

MARVOW

Multi-Agency Responses to Violence against Women

Workstream 2/D2.2: Report on multi-agency
approaches to working with perpetrators

REPORT PRODUCED BY FRANCESCA
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1. Background

Multi-Agency Responses to Violence Against of Older Women (MARVOW) is a 2-year project which began in 2019. MARVOW builds on a previous project, WHOSEFVA (Working with Healthcare Organisations to Support Elderly Female Victims of Abuse), which highlighted the fact that practitioners were unsure how to proceed when it came to elderly victims of abuse. Older victims fall into a gap between intimate partner violence (IPV) and elder abuse, which means that abuse against elderly women is one of the most underdeveloped aspects of support services against gender-based violence in Europe. This project therefore aims to break the cycle of violence and improve responses.

Furthermore, a survey conducted by UK-based domestic violence service SafeLives¹ highlighted the fact that victims aged 61+ “are much more likely to experience abuse from an adult family member or current intimate partner than those 60 and under”. In addition to this, the study shows that older victims are less likely to attempt to leave their partners than those aged 60 and under. Finally, the study found that elderly victims are significantly more likely to have a disability than those aged 60 and under.

All of these reasons highlight the need for a specialised approach to working with elderly victims of domestic violence. However, as previous projects/research, as well as research for this report, have shown, this area of support is underdeveloped, despite the fact that service providers are aware of issues which makes working with elderly perpetrators harder.

The European Network for Work with Perpetrators (WWP EN)² unites over 50 organisations across Europe in the fight against gender-based violence (GBV) and supports them in offering responsible, victim-focused perpetrator work. Its members include perpetrator programmes, researchers and victim support services. For this report, WWP EN conducted interviews with member organisations to learn about their responses and practices when working with perpetrators of violence against elderly women.

Together with other project partners, WWP EN is working on the MARVOW project towards a new multi-agency approach to work with elderly perpetrators. Practical work for the MARVOW project will take place in three European countries: Greece, Estonia and Austria.

The importance of multi-agency approaches was highlighted by the WHOSEFVA project³, with 95% of participants in Mutual Learning Workshops agreeing that multi-agency cooperation was one of the most important issues when working with elderly women.

¹ <http://www.safelives.org.uk/spotlight-1-older-people-and-domestic-abuse>

² At the time of writing, WWP EN has 58 member organisations from 31 European countries.

³ WHOSEFVA Evaluation Report: http://whosefva-gbv.eu/images/NEW/Evaluation_Report_Final_Version_42.pdf

Furthermore, the importance of multi-agency cooperation is highlighted in Article 7 of the Istanbul Convention:

Article 7 – Comprehensive and co-ordinated policies

1. Parties shall take the necessary legislative and other measures to adopt and implement State-wide effective, comprehensive and co-ordinated policies encompassing all relevant measures to prevent and combat all forms of violence covered by the scope of this Convention and offer a holistic response to violence against women.
2. Parties shall ensure that policies referred to in paragraph 1 place the rights of the victim at the centre of all measures and are implemented by way of effective co-operation among all relevant agencies, institutions and organisations.
3. Measures taken pursuant to this article shall involve, where appropriate, all relevant actors, such as government agencies, the national, regional and local parliaments and authorities, national human rights institutions and civil society organisations.

Figure 1: Article 7 of the Istanbul Convention

Additionally, part 2 of Article 15 reinforces the concept of multi-agency cooperation when providing services:

Article 15 – Training of professionals

2. Parties shall encourage that the training referred to in paragraph 1 includes training on co-ordinated multi-agency co-operation to allow for a comprehensive and appropriate handling of referrals in cases of violence covered by the scope of this Convention

Figure 2: Article 15 of the Istanbul Convention

2. Implementation

Due to the nature of the report, it was decided that WWP EN would conduct personal interviews with respondents who worked with perpetrators of violence against elderly victims in some capacity. This allowed us to gain a deeper insight into the work and practices of the organisations and allowed organisations to expand on questions/answers where necessary or appropriate.

In order to get in touch with people from WWP EN's member organisations, two rounds of emails were sent out. In November 2019, members were contacted as part of a general member's email and were asked to get in touch if they worked with perpetrators of violence against elderly women. The first round of emails was sent out to 149 contacts and was opened by an average of 74 people. From this, only one organisation got in touch proactively to state that they worked with perpetrators of this type of violence. In December 2019, a second round of emails was sent out to all of WWP EN's 58 member organisations. The email included two questions, one of them relating to our work on the MARVOW project.

