



The National Office for the Prevention of Domestic, Sexual and Gender-based Violence
An Oifig Náisiúnta um Fhoréigean Baile, Gnéisach agus Inscrébhunaithe a Chosc

**Stopping
Domestic
Violence:**
**What
Works?**

28th – 30th May 2008

Waterford Institute of Technology, Ireland

Conference Report

**Stopping Domestic Violence: What works?
Waterford Institute of Technology,
28th-30th May 2008**

Conference Report

1.	Background and aims of the conference	2
2.	Taking stock of the current situation	3
3.	Improving responses to domestic violence: what are we aiming to achieve?	4
4.	What can we learn from international best practice?	5
4.1	Responses to domestic violence must be victim-centred	5
4.2	The effectiveness of a victim-centred system depends on a multi-agency approach	8
4.3	Preventative actions must be taken to address the root causes of abuse	10
4.4	Effective data collection and ongoing evaluation of interventions is required to ensure policy is evidence-based	17
5.	Next steps	18
6.	Appendix	19

1. Background and aims of the conference

Cosc is the National Office for the Prevention of Domestic, Sexual and Gender-based Violence. This is the first dedicated Government office with the key responsibility to ensure the delivery of a well co-ordinated “whole of Government” response to domestic, sexual and gender-based violence. The establishment of Cosc provides the opportunity for a fresh look at the structures, policies and procedures needed to reduce the prevalence of these crimes and to provide the best possible response to those affected. With this goal in mind, Cosc is working in partnership with our stakeholder organisations towards the launch in 2009 of the first National Strategy on Domestic, Sexual and Gender-based Violence.

The aim of this conference, entitled “Stopping Domestic Violence: What Works?”, was to present interventions and thinking applied in other jurisdictions in order to broaden our view of what should be included in the strategy. The conference was opened by **Mr. Dermot Ahern, T.D.**, Minister for Justice, Equality & Law Reform, and brought together the following speakers from Australia, Canada, the UK and Ireland:

- **Mr. Charles J. Hynes**, District Attorney, Kings County (Brooklyn), New York, U.S.A.
- **Ms. Wanda Lucibello**, Chief Prosecutor, Special Victims Division, Office of the District Attorney, Kings County (Brooklyn), New York, U.S.A.
- **Professor Marianne Hester**, School for Policy Studies, Bristol University, U.K.
- **Ms. Jan Pickles O.B.E.**, Director, Cardiff Women’s Safety Unit, Wales;
- **Professor Elizabeth Stanko**, Senior Advisor to the London Metropolitan Police
- **Professor Desmond O’Neill**, Chairman, Elder Abuse National Implementation Group, Ireland
- **Dr. Carmen Gill**, Director, Muriel McQueen Fergusson Centre for Family Violence Research, University of New Brunswick, Canada
- **Mr. Mark Coulter**, Male Victim’s Development Officer, Men’s Advice Line (MALE) U.K.
- **Prof. Ann Taket**, Head, School of Health & Social Development, Deakin University, Australia
- **Dr. Gina Netto**, Lecturer, School of the Built Environment, Heriot - Watt University, Edinburgh, Scotland
- **Ms. Thangam Debonnaire**, Respect Evaluation Project Manager, UK, Director of Domestic Violence Responses; Training, Prevention and Research (independent practitioner and evaluator)
- **Ms. Linda Regan**, Senior Research Officer, Child and Woman Abuse Studies Unit, London, U.K.

The overarching goal of stopping domestic violence was addressed from a variety of different perspectives. A number of the presentations focused on improving and evaluating the responses of specific services such as housing, the police, the justice system and the health care system. Others presented strategies that could be applied to improve coordination between these services and to enhance prevention, including ‘one stop shops’, risk assessment models, and strategic performance management frameworks. Many of the speakers considered the specific needs of different groups in society, including older people, people with disabilities, people from ethnic minorities and men who identify themselves as victims. One presentation

looked specifically at the role of perpetrator programmes. Throughout, there was a focus on the importance of training for a wide range of professionals and on awareness raising measures aimed at the general public. All the speakers' presentations, together with full biographies and presentation abstracts are available on the Cosc website: <http://www.cosc.ie/en/COSC/Pages/WP08000071>

The conference provided a valuable opportunity for key stakeholders to come together to exchange information and to forge a common vision of the way forward. The event was very well attended by non-governmental organisations, Government departments, agencies, academics, and other experts in the field. The full list of invitees is included as an appendix at the end of this report.

After every session, a lively exchange took place between conference participants and speakers around the issues presented, and each day was rounded off by a panel discussion.

2. Taking stock of the current situation

Opening the conference, Minister for Justice, Equality and Law Reform, Mr Dermot Ahern, T.D., highlighted statistics showing that domestic abuse remains a disturbingly prevalent feature of our society. In 2005, the National Crime Council (NCC) report, *Domestic Violence in Ireland*, found that 15% of women and 6% of men suffered severe abuse at the hands of an intimate partner at some point in their lifetime. Although acknowledging that the risk to women is higher, the Minister stressed that policy responses must also recognise that the problem affects men too. While conference speakers generally identified victims as women, it was recognised nonetheless that solutions must also encompass male victims and female perpetrators.

Older people also suffer domestic abuse. There is still a lack of data on the extent of domestic abuse experienced by this group, but it is estimated that some 12,000-20,000 may be affected, not including those living in institutions.

While the human and emotional costs of domestic abuse are incalculable, one recent Council of Europe report¹ has attempted to gauge the economic cost of the problem as a whole. Taking into account housing, health and justice among other costs, the report estimated the public expenditure on domestic abuse to be in the region of €555 per capita per annum, which in Ireland would represent a total of €2.2bn.

Despite the seriousness of the crime, many victims suffer in silence. The latest figures in the 2005 NCC survey show that only 29% of female victims and 5% of male victims report the abuse to the police². Many who do report are unwilling to bring charges or later withdraw from the judicial process.

Conference interventions highlighted a number of core issues behind these statistics which must be addressed as a matter of priority:

- **There is a lack of awareness about the nature and extent of domestic abuse among the general public.** People often associate abuse with physical violence only and do not recognise other forms of abuse. Domestic abuse is still perceived by many to be a private matter and people who know

¹ Available at: [http://www.coe.int/t/e/human_rights/equality/PDF_CDEG\(2007\)3rev_E.pdf](http://www.coe.int/t/e/human_rights/equality/PDF_CDEG(2007)3rev_E.pdf)

² Source: Watson, D. and Parsons, S. on behalf of the National Crime Council (2005).

or suspect that someone they know is suffering abuse do not feel it is their place to report it or approach the person suffering abuse.

