

MIND THE GAP!

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

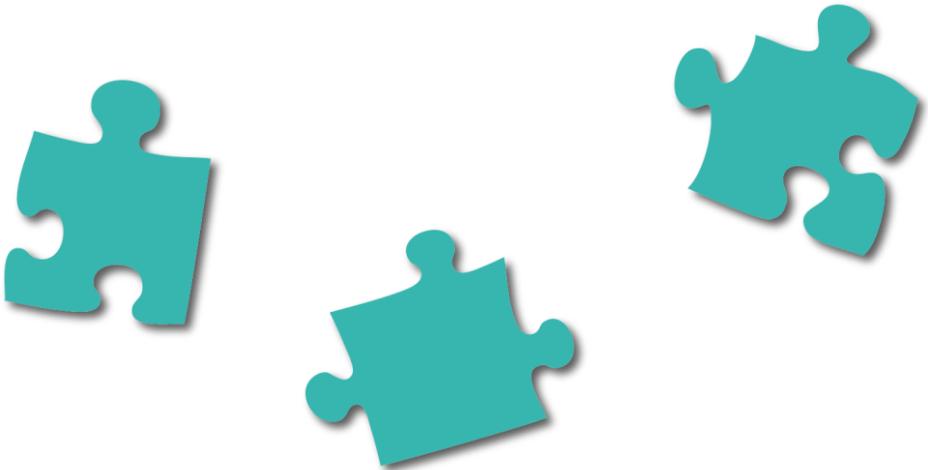
**Training Material
for the Police**

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1. Basic information

1.1 Characteristics of the research



During the research supported by the EU together with international fellow research groups from Austria, Germany, Portugal, Poland and England we analysed partner violence against older women. The sample contained women over 60 who suffered partnership violence. The method was to analyse police files, thus only such cases were examined that had been registered by a police department. Depending on the degree of violence and the circumstances, during the process of police investigation the case either got to the public prosecutor and to court, or it was closed without any further prosecution.

The aim of the research was a deeper understanding of such cases. An instrument developed especially for this aim made it possible to analyse the files uniformly. Thus, such data are examined as the type and length of relationship between perpetrators and victims, their potential illnesses and addictions. Besides it is found out if the victim has ever tried to terminate contact with the perpetrator. We also seek information about relatives, if they shared domicile with the people concerned and whether they were aware of the abuse or not. When examining a case we encode the type of maltreatment, alcohol-related factors, weapon use, presence of eye-witnesses or the relationship of the denouncer to the victim.

While processing data we pay special attention to the criminal investigation procedure, that is, we have examined the

mechanisms of actions taken by police forces in all those cases where there was partner violence detected against older women. We have been collecting data concerning the categorization of the crime at the police department, the actions taken immediately after the incident and the evidence used while investigating the case. We also studied if the victim is showing a supportive attitude during the proceedings and if not what the reasons could be.



The aim of the present research is to make a survey about the special needs of abused older women and to find possible support for them. On the other hand we are also willing to provide manuals for experts of the field and PR material for a wider public.

1.2 Partner violence – the concept

In the research we used the concept determined in the 1996/12 decision of the Economic and Social Council of the United Nations:

„For the purposes of this Declaration, the term "violence against women" means any act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life. Physical, sexual and psychological violence occurring in the family, including battering, sexual abuse in the household, dowry-related violence, marital rape, female genital mutilation and other traditional practices harmful to

women, non-spousal violence and violence related to exploitation”

Partner violence is such a form of violence within a family when a spouse, an ex-spouse, a cohabiting partner, an ex-cohabiting partner, a partner or an ex-partner commits violence against the victim.

1.3 Types of partner violence against older women

The UN Commission for Social Development in the report 5/2002/PC/2 determines the following types for partnership abuse:

- › Physical abuse
- › Sexual abuse
- › Emotional abuse (threatening, control, humiliation, isolation)
- › Financial deprivation
- › Neglect (omission of care)
- › Limitation of freedom (prohibition of leaving residence)

Different types of violence usually appear in combination. Those cases are rare when one single type is detected. The ratio of the types in the 82 cases of our sample to those in all cases is shown in chart 1. It is crucial to state though that our research is not based on a representative sample, thus it is not suitable for a national quantitative estimation. However, it is suitable for helping police forces evaluate their work in this respect.