From this round of emails, 6 people got in contact to let us know that they worked with perpetrators of violence against elderly women in some capacity.

Overall, WWP EN received responses from 7 member organisations, so around 12.1%, from a total of 6 different countries (see Graphic 1).

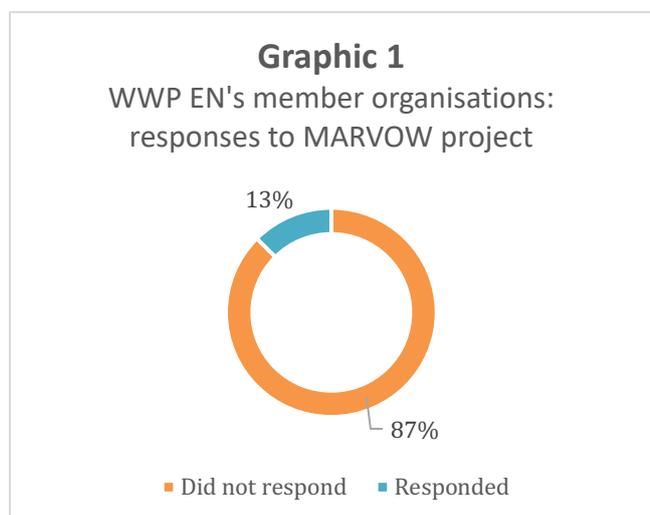
Once member organisations had responded, they were sent personalised emails in December 2019 inviting them to participate in a short skype interview. Participants were sent a list of questions beforehand, to allow them time to think about their answers.

Additionally, WWP EN got in touch with umbrella organisations from Spain, Germany and the UK. From this, one more interview was set up with a non-member organisation from the UK.

As well as the research carried out for this report specifically, two previous reports from WWP EN were used to discuss/compare the results obtained in this research:

- The 2016 Mapping Report
- The 2017 Best Practices Report

These reports are less focused on the topic of elderly domestic violence, however they contain much more data and had a much higher rate of response. Additionally, they cover a wider range of European countries and, thus, they contain more data and figures which complement the information gathered for this report. They are freely accessible on WWP EN's website: <https://www.work-with-perpetrators.eu/resources/reports/working-group-reports>



Graphic 1: Response from WWP EN's member organisations

3. Questions/points of discussion sent to participants

Below (Figure 3) are the questions and points of discussion sent to/asked to participants for the MARVOW report:

Age:

- Which organisations or agencies do you work with when serving older victims/perpetrators of violence against older victims?
- What percentage of your clients are over the age of 60?
 - Perpetrators
 - Victims
- What is different about your work with perpetrators of elderly violence?
- Are there any special methods you use with perpetrators of elderly violence?
 - Different ways to ensure security of victims?
 - The separation of the perpetrator from the victim in these cases?
 - Economic dependence between perpetrator and victim?
- Do you have a special programme/do you change the programme when working with perpetrators of elderly violence?
 - Does your approach change if the abuser is a son as opposed to a husband/partner?
- Any specific observations about working with perpetrators when the perpetrator or victim is elderly?

Multi-agency:

- Do you engage in case-conferencing about specific clients (of any age) with other agencies?
 - If so, which ones?
- What other methods do you use to ensure multi-agency cooperation in your community? (for any age of victim)
- Do you believe that other agencies agree with your organization's approach towards assessing risk factors for victims?

Based on your experience, are there any other questions/points you think are important in relation to this work?

Figure 3: Questions sent to participants

4. Participants

Association NAIA, Bulgaria:

- Association "NAIA" is an NGO from Targovishte, Bulgaria. NAIA provides programmes for the support of victims of domestic violence, programmes for the work with perpetrators of domestic violence and programmes for the prevention of violence.

DNK - Association for nonviolent communication, Slovenia:

- The Society for Non-violent Communication is a non-governmental, non-profit and humanitarian organisation that deals with the prevention of violence in society and the spread of the principles of non-violent communication. The organisation is the first NGO to offer a program of work for those who cause violence.

