

**MIND**  
THE GAP!

**IMPROVING  
INTERVENTION IN  
INTIMATE PARTNER VIOLENCE  
AGAINST OLDER WOMEN**

**Intimate partner violence  
against older women**

**Police training module**

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# **Intimate partner violence against older women**

## **Police training module**

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# INTRODUCTION

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This training module deals with the subject of 'intimate partner violence against older women' in general and the challenges and demands on the police in dealing with it in particular. Accordingly, we will present basic information on the subject in the **first part**, while the **second part** deals with specific demands on the executive in these interventions.

The **function of this training** is on the one hand to impart knowledge on 'intimate partner violence against older women' relevant to the police, and on the other had to offer participants a chance to address the issue.

For the **didactic implementation** of this module, we chose the methods of lecture, discussion, small group work and two specific exercises (of reflection). This training takes a total of four hours and involves nine steps. Adaptation is possible, you will find relevant suggestions in the 'information for police practice'.

## Trainers & participants

The trainers are acknowledged experts on the issue of violence. Ideally, this training will be carried out by a team of two, with one member from the executive and one from violence prevention work.

As this training presupposes existing knowledge of and experience in interventions in the context of 'intimate partner violence against women', participating makes sense only for executive officers with relevant expertise, i.e. for example violence prevention officers or senior citizens commissioners, ...

## Setting

The number of participants should be no less than six and no more than 15. A circle of chairs (without tables) has proved a satisfactory setting.

## Room requirements

We need a large room with sufficient space for a circle of chairs and exercises as well as a second room for group work.

# THE TRAINING MODULE

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The training module is conceived to last four hours and involves a total of nine steps. Whether all content will actually be managed within four hours depends – as usual – strongly on the previous knowledge of the participants and their eagerness to discuss.

Below, we will describe each of the nine steps in chronological order. At the end of the description, you will find – in boxes – didactic hints on the implementation or the aim of the step, as well as room requirements and necessary material and preparation. You will find a short presentation of the sequence in the annex on page 17.

## 1. Greeting and introduction of the trainers

## 2. Introduction of the participants

The participants will introduce themselves with

- their name,
- their function or work within the executive, and
- information on their experience in interventions in intimate partner violence against women or intimate partner violence against older women

*With the latter, the question is not the content but the approximate number of operations conducted. This should give the trainers an idea of the existing expertise on the issue and especially illustrate to the participants that there are differences in interventions in intimate partner violence against women as opposed to older women: Typically, the participants already have a lot of experience with such interventions, experience with older women, however, is – comparatively – limited.*

### **Room requirements or necessary material/preparations:**

Circle of chairs  
Name tags

### 3. Organisation, sequence and function of the training

**Organisation matters**, like breaks, participation certificates, ... and the **sequence of the seminar** need to be formulated according to the given conditions. You will find the sequence of this module – as a short presentation – in the annex on page 17.

The **function of this training** is on the one hand to impart knowledge on 'intimate partner violence against older women' relevant to the police, and on the other hand to offer participants a chance to address the issue on a personal level. Both – theoretical knowledge and (individual) reflection – mark the attitude which also or especially in police work is of great importance. To improve one's own attitude is a necessary and ongoing process that is never complete. This training aims to contribute to this.

*The participants can acquire knowledge via the presented content (definition, forms of violence, research results, ...). Individual confrontation with the issue may occur within the framework of exercises or possibly also the (small group) discussions.*

#### **Room requirements or necessary material/preparations:**

- Circle of chairs
- Flip chart or beamer in order to present the agenda
- Short version of module sequence

### 4. Constellation or sociometric exercise on the issue of intimate partner violence against (older) women

„We would now like to invite you to an exercise and therefore ask you to get up and walk to the markings on the floor. The exercise is called Constellation or Sociometric Exercise and aims to obtain their opinions on a specific subject from a group of individuals. Thus we will read a few sentences to you and terminate each with the question: 'Do you think this is violence?' You will please think about your answer and then stand next to the marker 'Yes', 'No' or '??'. '??' means 'I don't know', 'Maybe' or 'You might see it both ways'. The important thing is that you consider your answer and then position yourself according to your opinion. This exercise is no test, which means that in the end, there is no judgement of 'right' and 'wrong'. Is everything understood so far, or are there any questions?"

- Mr Maier gives his wife a black eye. Is that violence, 'yes' or 'no'?
- Mr Ivanovic boxes his wife's ears. Is that violence, 'yes' or 'no'?
- Mr Gruber doesn't talk to his wife for a week when she doesn't sleep with him. Is that violence, 'yes' or 'no'?

- Mr and Ms Akkilic have a family bank account which only he can access. Is that violence, 'yes' or 'no'?
- Mr Bauer dresses his wife who needs care in her already soiled clothes every day, because she will make a mess anyway. Is that violence, 'yes' or 'no'?
- You will find the list of sentences – as a template for copying – repeated in the annex on page 18.