Chart 1 Types of violence registered in the files % (N=84)

Type of violence	Latest incident	In all incidents
Physical	75.6	82.9
Sexual	4.8	4.8
Emotional	45.1	46.3
Financial exploit	4.9	6.1
Harassment	40.2	41.5
Coercive control	11	11

2. Characteristics of partner violence against older women



Major sources in the field don't provide much data concerning partner violence against older women. Social organisations dealing with the elderly pay little attention to the fact that women in this fragile and defenceless age group can also become victims of partner violence. Although surveys have shown that statistics contain less data about partner violence against older women than against younger age groups, but it is also found that latency is much higher in the case of the elderly. Due to old age, bad physical and mental condition, various emotional and financial dependencies much less victims ask for help either from the police or organisations providing social aid. Different research have also proven that partner violence starting at an early phase of the relationship does not vanish or decrease at an older age but the obstacles that avoid the victim from reporting on the cases grow bigger and bigger, thus the cases remain 'invisible'.¹

Devastated victims usually report to the police only when the abuse has already become very serious, however, doing it so

¹ Nägele, B., Böhm, U., Görgen, T., Tóth, O.: Intimate Partner Violence against older Women – Summary Report. 2010. www.ipvow.org

earlier severe violence could be avoided. That is why we have summarized the results of our research for the interest of the police, because in most of the cases they are the ones who have to handle these types of crime.

The majority of elderly victims have made the decision to denounce their partners only after several years. This happens because of the above mentioned economic dependencies and the environment's or other family members' judgements as well. The investigation is made even more complicated by the fact that usually there is no eye witness who would bear witness to the case (adult children or other relatives). Furthermore, the weak health condition of the perpetrator and victim often makes it impossible to reveal the case. Many relationships have failed years or decades before but due to the lack of asylums and temporary homes the old victim cannot escape anywhere.

3. Case studies

Work in groups and analyse one of the following case studies. Discuss if you have ever seen similar cases in your work. Answer the following questions and those connected to each case study.

- What potential steps are expected from police on local inspection?
- What consequences can follow after the report?
- What support can be provided to the victim?
- What kind of support to the victim would have been necessary proceeding the report?
- What partner institutions can be contacted in this case?
- What potential outcomes can the case have?



Further questions to the following case study:

- Role play. Two members of the group play the roles of victim and perpetrator.
- Was the suitable type of restraining order imposed in this case?
- What further support could be provided for the couple?

I. Case study

67-year-old victim reported to police on her husband because of harassment. In the denouncement she states that they have been living together for 47 years and their marriage had been ruined long ago and she has been living in terror because her husband is continually threatening to kill her: „I’ll screw you over, cut you throat as if you were a lizard and stamp on you!” He has been treated at psychiatry because he had suicidal tendencies and has been taking medicine for depression. She is afraid that once they’ll have such a serious argument that they’ll kill each other. He keeps on breaking the door on her room, she doesn’t have privacy.

A few months before the victim caused minor injuries to her husband, out of self-protection she cut his wrist with a knife and then she reported it to the police. Proceedings against the woman have been started. She has already wanted to divorce but her husband has always begged to be taken back.

According to their son and their neighbours they are always provoking each other and it is impossible to tell who is the one to blame. Neighbours have seen physical abuse when the victim was hit on the back by the suspect using a piece of wood.

According to the suspect arguments happen due to the nervousness of the victim but it has never come to violence. He is also afraid that one of them will die once it comes to real violence, he does not love his wife any more but he cannot go anywhere else. They sought an injunction banning him for 5 days from going near her, during which time they could possibly find some agreements. Harassment charge was withdrawn. (K16)

Further questions to the following case study:

- What opinions were formed about the couple by different people mentioned in the report?
- Has the local GP (General Practitioner) acted in the right way in this case?
- What potential advantages could have followed from the risk assessment questionnaire in this case?

II. Case study

75-year-old victim was shot in the temple and the heart by her husband then the 78-year-old perpetrator killed himself. The retired colonel owned the weapon illegally, nobody knew about it. The bodies were found by their son and his wife in the old couple's home. One of them was found in the bedroom while the

perpetrator was sitting in the living room with the pistol in his lap. The file contains a considerable amount of medical records about previous psychiatric treatments and reports by weapon experts. There are also plenty of photos of the autopsy, the spot and the weapon.