Men's Development Network, Ireland

- The Men's Development Network is a non-profit organisation that works with men on various levels including one-to-one, developmental, parenting, behaviour change group work, training, phone line support and awareness-raising. The Network runs various projects including Men's Development Programme, Men's Health Programme, MEND Domestic Violence Intervention Programme, Men's Advice Line and Men's Counselling Service.

MyCWA, UK (not a WWP EN member organisation):

- MyCWA are a feminist organisation and whole family service who provide emotional, personal and practical support and advice to those affected by domestic violence. Additionally, they run a 24-hour helpline for those affected by domestic abuse. They are a member of WWP EN's member organisation, Respect UK. As well as running perpetrator programmes, they are a victim-support service.

MVU - Reception Against Domestic Violence Uppsala, Sweden:

- MVU is a non-profit organisation that works in different ways to prevent violence in close relationship. They primarily work with perpetrators of violence or coercive controlling behaviour in close relationships. MVU's work also includes help and support for relatives. MVU is also active in research, knowledge-exchange and trainings for stakeholders.

U.Z.O.R. Family Assistance Association Rijeka, Croatia:

- U.Z.O.R. is an NGO from Rijeka, Croatia. Established in 2007, it provides both counselling and shelter for women in secure locations and works with perpetrators of domestic violence. U.Z.O.R. was one of the first organisations in Croatia to work with perpetrators.

Woman to Woman, Albania:

- Woman to Woman (WtW) works in the field of protection of human rights, focusing on the rights of women and girls. In 2014, WtW established the Counselling Centre for Men and Boys (ZDB) to contribute to the reduction of domestic violence and safety of the victims by offering specialised services to perpetrators.