*When everyone has positioned themselves according to their answer after the first sentence, individuals will be asked about 'why' they did so, i.e. 'Why are you standing here?' The answers to these questions, however, will not be evaluated or commented on, but only noted. If discussions should arise amongst the participants, feel free to allow them, such an exchange of views and opinions can be an important contribution to reflecting one's own attitude. Afterwards, read the next sentence, ask individual participants for the 'why', allow discussion as it happens, and continue with the next sentence, ... Here it is important that you – as a trainer – do not evaluate or judge, but keep to the role of a moderator.*

*The sequence of sentences assumes that in the beginning, positions will be relatively clear, and the variety of opinions amongst participants will become more apparent later.*

*If participants enquire how the sentence has to be understood exactly – participants often wish for more clarity – answer that unfortunately you do not have any more information, either.*

*The answers to questions that remain open at the end of this exercise in most cases become clear in the course of the training based on content and/or discussions.*

*The **aim of this exercise** is to gain more insight into specific forms and expressions of violence and one's own position towards them. This becomes possible through being required to state one's own opinion and to think about reasons for it, and also through assessments/discussions/comments of others.*

### **Room requirements and necessary material/ preparation:**

Free space within the room for the exercise

Tape and permanent marker or one A4 sheet each with 'Yes', 'No' and '??'

List of sentences

Mark the floor with paper/tape at one end of the room with 'Yes', at the other with 'No' and in between both position with '??', i.e. in such a way:

YES

??

NO

## 5. Theory

This theoretical input includes basics on the issue of intimate partner violence against (older) women, and is divided into the segments 'Definitions of Intimate Partner Violence against (Older) Women' and 'Forms of Intimate Partner Violence against (Older) Women'.

There is a number of different definitions of violence in general and intimate partner violence in particular. Some define violence along the relevant elements of an offence in the criminal code, others also include – beyond these – non-punishable forms of violence, and still others refer back to the causes of violence; some argue from the victim's point of view, others from the perpetrator's.



None of the existing definitions takes all aspects of violence into account. When addressing the phenomenon of violence, however, it is necessary to first clarify what it is we are speaking about and what we actually refer to. Below, there are three different definitions, each of which approaches the issue of violence from a different angle:

### 1. The **definition of violence** in general and intimate partner violence against women in particular **from the perspective of criminal law**

The criminal code lists all actions that are legally punishable in Austria. Based on this framework, we might say: all acts of violence covered by the criminal code are violence, everything that is not punishable therefore is not violence. The dividing line is thus furnished by criminal law.

This definition, however, does not suffice to illustrate the diverse dimensions and effects of intimate partner violence. Therefore, we need to add a supplemental definition.

### 2. **Johan Galtung's definition from the victim's perspective**

Peace researcher Johan Galtung coined the following wording: "Violence is present when human beings are being influenced so that their actual somatic and mental realizations are below their potential realizations."<sup>1</sup>

This definition is characterised by not defining violence in absolute terms (as criminal law does), but chooses a subjective approach. Violence has many characteristics, dimensions and forms, and is experienced differently by each individual. This definition is about the reduction and withdrawal of life chances through violence. Galtung thus explains and describes the phenomenon of violence from the victim's perspective.

Knowing this definition may increase our understanding for victims of violence, as it clarifies the situation of affected individuals.

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<sup>1</sup> Galtung, J.: "Structural and Direct Violence: Note on Operationalization," in *Peace: Research Education Action. Essays in Peace Research Vol. I* Copenhagen, 1975, 110–111.

### 3. The definition of violence against women from the gender perspective

A UN declaration illustrates this approach:

„Violence against women is a manifestation of historically unequal power relations between men and women, which have led to domination over and discrimination against women by men and to the prevention of the full advancement of women, and that violence against women is one of the crucial social mechanisms by which women are forced into a subordinate position compared with men.“<sup>2</sup>

This definition explains gender-based violence with unequal relations of power between men and women.

Different approaches for an understanding of intimate partner violence against women from different perspectives may help to understand the origin of violence. The three definitions presented above position themselves according to aspects worth considering; however, they only represent a selection of current definitions.

*Didactically, we chose the method of a lecture with the support of a PowerPoint presentation and following optional discussion. The length of this theoretical input largely depends on the prior knowledge of the participants. If they have already looked into definitions of violence, this step can be seen as revision or brush-up. If those definitions are however still unknown, then you will need to deal and discuss this more in-depth, and it will take longer accordingly. You may take a closer look at one definition and only mention the other(s) shortly, or add more definitions in order to explain the theoretical background.*

*You must ask whether all terms of the definitions are clear or clarify terms like e.g. somatic from the start. Often a discussion fails due to a lack of understanding of the words that are used.*

*The **aim of this input** is to deal with this issue more in-depth on a theoretical level, to get to know different typical perspectives and to test them, and also to gain basic knowledge on intimate partner violence against (older) women.*

#### Room requirements and necessary material/preparation:

Circle of chairs  
Beamer and laptop computer  
PowerPoint presentation

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<sup>2</sup>United Nations Declaration on the elimination of violence against women 1993

Besides a clarification of terms, knowledge of the **forms of intimate partner violence** is necessary, too. This issue is dealt with in the following section:

We may distinguish five forms of intimate partner violence, and it is important to know each of them in order to interpret the behaviour of victims respectively perpetrators as 'correctly' as possible, and to deliberately ask specific questions. Especially when the police is **not** called in because of domestic violence, these might lead to evidence of violence.