- **Many victims feel that the abuse is somehow their fault or fear that the consequences of reporting could be worse than living with the situation.** The stigma and shame associated with domestic violence, together with uncertainty about the practical implications of bringing the problem into the open prevents victims from seeking help.
- **Those who do seek help are faced with a fragmented system.** Victims must visit a multitude of different agencies and follow separate avenues for seeking civil and criminal justice, often receiving conflicting advice.
- **A lack of coordination between different services and agencies impedes effective identification of those who may be at risk.** Inadequate data collection systems and information sharing between services may result in high risk cases slipping through the net.
- **There is insufficient training for professionals who are in a position to identify abuse or respond to calls for help.** Professionals in many services directly or indirectly associated with domestic violence fail to recognise signs of abuse or are afraid to confront suspected cases because they do not know how to respond.
- **There is still insufficient comparable data and analysis on approaches to tackling domestic abuse.** As a result, domestic abuse remains a hidden problem and policy makers lack evidence on which to draw.

3. Improving responses to domestic violence: what are we aiming to achieve?

In the past, there was a tendency to evaluate responses to domestic violence on the basis of conviction rates alone. However, as many of the conference speakers stressed, while locking away the offender may represent a successful outcome for the state, the needs of the victim are much more complex. Ms Wanda Lucibello, Office of the District Attorney, Kings County, (Brooklyn) New York, pointed out that while criminal justice is episodically driven; domestic violence is a continuum of events and episodes. The victim has to take into account the practical consequences of court action on every aspect of her life and her family, such as where they will live, how they will survive economically and what will happen when the offender is released. The emphasis in the past on criminal justice responses to domestic violence, Ms Lucibello stressed, is one of the contributory factors to victims' reluctance to report abuse.

By contrast, the point of departure outlined at this conference is that tackling domestic violence requires a much more holistic conception of the nature of the problem and what constitutes an effective response. Different speakers defined the desired outcome of such a system in different ways. However, in all cases the needs of the victim were highlighted as being of primary importance. For Mr. Charles J. Hynes, District Attorney, King's County, the goal should be 'to prevent and eliminate the isolation and fear of victims'. In the case of the Multi - Agency Risk Assessment Conference (MARAC) (*Figure 3 below*), the stated aim is to 'make women safer': a simple goal which nonetheless requires action on multiple fronts. Ms Lucibello stressed that in order to bring victims 'from a position of insecurity, isolation and fear to success and regeneration', the pursuit of criminal justice must be accompanied by practical assistance to the victim. This assistance might include provision of security measures, housing solutions, identification of employment opportunities, social security etc (*Figure 2 below*).

It was pointed out that if the victim receives a holistic response such as this, she is more likely to be in a position to support the criminal justice system in seeking a prosecution. Such an approach is not only more likely to achieve a successful outcome for the victim and her family: it can also contribute towards stopping the cycle of violence and making society as a whole safer.

4. What can we learn from international best practice?

A range of practical interventions designed to achieve successful outcomes in domestic violence situations were presented at the conference. While each of the speakers focused on a different aspect of the response (as summarised in the Figures below), a number of common themes emerged from the presentations. Taken as a whole, these common themes offer important insights into what constitutes an effective response to domestic abuse:

4.1 Responses to domestic violence must be victim-centred, tailored to the particular needs of the victim

4.2 The effectiveness of a victim-centred system depends on a multi-agency approach

4.3 Preventative actions must be taken to address the root causes of abuse:

(a) *Risk assessment systems* must be put in place by and between a range of services.

(b) *Training for a wide variety of professionals* is crucial to improve both the identification of those at risk and the response victims receive.

(c) *Awareness raising measures* are needed to educate the whole of society about the nature of domestic abuse.

(d) *Working with men around domestic violence* is essential to address the root causes of abuse and challenge the behaviour of perpetrators.

4.4 Better data collection and evaluation of interventions is required to ensure that policy is evidence based.

The following sections consider how each of these four principles was addressed by conference speakers.

4.1 Responses to domestic violence must be victim-centred

Every victim's needs are different and complex, and conference speakers repeatedly emphasised that a successful system must be responsive to the needs of different groups, such as younger women, women who have suffered long term abuse, ethnic minorities, male victims, people with physical and mental disabilities and older people.

Figure 1. Preventing homelessness among victims of domestic violence

Domestic violence is a significant cause of homelessness. Recent research presented at the conference by Dr Gina Netto, Heriot - Watt University, Edinburgh, demonstrates that policies aiming to prevent homelessness are likely to fail unless they provide appropriate options which take into account individual needs and preferences. Leaving the home means far more than the loss of shelter and access to key services; it also results in personal loss of control, privacy, stability, safety, self-expression and space. Therefore, while emergency situations will always arise, efforts should also be invested in activities to enable the woman to either remain in her current home or to leave home in a planned and safe way, according to her preferences.

Support for women who choose to remain in the home:

- An occupation order excludes the abuser but insists he pays the mortgage/bills
- Sanctuary schemes involve the provision of security measures and adaptations to help women remain in their own homes, where the perpetrator has been excluded
- These measures may take the form of a 'safe room', or panic buttons to alert police
- Where tenancy is shared, the victims can apply for transfer to their name
- Harrow County Council is among the UK local authorities to have pioneered sanctuary schemes.

Dr Netto emphasised that this remains an under-researched area. It is not clear how effective legal measures and sanctuary schemes are in enabling women to remain at home. However, there is some evidence of the effectiveness of sanctuary schemes in terms of reducing homelessness acceptances by local authorities.

Support for women who choose to leave the home:

- Many who choose to leave find it very difficult to negotiate the multiple agencies involved, particularly in a crisis situation
- There are firm indicators that early intervention and multi-agency/one stop shop solutions help to reduce homelessness
- In addition to housing provision, long term stability, security and safety concerns must be paramount
- In order to make the transition to independent living, the victim requires continued support to access training, benefits and employment.

Dr Netto further stressed that policy must address the particular challenges facing two particular groups of women, those from ethnic minority groups and those with disabilities

Support for women from ethnic minority groups

- Recent migrants are particularly vulnerable as they have no recourse to public funds
- Women from ethnic minorities may be subject to different types of violence, including the threat of forced marriage
- There may be a lack of support from the family due to geographical distance or acceptance of violence
- Additional vulnerabilities may include lack of knowledge of support available, lack of fluency in English etc.