Countries represented in the interviews

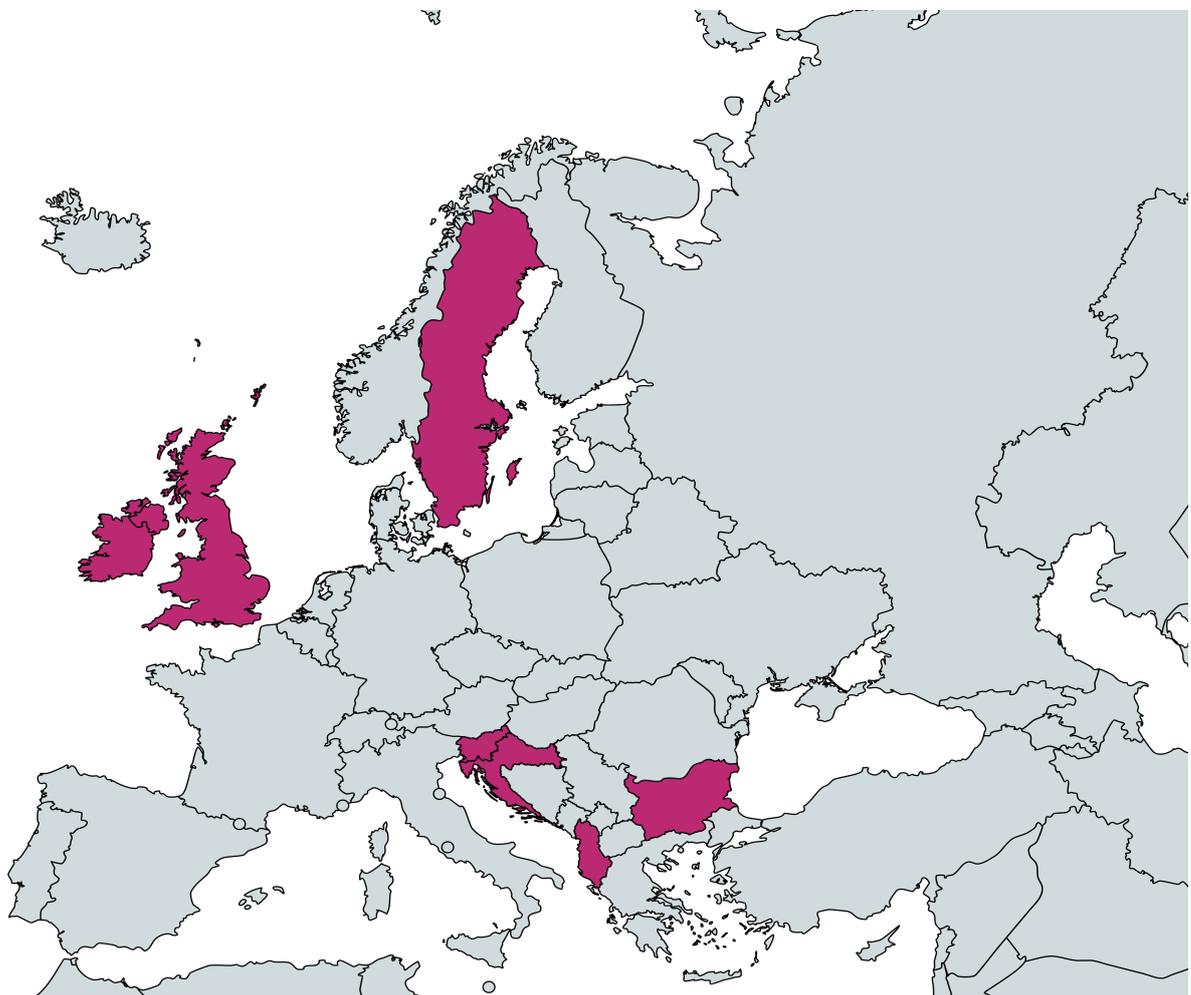


Figure 4: Countries represented in the interviews

5. Results

Gaining exact statistics for work with elderly perpetrators/perpetrators of violence against elderly women was hard because most of the organisations asked do not record these figures explicitly.

Additionally, **U.Z.O.R.** define “elderly” as 65+ and therefore collect statistics accordingly, whereas for the purposes of this project, elderly is defined as 60+.

Number of elderly perpetrators and victims per each respondent

Organisation	Perpetrators	Victims
Association NAIA	20% of perpetrators abuse parents/grandparents 10% of perpetrators are 60+	40% of victims are 60+
DNK	10%	10%
Men’s Development Network	No more than 5% (but they do not collect these statistics specifically).	-
MyCWA	<ul style="list-style-type: none"> 3% (out of 90 perpetrators). 	Less than 5% victims (out of around 900 victims).
MVU	3%	-
U.Z.O.R.	Between 10-15% are 65+	15% of victims are 65+
Woman to Woman	4 cases in 2019: <ul style="list-style-type: none"> 3 from elderly home 1 from the court 	2/3% of cases with victim support are women 60+

Table 1: Numbers of elderly perpetrators and victims per each respondent

I. Perpetrator programmes

Out of all 7 organisations interviewed, only one mentioned a **specific programme developed for older perpetrators**:

- Due to the nature of the perpetrators and how they were referred, **Woman to Woman** developed a special programme for elderly perpetrators in cooperation with the elderly home.

All other organisations mentioned either a **slight informal change** to the programme, or **no change at all**:

- **U.Z.O.R.** and **MVU** mentioned that such a programme had never been developed.

- **Men's Development Network** mentioned that there is no pre-prepared agenda for this specific type of perpetrator, but that particular attention is paid to the needs and situation by the partner support workers, especially in cases where the perpetrator is the son. It is also important to mention that the **Men's Development Network** take these cases [where the abuser is the son] on a case-by-case basis. The two that they have taken on, however, have worked out well.
- **MyCWA** also do not have a specific programme for older perpetrators, rather they have two programmes in general – one for those under 25 and one for those over 25. After 25, the programme does not change according to age.
- **Association NAIA** mentioned that although they don't have a specialised programme per se, they do change the content of the first (of 24 programme sessions) when the perpetrator is elderly. This first session is then focused on family roles.
- **DNK** also mentioned that the programme changes if the perpetrator is a son or if the perpetrator is a partner, but not due to the age of the victim, rather due to the nature of the relationship. In this case, if the son is the abuser, they work individually as group sessions focus on intimate partner violence and sons are not in an intimate relationship with the mothers.

II. Case-conferencing

The consensus from two participants (**MyCWA, DNK**) was that they attend every case-conference they were invited to. In the past quarter, **MyCWA had attended 100% of the conferences they had been invited to**. They mentioned, however, that they are **not invited to all case conferences** and are not always taken seriously by adult social care services.

Additionally, MyCWA noted **many different agencies/actors** with whom they participate in case conferences:

- Mental health services
- Adult social care
- Drug and alcohol services
- Health services (if the person has chronic condition)

Amongst other participants, no one mentioned that they regularly attended case conferences:

- **U.Z.O.R.** said that they attend conferences rarely, **only when the risk is exceptional**. In routine cases, however, they don't speak to the police or the social centre.
- **MVU** said that they attended case-conferences only with social care and no other actors voluntarily.
- **Association NAIA** mentioned that sometimes the police or social services come to a weekly meeting they hold, but that they do not conference about specific cases.