In addition to the four types of intimate partner violence in general, older women are subject to a fifth one, namely neglect. This concerns older women who are cared for and nursed by their intimate partners.

Below, we list the five types of violence with examples.<sup>3</sup> The order in which they are listed does not imply any statement on the gravity of violence, as each of these forms may be felt to be an extreme strain, depending on the duration, pre-history, social environment etc. The experience of violence is thus subjective and subject to the influence of a number of elements.

#### **a. Psychological or emotional violence**

This form of violence refers to e.g.

- Threats like 'I'll kill you', 'Just wait and see', ...
- Verbal abuse/insults like 'Whore', 'Bitch', 'Dumbo', ...
- Being made fun of, laughing at blunders
- 'Punishment' by silence



BUT ALSO:

- Use or removal of personal items without asking
- Control and permanent supervision – every step of the woman is traced
- Isolation from other people, e.g. by locking away the phone or taking away the keys to the house/apartment
- Imprisonment by being locked in

and with older women or women in need of care, psychological violence also means e.g.:

- Restriction of mobility because 'something might happen'
- Sorting out of clothes or personal items without consultation or
- Denial of favourite foods or drinks

As you may infer from these examples, the characteristics of psychological violence are manifold. The first part of this list contains characteristics of verbal violence, which many

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<sup>3</sup> cf: Gewalt erkennen. Fragen und Antworten zu Gewalt an älteren Menschen, eine Broschüre des Bundesministeriums für Arbeit, Soziales und Konsumentenschutz, Wien 2012 (4<sup>th</sup> edition); [http://www.bmask.gv.at/cms/site/attachments/3/2/0/CH2275/CMS1314805959138/gewalt\\_erkennen\\_druck\\_2012.pdf](http://www.bmask.gv.at/cms/site/attachments/3/2/0/CH2275/CMS1314805959138/gewalt_erkennen_druck_2012.pdf)

understand as the only form of psychological violence, while the following parts indicate the broad spectrum of psychological violence. Psychological violence is the most current form of abuse. However, as many individuals – including victims of violence – do not rate such actions as violent, there often is no reaction to them.

Knowing the spectrum of psychological violence in any case helps in formulating suitable questions and is important for the appraisal of whether someone is subjected to violence or not.

### **b. Physical violence**

For most people, physical violence is clearly recognisable as abuse. In the context of an intimate relationship, it covers all forms of physical pain consciously inflicted by the partner, which may lead to injury and, in the worst case, death.

When a woman is in need of care and is nursed by her partner, further dimensions of physical intimate partner violence may occur, such as:

- Violent pulling of hair when brushing it
- Violent pressing down into a chair or bed
- Tying to a chair or bed
- Administering of food in larger than bite-size portions, or too cold or too hot
- Hasty or impatient administering of food and drink, or also
- Unauthorized overdosing of tranquilizers



### **c. Sexual violence**

Sexual violence is a form of abuse which is subject to a strong social taboo. This fact and the shame of affected individuals makes many women remain silent, which means that we may expect a high number of unreported cases.

Sexual violence comprises all forced sexual acts against the woman's will and ranges from sexual assault to rape (vaginal, anal, oral).

Sexual violence however also means sexual harassment. The spectrum of abuse is broad: sexual innuendo or acts like touching intimate parts of the body, but also suggestive conversations or jokes, showing pornographic images/films or appraisal/fixing of a woman with looks.

Signs of sexual violence in the context of nursing is unnecessary contact on the part of the nursing person or the person in need of care, e.g. unnecessary touching of intimate parts of the body or violation of someone's intimacy by attending to personal care while the doors remain open.

#### **d. Financial or economical violence**

This form of violence means

- Taking self-earned money/her own pension or care allowance, so the woman cannot dispose of it any more, or
- With only one income/one pension in the relationship, not getting any money for her own needs
- Taking away or use as a matter of course of valuables
- Forging the signature or
- Termination of a savings account or the apartment without consent

Because of their physical or mental impairment, women in need of care may experience this form of intimate partner violence to a larger extent than healthy women.

#### **e. Neglect**

This form of violence may occur on a physical as well as a psychological level. In the context of intimate relationships, it is especially relevant for older women who are partially or generally nursed and cared for by their partner. Characteristics of neglect, which may, in the worst case, result in death, are:

- Insufficient personal care
- Administration of mashed food in order to save time
- Failure to instruct drinking
- Trivialization of health problems and curtailment of medical care
- Wrong or insufficient administration of medications
- Inadequate wound treatment
- Use of incontinence products instead of help with going to the toilet
- Restriction of the living space to chair and bed
- Leaving by herself
- Silence etc.

