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National Report 2017

The Netherlands



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Report Details

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Organisation

What types of activities related to preventing domestic violence has/have your organisation/s carried out in the last three years?

Movisie has contributed to the plan for a nationwide infrastructure for a multidisciplinary approach to complex violence problems, in close collaboration with the initiators of the initiatives already developed within the Netherlands concerning the multidisciplinary approach to complex problems, child abuse, domestic and sexual violence.

What do we mean by Multidisciplinary Approach++ (in the Netherlands called MDA++?

With the MDA ++ we mean an intersectoral, multidisciplinary, system-oriented, coordinated and integrated approach from one team. That means:

Intersectoral: cooperation between the various sectors, that is the safety chain (including the police, the Public Prosecution Service and the Child Care and Protection Board), the emergency services and the medical care (including general practitioner and hospital)

Multidisciplinary: collaboration between professionals with different professions such as the general practitioner, psychotherapist, police, public prosecutor, youth psychiatrist, behavior expert and social worker.

System-oriented: the offer is family oriented, the family system as a whole is seen as a client, both help to children and adults and to victims, perpetrators and other parties involved. The goal is to help the family to regain balance and control.

Coordinated: there is a case manager or care coordinator who is the permanent contact person for the client system.

Integral: the approach focuses on all forms of violence in the family; both on child abuse and on domestic and sexual violence. The aid is coordinated and offered jointly.

What would you define as the biggest obstacles/challenges regarding violence prevention to your organisation/s? Please focus on the last three years.

• Current aid offer is not sufficient:

Studies in the Netherlands (2013 and 2014) show that the joint responsibility for families in which serious and complex violence problems occur has not yet led to the desired results







(including the decrease in fatalities, the decrease in recidivism and an effective integrated system-based family approach).

For most acute (once-only) violent cases, Veilig Thuis and / or a social neighbourhood team can provide sufficient support to restore safety and prevent further escalation. However, if there is serious violence where, for example, medical and psychological care is required and forensic investigation is desirable, these organizations must be able to fall back on specialists. This also applies to serious, complex and structural violent cases with a high risk of recurrence and / or escalation. Safe Home and the social neighbourhood teams cannot provide the desired sustainable safety for these families. This requires additional effort, expertise and a specialist approach.

The current cooperation between the care and safety chain still shows too many problems in cases with serious, acute violence and / or complex and structural violence, for example:

- Chain collaboration and 'overall' direction is unclear Everyone is responsible for their own part within the chain and therefore there is insufficient insight into all the family members involved and the dynamics of violence within the family. No one within the chain feels responsible for the whole or has sufficient insight into the underlying and often present very complex problems.
- **The cooperation is delayed** the various interventions are coordinated, but they work too much or next to each other, with each organization having its own work process. The focus of the various organizations is still too much on the individual client. Everyone's responsibility is often not part of the broader support plan for safety and recovery for the entire family system.
- Insufficient coordination between the civil and criminal law approaches These often function as two separate systems, as a result of which measures are not or hardly attuned to each other.

Country

Please give an overview of general situation in your country regarding work with perpetrators. Regarding the approach of domestic violence and the role of the perpetrators, the Netherlands have a general focus on working with the victims of domestic violence and their families, including perpetrators. An approach in which safety always comes first, but also an approach with interventions focusing on the social context of the family and the environment, working with all family members, including the perpetrators towards an integrated family plan.







Perpetrators are always accountable for their behaviour, but they are also in many cases fathers and role models for their children. To break the circle of repeated violence through many years, you have to change the behaviour of perpetrators of domestic violence.

Victims don't always want to end their relations, they want that the violence stops. Currently, organisations working in the field of domestic violence, like support centres as Safe Home and women organisations have this focus.

<u>Please give an overview of your country's criminal and civil responses to domestic violence,</u> <u>especially any changes within the last 3 years. (i.e. what are the most important legal and policy</u> <u>measures and how have they been implemented?)</u>

The last 3 years there's no significant change of legislation regarding the response to domestic violence. The last major civil response is the restraining order for perpetrators of domestic violence and child abuse. Within this civil response order, the major of the municipality is responsible for the restraining order, which can be mandated by the major to the police. The restraining order is issued for 20 days and can be extended to a maximum of 28 days. Violation of the restraining order is an criminal offense and the perpetrator can be arrested.

An important policy measure within the last years is the vision in the Netherlands that we should focus on an integrated and system orientated chain approach of domestic violence, sexual violence and child abuse together. Not considering these topics as individual, but in a more holistic view. Often these topics occur in families together. In families were domestic violence is happening, often there's, in case there are children, also child abuse and visa versa. Dynamics are comparable and often the same organisations are involved in the support systems. This integrated approach led to the Dutch organisation 'Veilig Thuis' (translated into English Safe Home). An organisation in which the Domestic Violence Support Centres and Advice and Support Centres Child Abuse are integrated into one organisation. Another important measure is the development of the Centres Sexual Violence, called CSG. These centres are primarily developed for victims of all kinds of sexual violence (not only in the family) in order to provide all necessary provisions for victims (legal, physical health care, mental health care e.a.)