Support for women with disabilities:

- There is a lack of appropriate refuge provision and support for women with disabilities and those with mental health issues are often refused access
- Similarly, there is a lack of appropriate permanent accommodation
- Many face additional difficulties in leaving home and may be reluctant to leave adapted homes.

Source: Dr Gina Netto, presentation available at: <http://www.cosc.ie/en/COSC/Pages/WP08000071>

The presentations of Professor Marianne Hester, Bristol University, (*Figure 8., below*) Professor Desmond O'Neill, Trinity College, Dublin, (*Figure 12 below*) and Mr. Mark Coulter, Respect, (*Figure 10 below*), focused specifically on the different needs of particular groups, each suggesting that that a 'one size fits all' solution cannot work; victims must be provided with options depending on their own circumstances.

Not only will different groups of victims need different responses, but individuals need different responses at different times. Dr Gina Netto, demonstrated that providing the

victim with options in accordance with their needs was crucial in order to achieve related policy goals, in this case, preventing homelessness (*Figure 1., above*). Ms Lucibello stressed that a person seeking help will have a series of urgent practical needs, yet in a crisis situation it is unlikely that they will be in a position to navigate the complex patchwork of services they require alone. An effective system must therefore make it easy for victims to access a range of services seamlessly and offer a range of solutions addressing the needs of different groups. 'One-stop shop' models, such as the Brooklyn Family Justice Centre (*Figure 2. below*) bring together under one roof a wide range of agencies and services, such as police, counsellors, support and advocacy agencies, housing advisors, civil legal support, different community and faith groups and childcare services. This enables the victim's needs to be addressed holistically, provides continuity of care and empowers the victim to make choices.

Figure 2. A 'one-stop-shop' model: the Brooklyn Family Justice Centre

The Brooklyn Family Justice Centre (FJC) aims to reduce isolation by supporting the victim with an array of services that is easily and quickly accessed, in order that an individual 'fit' can be achieved by the client. It was one of 15 sites to receive U.S. Department of Justice start-up grant.

The FJC is located on an entire floor (9000m²) of the King's County District Attorney's Office (KCDA) in Brooklyn, close to transportation hubs and the courts. It is administered by the Mayor's Office to Combat Domestic Violence, with KCDA as co-lead partner. 37 public and private agencies are located onsite, providing a range of civil, criminal, economic and mental health services:

Civil services (approximately 70 staff)

- Each client is allocated a case manager, who assists in identifying the appropriate services
- 14 community non - profit agencies represented, including elder abuse and minority groups
- 4 civil legal providers provide support on family law and immigration

Criminal Justice/ Government services (approximately 80 staff)

- The FJC handles the prosecution of all intimate partner violence and elder abuse cases
- 6 government agencies are on-site, including the KCDA's Domestic Violence Bureau, New York City Police Dept., Social Welfare, Probation, and the Department for the Ageing.

Economic services

- Housing/shelter advocacy is available
- Information is provided on social welfare entitlements
- Self-sufficiency services and practical assistance are available, including English classes, job placement, CV update, and support in obtaining driver's licence and baby/food supplies.

Mental health services

- Children's services provide supervised play and counseling
- Interfaith spiritual care is offered
- Counselling services are available onsite.

Outcomes

- An average of 6 services accessed per client
- Volume of witnesses coming forward has increased by over 46%
- Family-related murders decreased in Brooklyn from 2002-2006 by 30%
- Special immigrant visa certifications have quadrupled
- FJC fosters information sharing, collaboration and raises expertise of all agencies present.

Key factors for success

- Constant attention to communication
- Ongoing cross – training
- Consistent outreach to Community.

Sources: Presentations by Mr. Charles J. Hynes and Ms Wanda Lucibello, available at: <http://www.cosc.ie/en/COSC/Pages/WP08000071>

Once the victim's urgent needs are addressed, it is more likely that she will feel able to assist a prosecution. Since 'one-stop shop' models enable the problem to be dealt with more quickly, they also help to reduce the time victims and children are exposed to abuse and to break the cycle of violence. However, it was pointed out that the viability of the one-stop shop model depends on high population density and an accessible location. Participants noted that the model would therefore have to be adapted to work in Ireland, particularly in rural communities.

4.2 The effectiveness of a victim-centred system depends on a multi-agency approach

In order for a victim centred model to work, a coordinated response from the many different services and agencies involved is crucial. None of the conference speakers suggested that such an approach is easy. Each individual agency has a different set of objectives, a different ethos, different methods of collecting data and different reasons for doing so. While recognising that these differences can present obstacles to multi-agency work, it was acknowledged by all that embracing 'the pain of collaboration' (to borrow the phrase used by Dr Carmen Gill, University of New Brunswick, Canada) was essential to effective domestic violence approaches. The establishment of Cosc demonstrates a commitment to achieve this goal, and the conference provided an opportunity to look at a number of successful multi-agency projects and the core principles behind their effectiveness.

Key principles of effective multi-agency work

- The importance of **leadership** ran through each of the projects presented. Clearly, it is impossible to harness many separate services in common endeavour without sustained commitment, energy, vision and drive. This was particularly evident in the case of the Brooklyn Family Justice Centre, which would not have been initiated without the determination of Mr Hynes.
- Relationships between services must be rooted in **trust and transparency**, particularly between community organisations and government. Several speakers emphasised that the philosophy underlying responses to domestic abuse must be forged jointly between government and stakeholders. Community organisations must have direct contact with decision makers in government and access to the latest research and statistics.
- These relationships must be backed up by sufficient **funding** to build capacity among essential community services. It was pointed out that professionals cannot rely on the services to which they refer victims unless they are well resourced. Also, as one participant stressed, if funding is scarce, this inevitably sets up a spirit of competition rather than cooperation between agencies.
- The services involved must reflect **social diversity** in order to reach and address the needs of less visible groups. Cooperation must be established with organisations representing different religious communities, ethnic minorities, people with disabilities, older people, male victims etc. Ms Lucibello explained, as an example, how cooperation with the Hassidic Jewish community organisations in Brooklyn provided an opportunity to talk to women and children from a group that is particularly wary of the police and

public services and traditionally refer to their religious leaders for resolution of difficulties.

- **Better information sharing systems** must be set up between agencies in order to identify and protect those at risk. Three different systems for information collection and sharing were presented by Dr Gill, Ms Jan Pickles O.B.E., Cardiff Women's Safety Unit, and Professor Elizabeth Stanko, London Metropolitan Police, (*Figure 3 and 4 below*).
- **'One-stop shop'** models not only make life easier for the victim, but also facilitate the sharing of information, foster understanding and forge a shared ethos between the different agencies. Research presented by Professor Hester of Bristol University, demonstrated a reduction in withdrawal rates when a police officer was available in the 'one-stop shop', or alternatively, if dedicated domestic violence project workers were available at police stations.