Intimate partner violence usually does not only manifest itself in only one but several forms. Thus, physical and sexual violence always involve psychological violence. Sexual violence often coincides with physical violence, and emotional violence may be paired with e.g. financial exploitation. Some forms of neglect have to be counted as physical and psychological violence.

*Here, we used – just as in the previous chapter – the method of a lecture with supporting PowerPoint presentation followed by optional discussion. Some forms of violence with their expressions, like e.g. physical violence, are usually well known, others cause amazement and surprise because of their diversity and distinctiveness. The latter is particularly true for psychological violence and its expressions. Therefore, take your time when listing the different forms and expressions of violence: Participants often comment that they had not thought of a lot of things beforehand, and it had only become clear to them now – after the lecture or the exemplary listing – what may be or have been clues of violence.*

*The **aim of this step** is to deal with the issue in more detail on a theoretical level, to look at different forms and expressions of violence 'separately' and analyse them, and to become (more) aware of their prevalence.*

**Room requirements and necessary material/preparation:**

Circle of chairs  
Beamer and laptop computer  
PowerPoint presentation

**6. Intimate partner violence against older women – the main results of the study**

The data presented below are the result of two studies conducted by the Institute of Conflict Research, "Intimate Partner Violence against Older Women" (2010) and "Mind the Gap. Improving Intervention in Intimate Partner Violence against Older Women" (2012/13).<sup>4</sup> The first study surveyed the distinctive features of intimate partner violence at an advanced age by means of a questionnaire enquiry amongst 111 social service and state institutions, interviews with 30 experts and ten female victims of violence. For the follow-up study, 82 police case files from across the Federal territory – banning orders and dispute settlements – in which the victims were 60 years old and over were analysed. With some couples, there had been multiple interventions, so these files finally concerned 73 women resp. couples<sup>5</sup>.

**Confrontation of polled institutions with intimate partner violence against older women**

In total, around half the polled institutions (with key activities in domestic violence, violence against girls and women and women's psycho-social problems) had been confronted with intimate partner violence against older women (60 years and above). For the most part, case numbers were constant over this period of four years, half of the answering institutions took care of around ten older clients in total.

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<sup>4</sup> Both projects were funded within the Daphne III framework and coordinated by the Deutsche Hochschule der Polizei (German Police University) resp. Zoom - Gesellschaft für prospektive Entwicklungen e.V. (Society for Prospective Developments). Further partners were researchers from the universities of Białystok (Poland) and of East Anglia (UK), from the research institute Cesis - Centro de Estudos para a Intervenção Social (Portugal) and the Hungarian Academy of Sciences. <http://ipvow.org/>

<sup>5</sup> The case files date from the period of July 2008 to June 2011 and concerned all incidents of violence in 4 districts each of the federal states of Lower Austria, Vienna, Styria, Upper Austria and the Tyrol; in Burgenland, we examined all incidents of violence in two districts.

The answering institutions are little satisfied with the quality of their own services for this group of clients: According to their experience, work with older individuals demands much more intensive attention than they are able to provide.

### **Forms of violence**

Regarding the forms of violence, intimate partner violence against older or younger women does not differ. Thus, frail octogenarian women, too, experience sexual violence by their partner and are subject to physical violence.

According to police case files

- 71% experienced psychological/ emotional violence
- 69% were victims of physical violence (which led to injuries in one woman out of two)
- 22% were subject to their partner's extreme control and power behaviour (which manifested itself in control and restriction of social contacts or aggressive jealousy)
- 4% experienced sexual harassment or sexual violence and
- 3% experienced financial violence (mostly by denial of their "own" money)

### **Dynamics of violence & risk factors**

Violence rarely starts in old age, many older women have been living with a violent partner for decennia. The dynamics of violence, however, often change after retirement. Retirement means a loss of status, with a certain emptiness added, an occupation to fill the day is lacking, the couple is together around the clock – all this promotes violence, and women often have no possibility to avoid it.

Apart from the violence risk of retirement, the danger of violent outbursts increases when ...

- The man is chronically ill, physically or mentally handicapped or suffering from dementia
- The woman is chronically ill, handicapped or suffering from dementia, and especially when the man nurses her because there are no relief structures in place
- The man consumes alcohol regularly (and besides does not take medication or only takes it irregularly)
- The man has always been jealous (jealousy does not decline with age)
- The woman wants a separation
- There are money issues and financial problems



In police case files, we repeatedly identified signs of high-risk situations. One in four woman reported the partner's threatening to murder her, one in five was threatened with a weapon, and nearly one out of ten barely escaped strangulation. These are situations in which the woman is exposed to an extreme danger of being seriously injured or even killed by her partner.

## **Behaviour in seeking assistance**

Many older women do not experience threats or slaps as violence; for them, only serious physical violations are violence. This is one of the few differences between younger and older victims of intimate partner violence, and it strongly influences their behaviour in seeking assistance: They do not react to first, less serious violent incidents, but usually only ask for support at a very late stage.