According to their son the father was an introvert person but he would always disturb the mother by saying she was cheating on him that has always been fully untrue. He doesn't know for sure if his father abused his mother physically or not, but he knows that the father would sometimes slap her on the face. His mother could only leave the house under the supervision of his father and she had to act according to the father's orders. His mother was an accommodating type of personality, thus she would always let him have it his way. The father had a stroke twice, he was taking medicine, his thinking and movements had become slower and he became a real maniac thinking his wife was cheating on him.

A lot of neighbours were interrogated and everybody said that at first glance they were a happy old couple living calmly, and that they would always walk in the street holding hands. They have just celebrated their 50th marriage anniversary. One of the neighbours knew about the husband's jealousy panics. Neighbours also explained that the couple kept themselves to themselves, they did not have any close contacts with neighbours.

The local GP was also interrogated. The GP said that the victim once complained about her husband's jealousy panic attacks thus

the doctor sent him to the psychiatry with obsessions. There the perpetrator got some anti-anxiety drugs that he had been taking ever since. During one of their arguments, when his son and his daughter-in-law were also present, he said that his son should keep their grandson away from the grandmother because the kid was already a grown-up man. After the autopsy, the medical opinion and weapon expert opinion it has been found that the perpetrator was the deceased man, the case was closed. (M18)

Further questions to the following case study:

- What kind of attitude is to be expected from the perpetrator during the testimony?
- What kind of role do witnesses have?
- Could restraining order be imposed in this case?

III. Case study

60-year-old victim reported her 62-year-old husband, who threatened to kill her, strangled her and pushed her away aggressively in the room. According to the victim her husband is an alcoholic and it is unpredictable what he's going to do when he has drunk too much. When he is under the influence he always threatens to kill and cut her body to pieces by a saw and burn her in the house. The previous year he dug a hole in the back of the garden and threatened to bury her there when he will have cut her body into pieces by a chainsaw.

Victim and perpetrator have been living together for 46 years. According to the victim her husband has to be impeached because she lives in a constant loathe, she always has to escape from him, she does not want to die, she wants to live. The perpetrator denied everything saying he was only joking he did not mean those things, and his wife has been too nervous lately. As we were able to spend so much time together we must bear this little time is left.” Their son and three of their neighbours were interrogated. All of them supported the fact that the perpetrator is an alcoholic and is continually cursing at his wife but nobody has seen physical abuse. Only medical evidence has shown physical abuse. Thus the case was closed. (K15)

Further questions to the following case study:

- Role play. Two members of the group play the roles of victim and perpetrator.
- Could restraining order be imposed?
- What is the role of the presence of the witness?
- What are the types of dependence that can be terminated in this case? What type of support is needed?

IV. Case study

February 18, 2006 a 60-year-old woman reported her ex-husband because he physically abused her in their home and her thumb has broken. They have divorced after 26 years because he was an

alcoholic and behaved aggressively when drinking, abusing her many times before.

During the divorce proceedings their house was shared. The living room belonged to the victim while the bedroom to the suspect. The ex-husband is a disabled pensioner so on weekdays he spends more time in the house while in the weekends the victim is more likely to be at home. Their son lives with them on the first floor by himself. When the incident happened they were arguing heavily and started to fight when he slapped her many times on the face and on the nape, then he squeezed her thumb so strongly that the first knuckle has broken. According to the victim the suspect was under the influence when the incident happened.

Medical opinion showed twice that the injury could happen during such a fight. The suspect denied the case when being interrogated. Their son was also interrogated and he witnessed in favour of the suspect because he said he did not see the incident but he thought his mother made his father nervous. When being confronted several times the suspect and their son denied the case.

The case was sent to the public prosecutor where it was closed due to lack of evidence. (K13)

Further questions to the following case study:

- What is the real mental/physical state of the victim?

- List those potential obstacles that can avoid the victim from giving confession.
- Did the police officer take the right steps when investigating on the spot?

V. Case study

September 11, 2009 the 60-year-old victim was taken to the hospital in Baja. Fracture on the hand was diagnosed. The hospital reported the case to police saying the victim was thrust away and kicked all over, thus her hand has broken. It all happened when the victim was consuming alcohol in the company of her husband.

The perpetrator and the couple's son was interrogated and they both stated that the victim is an alcoholic, she cannot communicate properly, they cannot understand what she is saying. According to their testimony that night the victim asked them to turn the volume down on the TV that they did not do. According to the police records the suspect was also under the influence but he was not drunk.