Figure 3. Multi - Agency Risk Assessment Conferences (MARACs)

Multi - Agency Risk Assessment Conferences are a victim-centred, multi-agency response to very high risk domestic violence cases. They are led by the police and are being rolled out by the Home Office in the UK. The overall objective of the process is to ensure the safety of victims and their children in these cases through multi-agency work to identify and manage potential perpetrators.

MARACs bring together over 18 different agencies, including the police, probation, midwives, Women's Aid, the National Society for the Protection of Children, housing services, social services, mental health services and substance abuse workers.

The process

- Each agency is trained in how to identify a high risk case. This involves completing a risk checklist which assesses risk indicators such as:
 - Emergency callout/referral from victim
 - Abuser having started on a perpetrators programme
 - Factors such as pregnancy, substance abuse or mental health issues (*see Figure 4 below*)
 - Repeat call outs (defined as 3 incidents in 3 months) and
 - Agency's clinical judgement.
- Once an agency establishes a case as very high risk, the case is referred to the MARAC
- MARAC meetings take place at least monthly, and more commonly every two weeks
- Prior to the MARAC meeting, the risk checklist is faxed to social services, NHS Trust and to the Independent Domestic Violence Advisory (IDVA) service
- Immediate actions are taken: each agency monitors contact for target, police watch, child/adult protection procedures implemented, Independent Domestic Violence Advisor contacted
- Lead agency collects referrals with name, DOB and address of victim, children, perpetrator and name of referring agency
- The case list is circulated 8 working days before MARAC to all attending agencies.
- Relevant professionals research cases.
- During the MARAC meeting, information shared, actions agreed and outstanding actions from last meeting highlighted.

Outcomes

- Repeat victimisation down 38% to 8%
- Withdrawals from Criminal Justice system down 54% to 14%
- 42% victims interviewed had not experienced further violence or abuse at 12 month point in 2007. The other 58% call police earlier and have more confidence the system can deliver
- Savings of at least £70 million were made in 2007.

Source: Presentation by Ms Jan Pickles, OBE, available at:
<http://www.cosc.ie/en/COSC/Pages/WP0800071>

4.3 Preventative actions are needed to address the root causes of abuse

Figure 4. Key indicators of vulnerability to domestic violence

- Being a young woman
- Large age differential between female and her male partner
- Children/pregnancy
- Poverty/financial problems
- Recent migrant
- Co-habitation/unmarried
- Isolation
- Infidelity or perceived infidelity
- Problems with alcohol, drugs or mental health
- Separation and jealousy
- Stalking by partner
- Threats to kill from partner
- Use of weapons by partner
- Controlling behaviour
- Actual or potential separation from partner
- Partner suffers from depression
- Partner has criminal record
- Cultural sensitivities ('honour killings')
- Injuries inflicted
- Escalation of abuse
- Threats made to kill
- Threatened/attempted suicide
- Sexual abuse i.e. rape, indecent assault

Sources: Presentations by Professor Elizabeth Stanko, Ms Linda Regan and Ms Jan Pickles; available at:

<http://www.cosc.ie/en/COSC/Pages/WP08000071>

(a) Risk assessment systems must be put in place by and between a range of services.

The importance of establishing clear systems to identify those most at risk was a common theme of the conference presentations. Ms Linda Regan, London Metropolitan University, found in her research that in almost all cases of serious abuse and femicide, the victim was known to one or more services who could have acted to prevent the incident (*Figure 7 below*). Similarly, Professor Ann Taket, Deakin University, Australia, presented an example of one victim who had suffered 30 years of emotional abuse, which was only spotted when it turned physical. In this case, the victim had visited a wide range of different services over the years, ranging from abortion counselling to psychiatric care, but each one had failed to identify that she was suffering abuse. In many cases, different fragments of information are held by many different agencies, but unless these fragments are pieced together, the full extent of the problem may not become apparent.

Improving the way in which data is collected, recorded and shared between agencies is essential to overcome this fragmentation of information. Several speakers highlighted research identifying the core indicators of vulnerability to domestic violence (*Figure 4 above*). However, this information must be better utilised in order to systematically identify those most at risk. Ms Pickles (*Figure 3 above*), and Professor Stanko (*Figure 5 below*), presented two different examples of effective information systems to identify those at risk and prevent domestic abuse that have been put in place by the UK Home Office and the Metropolitan Police respectively. Professor Taket, (*Figure 6 below*) focused specifically on the advantages of routine and selective enquiry as a method of encouraging disclosure of abuse.

Concerns were raised during the panel discussion about issues of data protection and confidentiality. However, the clear consensus from the panel was that data protection laws exist to protect the individual, not information itself. Rather than fearing sharing information, professionals should consider that they may be breaching an individual's human rights if they *do not* share information indicating that the person is at risk.

Figure 5. Improving police responses through Strategic Performance Management

Managing how police routinely respond to individual need for help in domestic violence situations and ensuring that best practice is shared among all units who might respond to requests for help is a constant challenge. Professor Stanko demonstrated how the establishment of a Strategic Performance Management Framework in the London Metropolitan Police (MET) has been used to improve the collection, usage and sharing of the information provided by victims. Lessons from the MET experience include:

1. Provide good basic training for frontline staff

- Good basic training in recording information is essential, particularly because calls are often directed to a response team, rather than an individual, and also because of the high number of new recruits
- This training must impart the message that domestic violence is core police business and that tackling domestic violence makes society safer as a whole
- Tools must be provided to ensure that police officers ask the right questions, provide consistent advice and record the response in a way that makes sense to others reading the notes
- Police officers must be trained in using risk assessment tools - guided by research on 'dangerous' contexts where most serious domestic violence occurs
- Supervisors have to be accountable for ensuring that the tools provided to police officers are put into practice.

2. Utilise information recorded

- Analysis of the data recorded provides valuable information on patterns of risk;
- Certain indicators should trigger automatic action. For example:
 - 12-16% of domestic violence related calls in London are repeat calls. These are all too often seen as a nuisance but in fact provide evidence of escalating violence - a major risk factor
 - Offences such as criminal damage are not considered a serious offence, but in the context of repeat victimisation are strongly linked to domestic violence;
- These systems enable police officers to identify the most potentially serious and urgent cases.