There are other reasons why women endure a violent relationship for decennia: their economic dependency – first no income of their own, later no retirement money –, the high significance of marriage for their generation, supported by the stance of the Catholic church on divorce, the position of a woman as “subject to her husband”. A lack of a perspective beyond marriage and family is another reason that complicates separation. Increasing infirmity and need for care in old age additionally strengthen the victim’s emotional as well as economic dependence on the perpetrator.

Moreover, older (and younger) women often trivialise the partner’s violence and find a number of excuses for his violations.

However, there are differences in the assistance-seeking behaviour between the ‘young aged’ (60-70) and the ‘old aged’ (over 70). While 60 to 70-year-olds also turn to women-specific institutions, septuagenarians tend to confide in the police. The older a woman is, the less likely it is that she will turn to offers of support by ‘modern’ institutions like violence protection centres, women’s refuges or outreach centres.

According to the interviewed experts, women in rural areas turn to support institutions much later than women in cities. When for example a female farmer turns to the police or another institution, extreme violence usually has occurred.

## **Particularities in rural areas**

Surveys in the first study showed insights regarding several aspects:

**Infrastructural facilities:** The lower density of (psycho-)social institutions in rural areas handicaps their (outreach) work through long distances in space as well as mediation/support activities of the police. The assistance-seeking behaviour of women affected by violence may also be strongly influenced by it.

**Women’s mobility:** Older women are often strongly limited in their mobility; they either do not have a driver’s permit or own no car, and thus depend on public transport or the support of others. Some women are deterred by long distances alone. All this handicaps the search for professional support or accessing it over a longer period of time.

**Lack of anonymity:** Because of the lack of anonymity in rural areas, victims – according to the interviewed experts as well as to women affected by violence – hesitate for a long time before calling the police, and the police often reacts differently than in cities. The latter may be attributed to relationships between police officers and potential offenders. Victims are also

conscious of the fact that evicted men are often pitied in the country. The perceived higher threshold of shame with a lack of anonymity often forms a barrier for older women on their way to support institutions.

*These results of the study contain a wealth of information. To present all of them would go beyond the scope of a training module. The trainers are therefore encouraged to filter the content that is most important in their actual situation and shorten this section accordingly. Method/didactics-wise, this is also a lecture with PowerPoint presentation support.*

*The **aim of this step** is to gain basic knowledge on intimate partner violence against (older) women in order to integrate it into practical police work and to be able to (re)act accordingly.*

#### **Room requirements and necessary material/preparation:**

Circle of chairs  
Beamer and laptop computer  
PowerPoint presentation

### **7. Exercise 'for Reflection'**

"Please form groups of two now and turn towards each other so you can comfortably talk to each other. --- Does everybody have a partner? --- Please tell each other about your best sexual experience. You have five minutes each for it."

After about half a minute: "We can now end this exercise. What did this instruction feel like to you? How did you feel? --- This exercise is meant to illustrate to you how unpleasant it is to tell something intimate/private or socially taboo to someone you do not know well or do not know at all – and this even though you were asked to relate a nice/positive experience. You can now imagine how difficult it is for victims of violence to tell something usually very embarrassing, marked with shame, i.e. their own experience of violence, to a police officer."

*When issuing the instruction for this exercise, you will get surprised looks, feel resistance, ... in any case experience an extremely varied way of dealing with it amongst the participants. It might be difficult for the trainers to last the half-minute delay until stopping the exercise and to take the tension.*

*It is recommended to capture the participants' feelings after the exercise and to discuss them.*

*Prepare for the fact that this exercise may elicit a whole spectrum of reactions, and that some participants will value it as very 'instructive' while others will react in an intensely scandalised manner.*

***The aim of this exercise*** is to encourage a change of perspectives, i.e. a changing sides and stepping out of the police(wo)man's role, in order to at least partially experience how victims of violence feel when requested to 'just tell'.

**Room requirements and necessary material/preparation:**

Opportunity to form into groups of two

## **8. Challenges and requirements for police interventions**

This step focuses on practical police work: It is organised into the segments challenges and requirements for police interventions in intimate partner violence against (older) women.

The participants will divide into two equal groups. One will be given a text on 'Challenges for police interventions in intimate partner violence against (older) women', the other will get a text on 'Requirements for police interventions in intimate partner violence against (older) women'.

For both articles, please see annex p. 19-22 and p. 23-25.

Now each group has about half an hour in order to read and discuss the text within the small group; questions to encourage discussion might be e.g.:

- Do you agree with that? In what way do you think the text is relevant for practical work? What exactly in it?
- Would you like to add something? What exactly?
- Have you had similar experiences or acted in the same way? If so, what worked especially well? What were specific difficulties?
- What does a successful intervention look like in this context? Which structural and/or personal requirements (would) have to be fulfilled?
- ...

