



European
Network

NATIONAL REPORT GUIDELINE

Country: [Czech Republic](#)

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1) **Organisation/programme** (max 3000 characters)

- Do you conduct any programme(s) for the domestic violence perpetrators at the moment? If yes, please describe it/them briefly. If not, please explain why

[We conduct the program "Stop violence in relationships". The SOS centre is the primary crisis centre. In the past we often met victims of domestic violence \(DV\) in our crisis centre. Victims were seeking help but many of them did not want to leave their partners \(perpetrators\). There were also some aggressive people looking for help. They behaved aggressively to their children or partners and wanted to change their behaviour because they did not want to lose their family. So this is when we decided to start a program for perpetrators. In the beginning, we offered them either individual or couple therapy. The people entering the program were mostly those who came voluntarily. After several months, when the amount of people increased, we started group therapy. This group is half open, and led by a pair of therapists. The members of the group meet regularly once a week for 2.5 hours and we recommend that members should stay in the group for 1 year. At that time, we preferred group therapy, because it seems more effective than individual therapy as clients tend to complete the group program. And also, this therapy costs less money. We offer temporary individual therapy to people who are afraid of the confrontation in the group. Couple therapy is recommended mostly as a supplement to group therapy. This therapy](#)

offers a place where the couple can solve their communication problems. We do not recommend it in cases of severe home violence.

- What type of (other) activities regarding preventing domestic violence have you conducted within last four years?
 - We are trying to bring forward the idea, both to experts and the public, that working with perpetrators is an important part of the protection of victims. We have taken part in several radio broadcasts and a television company made a short film about our perpetrators program (you can see this film, with English subtitles, during the conference). We have also provided some preventative programs in secondary schools, where we offered to the students various concepts and theories of aggression; we also discussed the dangers of a relationship with an aggressive partner and gave clues and signs to the students which can help identify an unhealthy partnership.
- What would you define as your most significant success regarding violence prevention within the last four years?
- The biggest success for us is the formation of the therapy group of perpetrators. Another success is that we began to cooperate with other organizations (Probation and Mediation service, legal department of child protection, police) which are sending us clients.
- What would you define as the biggest obstacles/challenges regarding violence prevention in your organization within the last four years?

At the beginning, there was a lot of misunderstanding and distrust, mostly among people from organizations working with victims. Most of them did not believe that there was any possibility that perpetrators could change their behaviour and they did not believe that there could be other solutions other than victims completely severing the relationship or leaving their family.

A big challenge for us is to learn how to motivate people who come to us “involuntarily” from the court system.

Another obstacle for our organization is lack of financial support. When we started this program, we had some support from the government Ministry of Interior. But this support did not last long (four years) so now we have problems finding other sources of money for the therapy group or for supervision.

2) **Country** (max 1800 characters)

- The overview of general situation in your country regarding work with perpetrators (e.g. what has change in your country legislation within the last 4 years? Most important legal and policy measures implementation; in which way they helped?)

The issue of DV has been dealt with by the social work system in the Czech Republic for many years. In the last few years DV has been talked about more for 2 reasons: because in 2004 a new offence of maltreatment of a person living in a common home was implemented in the criminal law, and because in 2007 a legal provision allowing banishment of a

perpetrator from their home was introduced. What has especially stuck in peoples' minds is the option of banishing the perpetrator from their home and the establishment of intervention centres helping victims. On 1 January 2010 the new Criminal Code came into force, which essentially took over the definitions of offences from the previous legislation, but with the introduction of the new crime of Stalking. Implementation of orders banishing people from their home has led people naturally to think about the further question of what subsequently happens to perpetrators of DV.

Help to perpetrators of DV has itself been topical since 2009, when The Ministry of Interior announced a program to support work with perpetrators. This support lasted for four years, up to the end of 2012. Meanwhile the government created the National Action Plan (NAP) for the Prevention of DV for the period 2011-2014, which is the first government program to mention the need to work with perpetrators.

NAP is one of the first steps in building up infrastructure to address this issue.

The main goal of the NAP and the proposed measures and actions relates both to work with perpetrators and to proposed legislation, particularly to legislative measures concerning the voluntary or compulsory participation of violent persons in therapeutic or rehabilitation programs.

These ideas are still only a plan; in practice no concrete changes have come through.

- Do you know any other organizations/programmes in your country which deal with domestic violence prevention mostly by work with perpetrators? If yes please point them out

ADRA, a psychotherapeutic centre: "Work with aggression in the framework of therapy" (Hradec Králové)

Centrum J. J. Pestalozziho, o. p. s., a crisis centre (Chrudim)

Centrum nové naděje: "Prevention of Partnership Violence" (Frýdek-Místek)

VIOLA - an information and advisory centre for men and women who have conflict relationships with close people

Social Services Centre Ostrava, a crisis centre for children and family: "Programme focused on handling aggression in relationships and in a family" (Ostrava).

Persefona: "Safe coexistence - therapy for perpetrators of domestic violence - a new challenge"(Brno).

Centre for Family and Interpersonal Relations and a helpline "A psychological and psychotherapeutically programme for perpetrators of domestic violence and their victims" (České Budějovice)

3) **Best practices** (max 1800 characters)

- Point out the best practices in work with perpetrators existing in your organization/country

The best practices in our work with perpetrators in our organisation are the group therapy and the couple therapy:

The group offers their members:

1/ encouragement to admit their faults and to take responsibility for their behaviour

2/ to share their feelings about behaving in a violent way

3/ ideas and ways how to change their aggressive behaviour

4/ positive models from people who have already managed to change their behaviour

5/ support during difficult situations in relationships (divorce, inability to access children...)

6/ understanding of the roots of their aggressive behaviour

The couple therapy offers couples who are not able to communicate without blaming each other:

1/ understanding of their inflexible methods of communication

2/ ways to change their methods of communication

- Can they be implemented in other organizations/countries? If yes – how? If no – why?

I believe that the group and the couple therapy can be implemented in other organizations.

4) **Needs and recommendations** (max 1800 characters)

- What has to be done in regard to prevent domestic violence in your country (mostly regarding to work with perpetrators)?
- Point out the most urgent, most important and most promising tasks and steps that should be focused on

A systematic conceptual approach should contribute to the expansion of services for the victim and also the implementation of treatment programs for perpetrators of DV. There is a need to improve the legislative framework on these issues and to obtain adequate financial support for centres that work with perpetrators.

There is a plan on these points, but it exists only on paper.

The perpetrator himself is by his own actions in a challenging situation, and after the intervention of public authorities this situation is going to be even more problematic. The authorities must therefore also provide him with psychological intervention and other potential assistance and support, if needed.

There should be a network of counselling centres which can work with perpetrators and corresponding standards and recommendations of best practice. This work should ensure interdisciplinary cooperation in order to share information and experience among stakeholders, attempt to eliminate barriers of mistrust and prejudice that make it difficult to deal with cases of domestic violence and also provide feedback between institutions. In terms of public opinion, what is required is to use every available means to break down entrenched social stereotypes, particularly in terms of condemnation and punishment for DV.

DV has always been viewed in the Czech Republic as a socially pathological phenomenon in which one person (the offender) mentally or physically abuses another person – their partner (the victim). Our experience shows that in many cases domestic violence is rooted in mutual aggression and conditional pathological interactions between the partners. This fact makes it necessary to change the strategy for assistance – paying more attention to communication between the partners, looking at what provokes aggressive feelings between the partners in both directions and working on the big challenge of how you can change such ingrained dysfunctional mechanisms. In promoting these aims, we have proved to be very successful with our therapeutic group of perpetrators, which is unique in the Czech Republic.