3. Systematically share information with other agencies

- Police information is vital to improving responses of other agencies and vice versa
- The information gained through the above systems of analysis must be systematically shared
- For example, a list of all callers to the MET who have reported domestic violence over a particular period of time is now regularly faxed out to all relevance agencies and services, bringing potential perpetrators and victims to their attention.

Source: Professor Elizabeth Stanko; Presentation available at:
<http://www.cosc.ie/en/COSC/Pages/WP08000071>

(b) Training for a wide variety of professionals is crucial to improve both the identification of those at risk and the response victims receive.

The importance of rolling out training for a wide range of professionals was another recurrent theme of the conference. The presentations by Professor Hester and Professor Taket, in particular, referred to findings that prior to training, professionals such as teachers and doctors expressed a range of reservations about dealing with the issue of domestic abuse, including a lack of knowledge about how to respond and fear of causing offence. These findings also showed that after training, the vast majority of participants felt comfortable with raising the issue and able to deal with it confidently.

It was emphasised that the key message to transmit to professionals is that domestic violence is not a side issue, but part of their core business. Professor Stanko and Professor Taket provided examples to demonstrate this point:

- In the case of policing, 25% of all rapes in the U.K. are carried out against an intimate partner and most abusers will go on to commit violence outside the home
- As far as health care is concerned, domestic abuse affects more people than breast cancer, and is the primary cause leading to death and disability among women in Victoria, Australia.

Figure 6. Models of enquiry in health care settings

Research presented by Professor Taket, primarily drawn from the U.K. demonstrated the value of using models of enquiry in health care settings.

The results of the research revealed that:

- Enquiry is acceptable to majority of women
- Enquiry uncovers significant numbers of previously hidden cases of intimate partner abuse (IPA)
- Repeated enquiry at a number of consultations increases likelihood of disclosure
- Many women will not disclose abuse without being *directly* asked
- Trained staff find asking acceptable and helpful.

Two types of enquiry were presented: routine and selective:

Routine enquiry - asking *all* [possible] women in setting direct questions about experiences, if any, of domestic abuse, regardless of whether there are signs of abuse or whether abuse is suspected.

Selective enquiry - asking women directly about their experiences, if any, of domestic abuse where there are concerns or suspicions, including in the presence of particular signs/symptoms.

Professor Taket expressed a preference for routine enquiry, for the following reasons:

- It contributes to changing social attitudes to IPA
- It is less likely to make women experiencing abuse feel stigmatised
- It is less likely to compromise safety of women experiencing abuse
- Health professionals report that their perceptions about which women were free from abuse were often incorrect.

Models of Routine enquiry

- (a) GP asks one woman each surgery session
- (b) Practice runs a well-woman clinic; women are invited once every 3 years; every woman attending is asked
- (c) Practice nurse asks before/after every GP consultation
- (d) Woman is asked during routine home visit following childbirth
- (e) Woman is asked during antenatal sessions
- (f) Every woman attending A&E/minor injuries unit/walk in centre is asked.

Related research carried out by Professor Hester in the U.K. demonstrated that routine enquiry was most successful when the following factors were taken into account:

- Training for practitioners lasted at least 2 days
- Enquiry was incorporated into existing work
- There were good multi-agency links
- Duluth wheels were used
- Enquiry strategies were linked to safety planning.

Source: Presentations by Professor Ann Taket and Professor Marianne Hester, available at: <http://www.cosc.ie/en/COSC/Pages/WP08000071>

(c) Awareness raising measures are needed to educate the whole of society about the nature and unacceptability of domestic abuse.

Conference speakers stressed that awareness raising measures are crucial to improving public understanding around the issue. There is a tendency among the general public to associate abuse only with serious physical violence, even though other forms of abuse, such as controlling behaviour, have been identified as the most common indicators of risk. In many cases, this lack of awareness prevents the victim's friends, colleagues and neighbours from reporting what is happening. Often, this same misunderstanding also prevents the victim herself and even the services meant to support her from identifying the abuse.

Figure 7. Assessing risk of intimate partner femicide

Ms. Regan presented the results of research which aimed to identify some common behaviours in femicide cases which demonstrate that effective responses may be compromised by misconceptions about the nature of domestic violence on the part of the public and professionals alike. Contrary to common assumptions, an evaluation by Ms Regan of several existing studies presented found that femicide perpetrators were *less* likely to have:

- A father who abused their mother
- A problem with alcohol abuse
- Grown up in unskilled or unemployed households
- Been physically abused by their father
- Experienced long-term unemployment
- Worked in an unskilled job
- A previous criminal conviction
- Used violence towards their current partner.

Research carried out by Ms Regan in one English County into 7 cases of intimate partner femicide found that the following behaviours were all in evidence:

- Jealous surveillance – all 7 cases
- Relationship conflict – all 7 cases
- Controlling behaviour – in 6 cases
- Actual or potential separation – in 6 cases
- Perpetrator depression – in 5 cases
- Histories of violence – in 5 cases
- Potential suicide – in 5 cases.

In many of the cases examined, these factors had been noticed by friends, family and professionals. However, as they did not involve physical abuse, they had not brought to the attention of social, criminal or health services. As such, the results point to the importance of three key elements in preventing intimate partner femicide:

- Professional training in using risk assessment tools
- The use of routine and selective enquiry by a range of professionals
- Measures designed to raise awareness that domestic violence covers a broader range of behaviours than just physical abuse.

Source: Presentation by Ms Linda Regan, available at:
<http://www.cosc.ie/en/COSC/Pages/WP08000071>

Professor Hester stressed that the first step to addressing this problem must be to educate children about the issues at school. On the basis of an evaluation of UK domestic violence projects, Professor Hester presented examples of best practice in primary prevention (*Figure 8 below*).

Ms. Lucibello pointed to the benefits of utilising local and community specific media. Often, these outlets are more willing to publish positive messages about service availability than national media, and using them can help to get the message that help is available to hard-to-reach groups.

Figure 8: Primary prevention in primary & secondary schools

Professor Hester presented an evaluation of 27 different projects in the UK aimed at combating domestic violence, a number of which focused on primary prevention among children of school age. The aims of these primary prevention projects were two-fold:

- To create situations where young people could disclose that they were living with domestic violence and
- To reinforce the message from an early age that domestic violence in all its forms is unacceptable.

The evaluation found that the following types of activities were most successful:

- Projects which involved visual input such as drama, whether through performances presented by others, or through actively involving the children;
- Interactive and student-centred projects, built on activities students found interesting;
- Projects that took place in a variety of settings and were integrated across the entire curriculum. One-off events, by contrast, had a momentary rather than a sustained impact;
- Projects that started by working with the teachers, providing them with enough information to act as a resource for children and introducing them to specialised agencies.