III. Multi-agency cooperation

Participants were asked to expand on their multi-agency cooperation:

- Whilst they didn't mention any multi-agency cooperation at the present time, **U.Z.O.R.** mentioned that they had recently become leader of the national team for multi-agency cooperation, so they expected changes in the future.

Three organisations mentioned **further multi-agency cooperation**:

- **Association NAIA's multi-agency cooperation** was the strongest and most entrenched in the programme. They have a unique situation as the **perpetrator programmes are run at police stations, or property insured by the police**, meaning there is a strong cooperation between the programmes and the police force.
- A further example of multi-agency cooperation came from **DNK**, who noted that they **exchange information with the centre for social work for every case via phone**. They also send an "info for victims" to the centre and ask them to make contacts for victims.
- **MyCWA** highlighted the importance of **multi-agency cooperation between perpetrator programmes and victim-support services**:
 - *"In 2012, the women who we work with started to tell us that they needed us to work with perpetrators. It was important to them that the agency who worked with them understood the victim"*
 - They also noted that they **cooperate more with adult social care** in the cases of elderly perpetrators and victims, due to the **complex issues** that can arise:
 - *"What we find is that for older couples, the dynamics are more complex. [The relationship] can feature a caring responsibility as well, in either direction, [as well as] either a perpetrator or a victim who has Alzheimer's or dementia, which also complicates things. For that reason we work closely with adult social care."*
 - Finally, they also noted the importance they place on multi-agency responses: *"if it's a multi-agency situation, then our goal is to support a multi-agency support plan that we all work to"*.

During interviews for this report, participants mentioned a number of **different agencies** who referred the perpetrators:

- Both **U.Z.O.R. and Association NAIA** mentioned referrals by the **court**.
- Both **MyCWA and DNK** mentioned referrals by **social care/social work**.
- **Woman to Woman's** referrals come from **the elderly home**, which is unique as their programme was developed in cooperation with the home as a result of the violence perpetrated there.

IV. Risk-assessment

When asked in this round of interviews, every organisation thought that other agencies **agreed with their approach for assessing risk factors for victims:**

- The method used by **Men’s Development Network** is used a lot in the UK and Ireland and is also used by the probation service.
- **U.Z.O.R.** noted that the police take them seriously in their risk assessment and if they are worried about a case, the police tend to want to know.
- **MyCWA** noted that they are seen as experts and that other professionals come to them for information. In addition to this, they provide regular training and performance workshops to educate people in the field. They do note, however, that a lot is **based on existing relationships:**
 - *“Other professionals look to us to lead the assessments of risk around domestic abuse [...] but that isn’t consistent and can depend on personalities and existing relationships”*
- In the case of **Association NAIA**, they stated that if they didn’t do the risk assessment, then the police don’t – their risk assessment is just done by them, an NGO. They thought however that it would be useful for police officers and the social department to do a risk assessment after the programme was finished.

V. Observations

Participants were asked if they had any observations specific to working with perpetrators of violence against elderly women, or perpetrators who were older themselves. Three organisations highlighted **different values/beliefs or a long-standing history which makes change hard:**

- **Men’s Development Network** mentioned a sense **that a certain dynamic has established itself over time** and that gender roles are entrenched/stuck. Additionally, it was mentioned that behaviour of this group of perpetrators is linked strongly with **traditional male stereotypes** and **stereotypes about gender roles/the roles between men and women in Ireland:**
 - *“The older men [often have] issues which, because of their age, are linked to particular male stereotypes. They may not be violent or abusive, but they may be controlling, [...] they’d obviously be men born in the 50s or 60s in Ireland, and they may have had very particular attitudes: the woman’s place is in the home, I am the breadwinner”*
 - **Men’s Development Network** also note how **deconstructing these ideas is very challenging.** As well as this, they have to deal with **how this work affects the men emotionally** and if the men are able to identify their own emotions and vulnerabilities.