After about half an hour, the small group phase is at an end and the participants meet in the large group again. Here, interesting/relevant points of discussion can be exchanged and discussed.

*Using the method of small group work in this step allows to meet the – often high – demand for exchange and to enable the participants to discuss their experience with an issue relevant to practical work.*

*The questions to encourage discussion might be asked by you – as a trainer – when 'visiting' the group, if you feel that discussion is not getting under way, or you might supply them to the participants in the group on hand-outs. You can also specify the questions for your own use, extend them or not use them at all.*

**The aim** is to enable discussion of the participants' own experience with texts and discussions relevant to practical work, and to reflect upon and if necessary change personal action patterns.

**Room requirements and necessary material/preparation:**

- Two rooms for small groups
- The two texts according to the number of participants – see annex
- Optional: hand-outs with questions

**9. Feedback and end**

In conclusion, there is a feedback. This may be done in the form of a flashlight or with longer speech times.

The participants will tell how they liked the event, what was good or less positive, what they would like to take with them and what they would prefer to leave behind, ...

*In feedback rounds, there is often the danger that participants start a new discussion or the trainers start justifying themselves in cases of criticism. Stop both. In feedback rounds, everybody will listen to each other once more, without comments, discussions, ...*

*It is important to give feedback to the group as a trainer, too.*

**The aim** is to find a good closure and to enable oneself – as a trainer – as well as the participants to address experiences, positive as well as irritating ones, ...

**Room requirements and necessary material/preparation:**

- Circle of chairs
- =====

## ANNEX

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- Short version of module sequence
- Sentences on 'intimate partner violence against (older) women
- 2 texts:
  - *'Challenges in police interventions'*
  - *'Requirements for police interventions in intimate partner violence against (older) women'*

# "Intimate partner violence against older women"

## A police module in the context of the DAPHNE III – Projects „Mind the Gap!“

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### Sequence:

|  |     |
|--|-----|
| 1. Greeting and introduction of the trainers   | 15' |
| 2. Introduction of participants  |     |
| Name   |     |
| Function   | 15' |
| Interventions in<br>'intimate partner violence against women or older women'                                       |     |
| 3. Organisation, sequence, function of the training  | 10' |
| 4. Sociometric (constellation) exercise on the issue of<br>'intimate partner violence against (older) women'       | 20' |
| -----BREAK-----  | 10' |
| 5. Theory on the issue of 'intimate partner violence against (older) women':                                       | 30' |
| a) Definitions   |     |
| b) Forms of violence against (older) women   |     |
| 6. Presentation of study results „Mind the Gap!“   | 30' |
| -----BREAK-----  | 20' |
| 7. Exercise 'for reflection'   | 15' |
| 8. Small group discussion with following plenary discussion on   | 50' |
| a) ' <i>Challenges for police interventions</i> '  |     |
| b) ' <i>Requirements for police interventions in<br/>        intimate partner violence against (older) women</i> ' |     |
| 9. Feedback and end  | 25' |

## Sentences on intimate partner violence against (older) women

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Mr Maier gives his wife a black eye.

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Mr Ivanovic boxes his wife's ears.

---

Mr Gruber doesn't talk to his wife for a week when she doesn't sleep with him.

---

Mr and Ms Akkilic have a family bank account which only he can access.

---

Mr Bauer dresses his wife who needs care in her already soiled clothes every day, because she will dirty her clothes anyway.

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## Challenges to Police Intervention

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Police interventions in intimate partner violence against older women are associated with special challenges. These are partly due to structures of policing, partly they are connected to the living conditions of older women.

- Uncertainty before/during police intervention
- Time pressures in policing
- Facts of life with older women: women's gender role or Stockholm syndrome
- Perpetrator's tactics
- Dementia or confusion of older people
- Provisions for victims and perpetrators in need of care

In detail:

➤ **Uncertainty before/ during police intervention: emergency call behaviour of older women**

Older women, especially those over the age of 70, hardly ever seek help with counselling institutions in cases of intimate partner violence, but mainly with the police. However, on the phone they often do not state the real reason for calling, but call the police under a pretext. This may e.g. be a suspicion of theft. Only on the scene, intimate partner violence comes to the fore when officers are attentive and check up on leads.

In such situations, one problem may be that hematoma do not only appear as a consequence of violence, but may also result from medical care or medication (see Chapter 7).

It may also occur that a woman informs the police because she has fallen as a result of intimate partner violence and cannot get up any more – and only and exclusively wants the officers to help her get up, and not the partner to be turned from the apartment. Support addressing the specific situation of violence is not wanted in such situations – at least not ostensibly.

The uncertainty of what police officers will be confronted with in an operation is immanent to policing, but complicates work and is also experienced as additional stress. Knowing about the aforementioned 'emergency call behaviour' of older women in cases of intimate partner violence allows officers to mentally prepare for such assignments, which may facilitate intervention. Concerning women affected by violence, this previous knowledge increases the probability of noticing intimate partner violence between older people and finally reacting to it with appropriate measures.