As a resource for schools, Professor Hester recommended the 'Respect pack', which is available from the Zero Tolerance in Edinburgh: <http://www.zerotolerance.org.uk>

Source: Presentation by Professor Marianne Hester, available at: <http://www.cosc.ie/en/COSEC/Pages/WP08000071>

(d) Working with men around domestic violence is essential to address the root causes of abuse and challenge the behaviour of perpetrators

A number of speakers noted that one of the major causes of domestic abuse is a misplaced sense of gender-based entitlement on the part of the perpetrator. The presentation by Ms. Thangam Debonnaire, Respect, (UK national organisation for domestic violence intervention programmes), emphasised that the core challenge of perpetrator programmes must therefore be to transform the belief systems of perpetrators and make clear that abusive behaviour is absolutely unacceptable (*Figure 9 below*).

Both Ms Debonnaire and Mr. Coulter stressed that it is impossible to put in place an effective response to domestic abuse without taking into account the way in which men and women are socialised into gender roles. Ms. Debonnaire highlighted society's role by reminding the audience that, until only relatively recently, perpetrators' sense of entitlement was reflected in a legal system which did not outlaw rape within marriage. The success of the advice line presented by Mr. Coulter is indicative of the need for services aimed at men. This example illustrated that engaging with men, whether victims or perpetrators, is an essential part of a holistic response to domestic violence.

Figure 9. Perpetrator programmes: the UK experience

Ms Debbonaire presented her experience of working on perpetrator programmes and developing accreditation systems in the U.K. The underlying goal of these programmes was to change men's underlying belief systems about gender - based entitlement in relationships with a view to addressing their abusive and criminal behaviour.

Understanding motivations behind perpetrator participation

"Voluntary" participation is rarely so straightforward. Most perpetrators agree to take part in a programme for a combination of the following reasons:

- Wanting partner to stay or return
- Wanting to have access to children
- Needing to co-operate with child protection or family courts; social pressure from the family and others; and/or
- A desire to change.

Key elements of programmes

- Programmes vary, but most are based on the Duluth power and control wheel, (<http://www.duluth-model.org/documents/PhyVio.pdf>) and include pre group orientation and assessment, discussion, role play, re-enactment and group work
- The programmes challenge the perpetrator to identify and reflect on what he has done and the effects on his partner and children, to identify his underlying beliefs and discuss alternative ways of behaving
- They involve practical work putting into practice different beliefs and behaviour.
- The programme facilitator sets out clearly the expected changes and the consequences of not changing.

Essential safety factors

- It is important to recognise that while the programmes play an important role in reducing long term violence, in the short-term partners may be in greater danger
- The programmes must therefore be part of a coordinated community response involving all relevant state and voluntary agencies to monitor the safety of the partner
- Risk review and management is crucial, and all participants should be regularly reviewed for suitability
- Accreditation and inspection are key to safe practice. The U.K. system of accreditation and inspection against a national standard provides a framework for supporting the minimum safe levels of effective practice. Details are available on the Respect website: www.respect.uk.net

:

Programmes are not the only response and are meant to be used in combination with

- Criminal and civil remedies
- Prison-based programmes
- Mental health, substance misuse interventions prior to programme participation
- Couple counselling after programme participation and successful change
- Programmes working on fatherhood. New technologies can be helpful, with tools such as www.dads-space.com, providing online supervised access to children, while acting as a portal for support and advice.

Source: Presentation by Ms. Thangam Debbonaire, available at: <http://www.cosc.ie/en/COSC/Pages/WP08000071>

One key aspect of the model presented by Ms Debbonaire was to encourage perpetrators to engage with issues of violence and its association with notions of masculinity. She emphasised that the safety of the perpetrator's partner and children must be of paramount concern throughout the programme, and that good accreditation and inspection systems are essential in order to ensure minimum levels of safe practice.

Figure 10. Men's Advice Line

Background

The Men's Advice Line began as a small scale helpline piloted by Devon County Council for men experiencing domestic violence. It quickly became apparent that there was a much higher demand for the service than expected and that it was covering a much wider remit than originally intended. The majority of calls were coming from men in difficult relationships that are on the verge of break-up. However, there is no single dominant profile of a typical caller, and reasons for calling were complex. While often identifying themselves as victims, many, but not all, were in fact perpetrating violence. The demand for the service led to rapid expansion nationwide.

The main aims of the men's advice line are to:

- Give men a chance to talk about their experiences
- Challenge denial
- Provide emotional & practical support
- Encourage help-seeking
- Support men making positive choices in tough times
- Explore solutions not emotions.

Providing services for men requires an understanding of issues of gender and socialisation:

- Men are likely to seek help in different ways to women, preferring to access a helpline to face-to-face contact and solution-focused support. Men are also less likely than women to have alternative outlets to discuss relationship issues
- Perpetrators often aspire to traditional male traits of power and control and resort to anger and violence when they feel that they are losing their position of authority
- The helpline aims to challenge these assumptions and myths about the basis of relationships. The difficulty is to keep the men engaged with the service while challenging their behaviour and belief systems
- At the same time, the counsellors aim to remain non-judgemental and listen to every individual case, recognising that male victims also access the service.

Despite the challenges, the helpline recognises that whether its callers are victims or perpetrators, **engaging with men around domestic violence is essential in order to save lives.**

Safety factors

- Although it is vital to engage with men, Mr Coulter stressed that the safety of the caller's partner and children must be at the forefront of the goals of such services
- All callers are asked to waive confidentiality, and almost all have no problem with this
- All relevant agencies must be involved and informed about callers.

Benefits of the service

- Makes men visible
- Assists risk management
- Enhances women's safety
- Assists child protection.

Source: Presentation by Mr. Mark Coulter, available at:
<http://www.cosc.ie/en/COSC/Pages/WP08000071>

Evaluations to date in the U.K. and U.S. have testified to the value of such programmes, the benefits of which include:

- Greater protection for the partners of perpetrators on the programme;
- Better monitoring of perpetrators; and
- The provision of detailed, evidence-based reports of perpetrator behaviour for use by the criminal justice system.

It was stressed that perpetrator programmes must always be run in close alignment with the criminal justice system and under no circumstances should be offered as an alternative to criminal sanctions. It was also agreed, however, that such programmes should also be available to self-referred perpetrators or other referral sources.