As mentioned above, another major policy measure is the implementation of the MDA++ (multidisciplinary approach in cases of immediate or structural unsafe domestic violence/child abuse cases.

<u>Please tell us the progress your country has made in relation to Istanbul Convention (particularly</u> <u>Article 16 on work with perpetrators of domestic and sexual violence/abuse).</u>

The Dutch government ratified the Istanbul convention and acknowledges the work with perpetrators. As mentioned earlier, the approach is family orientated and focusing on all members of the family, including perpetrators. Important within this approach is that safety for the victims and their children always comes first and that perpetrators are held accountable for their behaviour. The core principle in the Netherlands is currently a risk-orientated approach: first working on safety for the victim (and children) and then working on risk focused (or orientated) approach.

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Do you know any other organisations/programmes in your country that carry out domestic violence perpetrator work? If yes, please detail them.

Several organisations in the Netherlands are working with perpetrators of domestic violence, some active in the mental health care provision in particular other as part of the family (treatment) plan.

Examples of particular organisations are De Waag (Utrecht) and Dok.







Best practice:

Tell us about best practice in work with perpetrators in your country.

Because as mentioned under 7 more organisantions are involved in working with perpetrators it's difficult to mention a best practice. The last large review was done in 2010 by Movisie.

• Perpetrator treatment by De Waag (Utrecht): Systemic therapeutic approach for victim and perpetrator

Offender assistance Utrecht is a module of De Waag, centre for ambulatory forensic psychiatry of the Henri van der Hoeven Foundation in Utrecht. The approach involves working closely with the Utrecht police during the registration and motivation phase. The treatment is tailored to the client and consists of intake interviews, individual therapy, group therapy and / or partner therapy. In the course of the project, the approach has shifted from a two-track policy, in which the victim and the perpetrator follow a separate trajectory, to a system-therapeutic approach, in which a joint trajectory is used at an early stage. Motivation strategies play an important role in this.

Vision / starting points:

To stop relational violence, it is necessary to offer perpetrator assistance, in parallel with a victim assistance program. The treatment is based on a system therapeutic approach. Target Termination of the violence by getting the perpetrators to accept an aid offer. Target audience In the first instance, perpetrators of domestic violence and, if both partners want to maintain the relationship, their partners. It concerns perpetrators of both native and immigrant descent.

Needs and recommendations:-

What needs to be done in order to prevent domestic violence in your country (regarding work with perpetrators)?

The general approach is already focusing on also working with perpetrators.

What are the most important tasks and steps that you feel should be focused on in your country in order to tackle domestic violence on a general level?

More deeply development of the multidisciplinary approach.

What does the multidisciplinary approach deliver?

If for these two groups of victims mentioned above a good and accessible multidisciplinary approach would exist, then all those involved would have an advantage.

The victims of acute and chronic (sexual) violence:







They have an interest in a facility where the necessary expertise is available, where institutions and professionals work together, where they do not have to repeat their story more than necessary and where they have one permanent contact person who coordinates the care. The sooner and better the right help, the more limited the damage and the risks of trauma. The sooner victims can pick up the thread of their lives with regard to family life, school and education.

Families in which child abuse and / or structural insecurity (often in combination with other problems such as psychiatric, addiction and / or financial problems):

Multidisciplinary, intersectoral and system-oriented aid to victims, perpetrators and other parties involved can lead to sustainable improvement in different areas of life, and structurally break the circle of violence.

Municipalities:

Within a multidisciplinary, cross-sectoral approach, institutions work integrally from the first report with the starting point for choosing the right approach, light assistance where possible and specialized help and, if necessary, criminal law where necessary. If the right help is offered immediately after acute violence, you reduce the risk of victims developing traumas or becoming victims again and then requiring intensive, heavier and longer help later on. A multidisciplinary approach can also reduce the chance that victims or families repeatedly ask help from different authorities (assistance, care, police) without any substantial and structural improvement in their situation. In addition to the benefits for residents, from a cost perspective for municipalities it is of great importance to organize the approach in an inter-sectoral and multidisciplinary way.

Professionals:

A multidisciplinary intersectoral collaboration ensures that professionals have direct and structural contact with all relevant sectors, so that their approach is more effective, resultoriented and sustainable. Instead of separate relief chains, there is 1 aid network for domestic violence, sexual violence and child abuse. Result: shorter lines, more knowledge about and confidence in each other's working methods, avoidance of unnecessary work and a saving on consultation time.