Because of the TV being loud they did not hear anything but they said that they found the victim in the other room where she must have fallen on her own and thus broke her hand.

Police tried to interrogate the victim but she was not in an accountable state and her speech was out of context.

The case was closed by the police due to lack of evidence. (K7)

Further questions to the following case study:

- What was the real health condition of the victim?
- Did the judge take the right decision?
- Could restraining be imposed in this case?

VI. Case study

A 65-year-old victim has reported her 66-year-old husband several times because of minor bodily harm. First December 12, 2010 then July 27, 2011 and August 17, 2011. Her husband has strangled her, cursed at her, slapped her on the face several times and once he hit her in the back with a stick. The woman is seriously sick, she has several tumours and has been taking medicines for her bipolar disorder for 30 years.

She was first taken to hospital 30 years ago when her son has passed away amongst unclear circumstances. According to her they still have not processed the case. For one year they have had been attending a psychiatrist, but after a while her husband finished having the treatment while the victim has been kept in hospital several times due to her depression.

According to the testimony of the victim their relationship has become problematic in the last few months because her husband has been behaving aggressively and he tends to abuse her physically. The first time she had to call the police was on Christmas Eve but she did not start the proceedings with regards

to the holiday, however, the abuse has been going on. Later he denounced her husband to police and asked the authorities to impose a restraining order against her husband since he was threatening to kill her in case she denounced him.

The victim was interrogated several times at the police department but in the files there are no records concerning the interrogation of the suspect, however, his summons is mentioned in the minutes of the victim's interrogation. Three of the neighbours were interrogated and they said they heard the arguing in which the woman was the loudest and the most aggressive. One of them even heard such words as: "C'mon, hit me, hit me!".

Later a psychological check-up of the victim was initiated in order to see if she was accountable (due to her disease) when the incident happened. The public prosecutor later proposed confrontation of the parties and psychological examination as well. There are no records about the confrontation but there are some about the psychological check-ups. The psychiatrist and the court appointed medical expert stated that she was unaccountable because of her mental illness. They also supported their argument by stating that the victim is going to need attendance due to her serious disease.

According to the records in the files the prosecutor has acquitted the perpetrator based on all these points. (B20)

Further questions to the following case study:

- Role play. Two members of the group play the roles of the victim and the perpetrator.
- Could a restraining order be imposed?
- Did the police officer investigating the case and the public prosecutor take the suitable steps?

VII. Case study

71-year-old victim reported her 72-year-old husband regarding that he has hit her in the face with the fist and her nose had broken. As she explained they were having financial problems. They have been married for 26 years but in the last year their relationship has deteriorated, so they wanted to divorce but it has turned out that they could have sold their house at a very low price thus they couldn't separate and they continue having financial problems.

The main reason for their arguments was if her daughter could inherit their flat or not. The victim wanted her daughter to inherit the real estate in 100% in case the woman passed away first. As she described her daughter had bad living situations thus she wanted to support her.

A few weeks later police was called again when the situation became tense. This time they injured each other mutually, their bruises were taken care of by the ambulance on the spot.

During the proceedings the victim asked for the closing of the case. She said she regretted the denunciation, and that they've been having enough trouble, they don't need more". They were afraid that they wouldn't be able to pay the charge to be imposed.

The suspect confessed his deed and regretted it. The victim has demanded the closing of the case several times and she found excuses for missing the interrogations. She was informed by police that the case in this phase could not be closed.

The public prosecutor acquitted the accused, with regards to police files saying that the victim has regretted her denouncement and that the case has been settled. (B21)

Further questions to the following case study:

- Role play. Two members of the group play the roles of the victim and the perpetrator.
- What attitude was shown by the victim according to witnesses?

VIII. Case study

January, 30 2006 the 60-year-old victim reported her 28-year-old partner has seriously abused her physically. They were quarrelling in the street when it turned into physical violence and he hit her in the face with the fist many times, and then dragged her along on

the pavement by her hand. Thus her nose started bleeding heavily.

When police officers arrived on the spot the victim was waiting for them in the street but they only talked to her through the car window, they were not interested in any details and did not interrogate any witnesses. They suggested her getting a doctor's medical report and then taking legal proceedings. The victim did so and reported the police officers' omission. Minutes of the report and the officers' testimony can be found in the files.