4.4 Effective data collection and evaluation of interventions is required to ensure policy is evidence-based

In order to facilitate the continuous evaluation of the effectiveness of different responses, comprehensive, comparable data is essential. In some areas, such as elder abuse, policy responses may be hindered by a generalised lack of research (*Figure.11 below*).

Figure 11. Elder abuse in Ireland

Professor O'Neill's presentation highlighted a serious lack of data and research into the way in which domestic violence affects older people, citing by way of example one major WHO study into domestic abuse which only considered victims up until the age of 49. Professor O'Neill stressed that this could result in public policy responses failing to take into account the particular characteristics of older people, such as:

- Increased likelihood of physical and mental disabilities
- Decreased likelihood of reporting abuse after a certain age (70+)
- Increased inter-individual variability
- Reduced health reserves.

Professor O'Neill outlined the following forms that abuse of older people could take several forms:

- Psychological
- Financial
- Physical
- Sexual or
- Neglect.

Although in general older women are more likely to suffer abuse than men, men are also vulnerable. Abuse of men, and financial abuse in particular, increases with age. The main perpetrators of domestic violence against older people are the partner/spouse and other family members, including sons and, to a lesser extent, daughters and their husbands, particularly those living in the same house. More distant relatives and neighbours may also perpetrate abuse.

Policy in Ireland with regard to elder abuse is relatively advanced. The first formal report was published in 1975, followed by a series of significant policy reviews and recommendations. Effective implementation of these policies must now be the priority, Professor O'Neill stressed. The fact that most referrals in Ireland come from neighbours and relatives highlights the need to improve training of health care and social workers in identifying older abuse. The importance of enhanced joint working between domestic violence and elder abuse constituencies also remains of prime importance.

Source: Presentation by Professor Desmond O'Neill, available at:
<http://www.cosc.ie/en/COSC/Pages/WP08000071>

In other areas, inconsistencies in the way in which data is collected mean that information held by different agencies or jurisdictions cannot effectively be shared. Dr. Gill pointed out that a key problem is that services tend to collect data for internal purposes, therefore the information that is recorded varies from agency to agency, and cannot be compared or utilised in a meaningful way. In addition, academics, researchers and government departments tend to be resistant to sharing data and conclusions. Dr. Gill's presentation outlined the Canadian response to this problem: a standardised data collection model to facilitate the evaluation of how the system is responding to the needs of victims (*Figure 12 below*). Once again, the success of this model demonstrates the importance of multi-agency collaboration in responses to domestic abuse.

Figure 12. Canadian Observatory on the Justice System Response to Intimate Partner Violence (IPV)

Despite years of research into domestic violence in Canada, it was recognised that a number of barriers stood in the way of effective evaluation of public responses. Each institution and community was collecting and using data in a different way, and local community-applied research was not being shared nationally. Researchers realised that a system for collecting comparable data was urgently needed in order to foster the development of clear and consistent policies. The objective was to foster a coordinated effort to combat intimate partner violence, and reduce the consequences for victims and the costs to society

With this goal in mind, the Canadian Observatory was set up in 2005. It involves academics from 14 Canadian/international universities, research centres, counselling centres, foundations and government departments (federal/provincial/territorial), and aims to create standardised data sets on the justice system response to IPV and to develop regional, national and international forums for dissemination of research results.

To date, a pilot study has been undertaken, which consisted of testing a grid to collect information on domestic violence cases from crown prosecutor's files in five different cities in order to gather similar and comparable information from different jurisdictions. In 2008-2009 data collection will be starting in six Canadian cities.

The ultimate goal is to develop an integrated system of data collection and help stakeholders (courts, government, correction, probation, victim services) improve their own monitoring capabilities. The data collected will be used to evaluate the effectiveness of a range of responses, such as:

- Timelines of court proceedings
- Appropriateness of sentencing
- Managing risk and protection of victims
- Systems to encourage and support offender accountability and
- The effectiveness of specialised domestic violence court processes versus non-specialised court processes.

Moreover, as Dr. Gill concluded, the process of developing the system involved a cooperative effort between many different agencies that represents an outcome in itself.

Source: Presentation by Dr. Carmen Gill, available at:
<http://www.cosc.ie/en/COSC/Pages/WP08000071>

5. Next Steps

Work is underway on the mapping of current services and on the identification of critical difficulties with the current system. Cosc has also received an excellent response to the recent call for submissions on issues to be covered in the National Strategy. The outcome from this phase of work will be a context paper outlining where we are and what key stakeholders see as the problems to be addressed. A report of the call for submissions is currently being drawn up. A survey of public attitudes to domestic violence is due to be published by Cosc in October.

It is intended to begin consultation in November using this conference report, the context paper, the attitudinal survey and the report of the call for submissions as the basis for discussion. The consultation process will involve meetings with key stakeholders who already work with us, as well as a broad range of other stakeholders. Further details of this process will be available on the Cosc website in the coming weeks. It is intended to submit the draft Strategy to the Minister and to the Government in mid-2009.

Appendix

List of Conference Invitees

First Name	Last Name	Organization
Dermot	Ahern, T.D.	Minister for Justice, Equality & Law Reform
Malika	Aissaoui	Ruhama
Seán	Aylward	Secretary General, Department of Justice, Equality & Law Reform
Siobhan	Barron	National Disability Authority
Sarah	Benson	Women's Aid
Maureen	Bohan	Department Of Education And Science
Raymond	Briscoe	Office of The Director Of Public Prosecutions
Bob	Brown	Department of Justice, Equality & Law Reform
Molly	Buckley	Offaly Domestic Violence Support Service
Claire	Burke	Central Statistics Office
Rita	Burtenshaw	Eastern Regional Planning Committee on Violence Against Women
Catherine	Byrne	Irish Embassy, Washington, D.C.
Kieran	Byrne	Director, Waterford Institute Of Technology
Jerry	Carroll	Bar Council Of Ireland
Mary T	Cleary	Amen
Anna	Connolly	The Probation Service
Melissa	Corbally	Amen
Margaret	Costello	Health Service Executive
Mark	Coulter	Male Victims Development Officer, Men's Advice Line (MALE), U.K.
Caroline	Counihan	Rape Crisis Network Ireland
Marie	Crawley	North Western Regional Planning Committee on Violence Against Women
Mary	Crilly	Sexual Violence Centre Cork
Paul	Cunningham	National Crime Council
Margaret	Daly	ADAPT Services
Thangam	Debbonaire	Respect U.K. and Director of Domestic Violence Responses.
Michael	Dillon	The South East Domestic Violence Intervention Programme
Michael	Donnellan	The Probation Service
Caroline	Dooley	Rape Crisis Network Ireland
John	Doyle	The South East Domestic Violence Intervention Programme
Miriam	Duffy	Rape Crisis Network Ireland
Cyril	Dully	MOVE Ireland
Ciaran	Dunne	Dublin City Council- Housing & Residential Services
Marie	Falvey	Department of The Environment, Heritage and Local Government
Monica	Faulkner	The North East Domestic Violence Intervention Programme
Siobhan	Fearon	North Eastern Regional Planning Committee on Violence Against Women
Ursula	Ferneer	Probation Service
Peter	Fitzgerald	Former Deputy Garda Commissioner
John	Fitzmaurice	Health Services Executive
Patrick	Folan	Department of Justice, Equality & Law Reform
Brett	Gable	Domestic Violence Branch, Her Majesty's Court Service, U.K.
Norah	Gibbons	Barnardos
Jillian	Gilchrist	Scottish Government
Carmen	Gill	Muriel McQueen Fergusson Centre For Family Violence Research, University of New Brunswick, Canada
Anne	Goodwin	Family Support Agency
Margaret	Griffin	The Probation Service
Una	Halpin	The Probation Service
Maurice	Hayes	Chairperson, National Forum on Europe
Mairead	Hayes	Irish Senior Citizens
Deirdre	Healy	Irish Youth Justice Service
Gerard	Healy	Central Statistics Office
Eamonn	Henry	An Garda Síochána
Marianne	Hester	School For Policy Studies, University of Bristol, U.K.