- **MyCWA mentioned a long relationship history** which needs to be taken into account and considered when working with this group of perpetrators. Additionally, they noted that **behaviours are more entrenched** and there are **generational issues** which need to be taken into account, as well as the fact that it is **difficult for people of this age group to be open to change**.
- **DNK noted that perpetrators of elderly violence have more deep-rooted traditional beliefs and values about the family**. Additionally, they noted that **talking about gender equality to the perpetrators is not relevant** as they have different values to younger people (in the group programme). They mentioned an emphasis on **mutual respect** and an emphasis on **authority**.

Additionally, organisations mentioned **concerns due to old age and whether both parties are fully present**:

- **Men’s Development Network:** *“There might need to be a very clear [...] sense of whether both people are fully present [...] and have full capacity [to make the choices they are making]”*
- **U.Z.O.R.** mentioned that they **tend to downplay the programme** for elderly perpetrators and have lower expectations, as sometimes they are **bordering on dementia** and it is hard to work with them (but sometimes something changes).

Interestingly, MyCWA recounted how they had conducted research and found that there was **a gap in attracting elderly victims/perpetrators for their programme**. They found that it wasn’t the case that the elderly victims/perpetrators weren’t there, more that the **publicity was not aimed at engaging them and did not invite that demographic**.

They therefore **produced new publicity** targeted at this audience and have seen an increase in elderly people using their services since this. Additionally, they **highlighted the importance of stories/portrayals of the subject in popular culture**: in 2016, there was an influx of older victims and this was linked to the storyline on a popular radio programme whose demographic was more elderly women.



Figure 5: Publicity aimed at an older demographic. Produced by MyCWA, UK.

Two participants also mentioned the **presence of alcohol abuse** as a factor to consider when working with older perpetrators:

- **DNK** said that *“if [the perpetrators] had problems with alcoholism in the past, the consequences can be worse and irreversible. If this is an added problem, it is more difficult to work on violence”*.
- **U.Z.O.R.** also mentioned the presence of alcohol abuse as a factor to consider, especially when older men are long-term alcohol abusers and have personality disorders caused by this long-term abuse.

Another factor mentioned was the **living arrangements** of the perpetrators and victims, which seem to be more complicated than with younger couples:

- **MVU** said that *“most of [the perpetrators and victims] live together and wish to continue”*
- **Men’s Development Network** mentioned one case where the husband had another house through inheritance and therefore left the home easily at the request of the women. However, he was the caregiver and therefore returned to the house to cook for her and look after her.
- **Woman to Woman** mentioned that they put more of a focus on shelter for the women than rehabilitation. In the case with the court-referred perpetrator, they also had to think about shelter for the man (who was around 70), as there was a protection order. Conversely, when dealing with younger perpetrators who are violent towards their mothers, **WtW** noticed that mothers generally don’t ask for a protection order against their sons:
 - *“The mothers usually don’t ask for a protection order, they are only asking for a place to stay, or for services which respond to the needs they have”*

VI. Recommendations

All participants were asked if they had any recommendations for a new multi-agency approach to working with perpetrators of violence against elderly women. There was a general consensus that **working with this perpetrator group requires more resources**:

- For **MyCWA**, it is important to be able to say that there is no time limit (whether it is 5 years or 10 years, which has been the case for them at least twice) in which to achieve the change. Additionally:
 - *“The level of change required by both the victim and the perpetrator is overwhelming and terrifying and most services aren’t set up to be able to invest the level of time and support that is required to create the kind of change that is needed”*
- For **Association NAIA**, it is important/necessary to follow up on relations after the programme, but they don’t have the structures in place to do this at the moment.

- For **DNK**, it is important for the perpetrators to connect more with their local environment and work with these people (e.g. mayors, councillors, pastors, doctors). There is a sense that seniors listen to the advice of these people and accept their opinions. Additionally, DNK mentioned that a greater involvement with intergenerational centres, as well as further training of these employees about violence and workshops with the elderly about violence would help.
- For **Woman to Woman**, there was a sense that working with the elderly requires a lot of resources and that in Albania, resources and support are lacking from the state side. Whilst perpetrators and victims need shelter, provisions for health, food and medicine, *“the state does not provide anything and their pensions are very low”*.

