishment of the Protection Order for Victims of Domestic Violence (*Protocolo para la implantación de la orden de protección de las víctimas de violencia*).

Coordinated protocol between the criminal and civil judicial orders for victims of domestic violence (*Protocolo de coordinación entre los órdenes jurisdiccionales penal y civil para la protección de las víctimas de violencia doméstica*).

Action Protocol of Coordination and Security Bodies and Forces with Judiciary Organisms for the protection of victims of domestic and gender-based violence (*Protocolo de actuación de las fuerzas y cuerpos de seguridad y de coordinación con los órganos judiciales para la protección de las víctimas de violencia doméstica y de género*).

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Geweld in het gezin is anno 2016 nog steeds een ernstig en veelvoorkomend probleem. Geweld kan van generatie op generatie worden overgedragen. Hoe kan dit worden voorkomen, welke preventiepraktijken zijn veelbelovend in het terugdringen van geweld in gezinnen en wat kunnen we leren van praktijken in het buitenland? Dat waren de belangrijkste vragen van dit verkennende onderzoek naar veelbelovende preventiepraktijken in Nederland en Europa. We hebben preventieprojecten op verschillende niveaus onderzocht: primaire (voorkomen in het algemeen), secundaire (activiteiten gericht op risicogroepen) en tertiaire preventie (voorkomen van herhaling). We hebben dit vertaald naar drie domeinen, namelijk het gezin, jongeren en gemeenschap. Om effectief te kunnen zijn, dient een project of interventie beschermende factoren te vergroten en risicofactoren te verminderen op individueel niveau, micro en mesoniveau. Daarnaast hangt de effectiviteit van preventieprojecten af van de aanwezigheid van verschillende werkzame elementen, zoals onderbouwing en kwaliteit van uitvoering, relevantie voor betrokkenen en variatie in methoden, duurzaamheid en de relatie tussen de professional en cliënt. Voor zowel beschermende en risicofactoren als werkzame elementen van een interventie gelden dat gender een rol speelt. In de analyse van de preventiepraktijken kijken we daarom naar beschermende en risicofactoren, de werkzame factoren en genderverschillen. In het rapport worden per domein verschillende Nederlandse en buitenlandse projecten beschreven en geanalyseerd op effectiviteit.