Fergus	Hogan	Waterford Institute Of Technology
Charles J	Hynes	District Attorney of Kings County (Brooklyn) New York, U.S.A.
Jane	Keen	The Probation Service
Eileen	Kehoe	Department of Health & Children
Angela	Kerins	C.E.O., Rehab Group
Sylda	Langford	Director General, Office of the Minister for Children
Linda	Larkin	Department of Justice, Equality & Law Reform
Ann	Logan	Health Service Executive
Wanda	Lucibello	Chief Prosecutor, Special Victims Division, Office of District Attorney of Kings County (Brooklyn)
Tom	Maguire	Department of Justice, Equality & Law Reform
Seamus	Mannion	Health Service Executive
Margaret	Martin	Women's Aid
Monica	Mazzone	Women's Aid
Mary	Mc Donald	The North East Domestic Violence Intervention Programme
Denise	McAuley	Irish Prison Service
John	McCann	An Garda Síochána
Angela	McCarthy	The Dublin Rape Crisis Centre
Catherine	McCaul	Irish Prison Service
Rosaleen	McDonagh	Pavee Point Travellers Centre
Monica	McElvaney	ADAPT Services
Kieran	McGann	Garda Training College
Frank	McGlynn	Amen
Gary	McGovern	MOVE Ireland
Sean	McLaughlin	Department of Community, Rural & Gaeltacht Affairs
Kathleen	McMahon	Irish Prison Service
Joanna	McMinn	National Women's Council of Ireland
Kris	Miccio	Sturm College Of Law, Univ. of Denver, U.S.A.
Richard	Moore	Department of Justice, Equality & Law Reform
Marilyn	Mornington	Family Justice Council/Ministry Of Justice, U.K.
Sarah	Morton	National Network Of Women's Refuges & Support Services
Kate	Mulkerrins	Office Of The Director of Public Prosecutions
Paula	Mullin	Department Of Health And Children
Deirdre	Murphy	North Eastern Regional Planning Committee
Pat	Murphy	Office of Public Works
Joan	Murphy	Health Service Executive
Mary	Nally	Senior Help Line
Nobhule	Nduka	AkiDwA
Fiona	Neary	Rape Crisis Network Ireland
Gina	Netto	Lecturer, School of the Built Environment, Heriot-Watt University, Edinburgh, Scotland
Bairbre	NicAongusa	Department of Health And Children
Rosemary	O'Callaghan	Health Service Executive
Maire	O'Reilly	Waterford Institute Of Technology
John	O'Callaghan	Department of Justice, Equality & Law Reform
Deirdre	O'Donnell	Pavee Point Travellers Centre
Teresa	O'Donnell	Women's Aid
Leonie	O'Dowd	The Dublin Rape Crisis Centre
Anne	O'Gorman	National Crime Council
Sharon	O'Halloran	National Network Of Women's Refuges & Support Services
Claire	O'Kelly	Health Service Executive
Vera	O'Leary	Kerry Rape & Sexual Abuse Centre
Ellen	O'Malley-Dunlop	The Dublin Rape Crisis Centre
Margaret	O'Neill	The Courts Service
Desmond	O'Neill	Chairman, Elder Abuse National Implementation Group
Alan	O'Neill	The Men's Development Network
Denis	O'Neill	Commission For The Support Of Victims Of Crime
Larry	O'Reilly	MOVE Ireland
Jane	O'Shea	MOVE Ireland
Angela	O'Shea	National Network Of Women's Refuges & Support Services

Brid	O'Sullivan	Health Service Executive
Kathleen	O'Toole	Chief Inspector of the Garda Inspectorate
Paddy	O'Toole	Department of Justice, Equality & Law Reform
Nora	Owen	Commission For Support Of Victims Of Crime
Janet	Pickles O.B.E.	Cardiff's Women's Safety Unit, Wales
Sinead	Quill	National Council On Ageing And Older People
Linda	Regan	Child And Woman Abuse Studies Unit, London Metropolitan University, U.K.
Mary	Ronayne	National Network Of Women's Refuges & Support Services
Richard	Ryan	Department of Justice, Equality & Law Reform
Michelle	Shannon	Irish Youth Justice Service
Elizabeth	Stanko	Senior Advisor to the London Metropolitan Police Service, U.K.
Una	Stapleton	Probation Service
Ann	Taket	Head, School of Health & Social Development, Deakin University, Australia
June	Tinsley	Barnardos
Sandra	Tobin	Central Statistics Office
Mary	Troy	Health Service Executive
Dola	Twomey	Sexual Violence Centre Cork
Catherine	Twomey	Kilkenny Rape Crisis Centre
Marion	Walsh	Anti-Human Trafficking Unit, Department of Justice, Equality & Law Reform
Kate	Walshe	Health Service Executive
Noel	Waters	Department of Justice, Equality & Law Reform
Noel	White	An Garda Síochána
Niamh	Wilson	Domestic Violence Advocacy Service, Sligo, Leitrim And West Cavan
Nusha	Yonkova	National Women's Council of Ireland - Immigrant Council Of Ireland