The importance of **cooperation with other actors** was also emphasised:

- For **Men’s Development Network**, some sort of mediation for the couple based on their specific situation would be one way to improve the work with this group of perpetrators:
 - *“It might have been helpful... and it’s something that we have never done... for somebody [...] to sit down with the couple and say: this is what’s happened, you’ve obviously decided to spend the rest of your years together, can we work together? [...]. There needs to be an approach that takes into consideration that these people are likely to stay together until one of them dies”*
- For **U.Z.O.R.**, psychiatrists would be important due to the prevalence of psychiatric problems caused by alcohol and/or dementia. Additionally, **cooperation with adult children** was seen as a huge important factor in working with this group of perpetrators as they can help a lot.
- For **DNK**, it would make sense to liaise with health services to allow doctors to issue referrals for inclusion in a perpetrator programme. Additionally, closer cooperation with organisations working in the field of alcohol addiction was seen as important.

6. Previous reports

I. Multiagency cooperation

WWP EN has produced two previous reports on best practices of member organisations.

The 2016 Mapping Report highlighted the **importance of cooperation between perpetrator programmes and victim support services**. Member organisations stated the reasons for communication/cooperation:

- Joint planning
- Regular case review
- Case review when needed
- Other

“Joint planning (6) and regular case reviews (8) were the most popular forms of communication, with case reviews when needed the next (4). Only 1 respondent stated that there was no communication. “Other” included: “Occasional non structured communication” and “The local victim support service is quite new, so the cooperation is still in the making”” (WWP EN Mapping Report, page 16)

Figure 7: Quote from WWP EN Mapping Report

In the 2017 Report on Member Organisations’ Good Practice in Victim Safety, (Ex)Partner Support and Partnerships, 4 out of 15 responding organisations highlighted **multiagency cooperation** as a guiding principle for their work (p. 7).

Additionally, **Association NAIA** (who also participated in interviews for this report) highlighted “the importance of inter-sectoral/multiagency cooperation, especially when it comes to children’s safety” (p. 16).

Another important factor highlighted in the 2017 survey was the **partnership between women’s services and programmes for perpetrators**. 4 out of 15 respondents stated that this was one of their guiding principles (p. 7-8).

II. Referrals

In the 2016 Mapping Report, 6 out of 16 respondents stated that the perpetrator was referred to them by an agency.

Respondents to the 2017 survey also highlighted **partnership between women's services and programmes for perpetrators** as one of the most important principles in addressing

7. Conclusions

Our interviews and research have shown that support for elderly women who experience violence is severely underdeveloped. Out of the 7 organisations interviewed, only one had a specific programme dedicated to working with perpetrators of violence against elderly women/older perpetrators. Even this was developed as a reaction to the nature of the perpetrators (referrals from the elderly home). Whilst organisations mentioned slight informal changes or alterations they make to perpetrator programme, it has also become clear from the research conducted that working with the elderly requires more resources and time.

The importance of multi-agency responses to violence was further highlighted during these interviews, as well as in both of WWP EN's previous reports, with organisations stating the need for extra resources and services which could help when working with perpetrators (and especially elder perpetrators).

Participants also noted many issues which make working with older perpetrators harder, namely:

- Issues with alcohol abuse, personality disorders caused by this
- Problems caused by dementia
- A difference in attitudes, entrenched views, generational differences
- Longstanding patterns of abuse and control

As well as this added layer of complications, participants noted various other resources which are/could be needed when working with elderly perpetrators:

- Shelter (either for the man or the woman)
- Mediation
- Psychiatric services
- Health services
- Organisations working in the field of alcohol addiction

Only one of the participating organisations mentioned a change in the programme when the perpetrator himself is not elderly, but the woman is. This change in the programme is also only due to the fact that the perpetrator is not in an intimate relationship with his mother and the rest of the perpetrator programmes are focused on IPV. This further confirms the fact that elderly women victims fall into the gap between IPV and elderly abuse and that perpetrator programmes do not really have special measures in place to work with sons who abuse their mothers. Research also showed that whilst many of the organisations have experience



working with perpetrators of violence against elderly women when the perpetrator is also elderly, they did not really mention children who abuse their mothers.

Furthermore, a common theme during the interviews was a sense that the violence between elderly couples can not be stopped completely/that organisations have lower expectations when it comes to this stopping completely. This could be down to a number of factors, including those already mentioned which make working with elderly perpetrators harder.

It is clear that in order to tackle violence against elderly women, a detailed and intricate multi-agency approach is needed. As well as this, the age-specific circumstances, as well as age-specific problems, need to be taken into account in order for the perpetrator programme to work for both the perpetrator and the victim.