In some cases, the uncertainty whether there was violence or not will remain all through first contact on the scene, and it will be impossible to intervene satisfactorily. On possible courses of action, see Chapter 7.

➤ **Time pressures in policing: Operations take longer with older people**

Police officers often have to act under enormous time pressure and to take decisions fast. Older victims, however, need time in order to start talking, express themselves and take decisions. Taking your time and allowing enough time are therefore extremely important factors, especially in interventions with older people.

➤ **Older women's facts of life: women's gender role or Stockholm syndrome**

Older women especially were socialised with strong gender role models, which make it hard for them to separate or even get a divorce from their partner. In addition to that, financial as well as emotional dependencies are barriers to separation. (For more detail, see Chapter 4).



For outsiders, it is often incomprehensible why someone stays in a violent relationship. Questions arise like: 'Why doesn't she get a divorce at last?' or 'Why does she put up with it and doesn't finally report him?' – a challenge particularly in repeated police interventions.

Knowing about the victim's facts of life and these victimising dynamics is important in order to meet women affected by violence with more understanding and subsequently support them in an appropriate way.

➤ **Perpetrator's tactics**

Violent men often use tactics in order to confuse and manipulate their partner and their social network, as well, and to trivialise or deny their violence towards the woman, their family, friends, but also towards institutions like police or justice, and these are often successful. These so-called perpetrator's tactics are diverse and may constitute traps in dealing with abusers, which result in intervention attempts to come to nothing.

**Possible perpetrator's tactics are**

**Influencing the victim and the social network, like e.g.**

- Threatening the partner that she will lose everything if she calls the police,
- Telling her that nobody will believe her,
- Publicly putting her down in front of acquaintances, relations, friends,
- Telling the police that the partner has been confused and called the police because of that,
- Arguing that he – the man – has to be present at the police questioning because the partner is hard of hearing, can't follow, ...

**Denial of violence**, e.g. stating to the police that the partner has never been abused,

**Trivialising violence**, e.g. minimising the extent of the violence,

**False accounts of the incident**, e.g. accounting for injuries with the partner having slipped in the shower, having bumped against the kitchen cupboard, ...

**Victim-blaming:** The victim of violence is made responsible for the violence, using 'explanations' like 'She doesn't manage to keep the house clean, that's not acceptable.'

**Loss of control as an argument for violence,** e.g. 'I can't take her answering back all the time.'

**Reference to provocation on the part of the victim,** e.g. 'She made me look ridiculous, that's why I had to hit her.'

**Reference to financial problems, stress or other pressures,** e.g. 'Usually I am not violent, but I haven't been feeling well lately.'

### ➤ **Dementia or confusion of older people**

Because of a higher life expectancy, more and more older people suffer from age-related confusion or dementia. Thus, in 2008, approximately 100,000 individuals in Austria were affected by dementia; for 2050, up to 290,000 cases are predicted.<sup>6</sup> For policing, this means an increasing incidence of contacts with individuals suffering from dementia.

Dementia has no clearly defined clinical picture, but refers to a number of symptoms caused by different brain diseases. "There are at least 50 different forms of dementia with different impacts on the intellectual capacities and behaviour of patients."<sup>7</sup> The severity of the illness (minor, moderate, major) is graded according to the extent of cognitive impairment, the possibility of autonomous living, the disruption of impulse and affect and the extent of support needed by the patient.<sup>8</sup>

The challenge in police interventions with people suffering from dementia being involved often lies in the difficulties in communication and in the 'unusual behaviour' of those individuals. Individuals suffering from dementia progressively withdraw from the 'linguistic world', which means that they no longer understand what is said or no longer use language as a means of communication. In its place, gestures, facial expressions or repetitive gestures may be used. 'Unusual behaviour' may for example also occur in the following ways:<sup>9</sup>

- perambulation, packing, "cleaning"
- leaving, pushing away, "wanting to go home"
- vocalisations (screaming, singing, repetitive sounds, ...)
- aggressive behaviour, testiness
- distrust
- apathy, retirement

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<sup>6</sup> Competence Center, Integrierte Versorgung/ GLEICHWEIT, S., ROSSA, M.: Erster österreichischer Demenzbericht. Wiener Gebietskrankenkasse (Hg.) 2009, S. X

<sup>7</sup> SCHOLTA, M., WEISSENBERGER-LEDUC, M., Gewalt erkennen. Fragen und Antworten zu Demenz und Gewalt, eine Broschüre des Bundesministeriums für Arbeit, Soziales und Konsumentenschutz, Wien 2010, S. 5

<sup>8</sup> vgl. COMPETENCE CENTER, INTEGRIERTE VERSORGUNG, GLEICHWEIT, S., ROSSA, M.: Erster österreichischer Demenzbericht. Wiener Gebietskrankenkasse (Hg.) 2009, S. 9

<sup>9</sup> cf.: HEIMERL, K., REITINGER, E., EGGENBERGER, E., Frauen und Männer mit Demenz. Handlungsempfehlungen zur person-zentrierten und gendersensiblen Kommunikation für Menschen in Gesundheits- und Sozialberufen. Bundesministerium für Gesundheit, Sekt. III, Wien 2011, p. 16

- depressive moods, fears
- excitement

The overall spectrum of behaviour patterns is diverse, and encounters with individuals suffering from dementia are correspondingly varied.

At any rate, violent behaviour of dementia sufferers can frighten and endanger their environment. Therefore, a clear stance against violence and suitable action – of victim protection – are necessary.

For hints for (better) communication, please see Chapter 7 d) verbal communication requirements.

#### ➤ **Provisions for victims and perpetrators in need of care**

Constellations like violent partners nursing the victim who have been expelled by the police are a specific challenge for police interventions. The same is true for violent expelled men who were nursed by the woman and now need to be provided for elsewhere. (see Chapter 7).

## Requirements for Police Operations in Intimate Partner Violence against (older) Women

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From the challenges to police interventions, we may deduce practical requirements.

### **a. A stronger focus on intimate partner violence against older women – factor uncertainty**

Older women affected by intimate partner violence will call the police, but in many cases they will state a different reason for their emergency call. The violence often only becomes apparent on the scene or stays hidden, because the perpetrator as well as the victim endeavour – for different reasons – to keep it a secret.

The requirement for police work is to allow for the possibility of such behaviour patterns and to act accordingly.

Regarding the evaluation of the origin of hematoma, an enquiry with the GP about whether these might be connected to medical treatment may help. This enquiry would at the same time inform the GP of the existence of police suspicions.

If uncertainty remains, violence prevention officers may be asked to re-evaluate the situation.



### **b. More time for interventions in intimate partner violence against older women**

It is important to give older victims of violence enough time in order to patiently lead them towards the actual issue.

### **c. Particularities in questioning**

Separate questioning is a standard in police interventions in the context of intimate partner violence, but may be swayed when the husband claims that the woman is hard of hearing, confused, ... - i.e. tries to apply his perpetrator's tactics. It is important to clarify whether a conversation without the presence of others is possible or not in direct contact with the victim of violence, without calling in any other party. If it appears difficult, the victim of violence should be asked who should be called in. With persons suffering from dementia, calling in external nursing personnel may be expedient and helpful.

When there is no obvious intimate partner violence, separate questioning is not the standard. However, when there is suspicion, the police should try to talk to the woman by herself. In order to reduce pressure on the victim, the husband might for example be asked for a glass of water or sent for some documents.

Other tips for conversations with (older) women affected by violence are:

- Police insignia may be intimidating and should be reduced as much as possible when talking to victims; it may e.g. be helpful to take off the police hat inside a room.

- Remaining standing in front of someone who is bedridden or sits in a chair appears very dominant; a better atmosphere for a conversation may result from the police officer asking to sit down. This does not only enable a conversation 'at eye level', but also signals that you will take your time and listen carefully.
- Even before starting a conversation, you should offer the victim a glass of water. This signals care for the wellbeing of the woman, but hydration is also extremely important, especially with confused individuals.

#### **d. Verbal communication requirements**

In general, police interventions in intimate partner violence demand a clear (communicative) stance against violence as well as specific communication behaviour towards the victim and the perpetrator.

##### **Communication requirements towards the victim**

In order to 'enter the conversation', victims of domestic violence need – besides an environment conducive to communication – specific communication conditions, too. The following has to be taken into account:

- Provide a quiet communication atmosphere.
- Address the woman by her name.
- Use simple and clear language. The woman is in an exceptional situation and will not respond to complex language.
- Avoid police-specific expressions.
- Believe what you are told – statements like e.g. 'I cannot imagine that' or 'But that is no violence' will only unsettle the victim and result in her not being able to trust you.
- Show the victim that you can relate to her current situation and that you understand e.g. her fears, her fatigue, her confusion,...
- Explain to the woman what is going to happen next, which steps are possible. You should take into account that many older women do not have the same knowledge as yourself. Thus, some believe that women's shelters only take in women with small children.
- Offer your information step by step, and do not communicate several pieces of information at once.
- Ask the woman whether next of kin, acquaintances or friends might be able to take care of her.
- Allow her time to ask questions, to think and to put things into words, i.e. not only taking your time is important and necessary, but also pauses in the conversation.
- Close the conversation in such a way that its end is clear to the woman. Say for example that you have no more questions and that you would leave now, provided she has nothing more to ask.

Moreover, if possible, older women should in general be questioned by a female officer, and they are able to talk more easily with older intervening officers.

##### **Communication requirements towards the perpetrator**

In dealing with perpetrators, it is especially important to make it clear that violence will not be tolerated. This means that in contact with perpetrators, at the acute stage, clear

statements on what he has done are necessary, e.g. 'You hit your wife, that is violence and thus a punishable offence.'

In addition to the above communication requirements, with people suffering from dementia, some further considerations are important:

## **Impressum**

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