According to the victim her life has become a nightmare ever since she started to live with her 28-year-old partner 5 years ago. He keeps on getting money out of her and he's been blackmailing her and threatening to beat her up in case she does not give him money. He is continually torments her and threatens her verbally. She is very afraid thus she always gives him the money. She cannot do anything; he terrorizes her and even threatened to kill her. She thinks she has two options: she either lets him kill her or she gives him money. She has tried to send him away many times, or not to let him into the flat but the man always begs himself in. The victim has already denounced him for theft and bodily harm, for which the perpetrator has already spent two years in prison. After his release their relationship went on.

Police has made up for their omission and interrogated some witnesses. Several witnesses were summoned: neighbours and shop assistants from the neighbourhood. Most of them confirmed

the report and noted that the woman should not have started a relationship with such a young guy.

At the next interrogation the victim has withdrawn her denouncement on bodily harm and she only wanted to go on with the proceedings because of the violation of the privacy of her home. Besides in her opinion blackmail and truculence have also happened in the case. According to her she has been abused ever since by the perpetrator, and she does not see why the police is so helpless despite the fact that domestic violence is such a prevalent topic. Her life has been a nightmare ever since.

The perpetrator has visited her again a month later when he slapped her in the face again and although no serious physical injury has happened, the glass window of the wardrobe has broken.

The perpetrator kept on turning up at the victim's house that she always reported to police but they could not catch him. (B16)

Further questions to the following case study:

- Role play. Two members of the group play the roles of the victim and the perpetrator.
- Did the police officer take the right steps when dealing with the case and categorizing the criminal acts concerned in the case?

IX. Case study

The victim has started several proceedings because of the following: causing minor bodily harm, her husband hit him on the head in her home, then he cursed at her daughter calling her a whore threatening her with a knife to kill her. The third case was when the husband intended to rape her. He pushed her down on the bed and ordered her to spread her legs. Meanwhile he didn't let her go and pushed both of her hands down. This was recorded by the public prosecutor as a violation of the right to personal freedom and not as sexual abuse.

Following the case a month of restraining order was imposed on him during which he tried to go home when he was under the influence but he wasn't let in because he was kicking the door. At this point police has taken him and proceedings started against him for truculence.

According to the victim they have been living together for 46 years and her husband has been abusing her for decades since he is consuming alcohol. The situation has become even worse ever since he retired. He is drinking every day; the victim thinks he drinks like a fish. He is harassing her almost every day, hitting her on the head, cursing at her and he's accusing her of going to bed with everyone but him. He often tries to strangle her, he threatens to kill her and abuses her sexually as well lately. They live on a separate budget but they share the same room and bed. The victim says she is going to have a nervous breakdown because of the continuous abuse.

Their older daughter testified that her father has been harassing her mother ever since their childhood, and he also threatened to kill her (the daughter) with a knife. They are afraid of him, they cannot handle him and she saw him hitting her mother.

Their younger daughter also testified that she saw her father hitting the mother and that her father was consuming alcohol and when under the influence he becomes violent with their mother.

The perpetrator confessed that he is consuming alcohol regularly and that he is unconscious at times. According to him, he just wanted to fulfil his conjugal duties however, his wife did not want to return them. During the restraining order he just wanted to take his clothes but he wasn't let in. They often argue at home, he is being cursed at too and when his daughter is a loudmouth sometimes he cannot help slapping her.

The public prosecutor has closed the case concerning the violation of personal freedom, because the victim gave controversial testimonies. (She was interrogated four times.)

The public prosecutor's office has sent cases of truculence and harassment forward to the court. (M5)

Further questions to the following case study:

- Could restraining order be imposed?

- What other actions could be brought in this case by the police officer?
- Did the judge take the suitable decision when passing the sentence?

X. Case study

June, 16 2009 the victim reported her 61-year-old husband. The victim was grabbed from behind while phoning and the perpetrator started to hit her head with the receiver. Then he kicked her over and she fell. The perpetrator was held down and pushed away by their son who was present at the incident. The victim didn't go to the doctor's for days, then when she did the doctor diagnosed a broken nose and several bruises on her body. There were blood shots around her eyes because her husband tried to gouge out her eye with the receiver.

According to the victim they have been married for over thirty years but it has been deteriorating for the last ten years because her husband was consuming alcohol and he was aggressive when under the influence. She didn't want to divorce because of the kids and the flat, since they couldn't have solved the domicile situation. The man has hit her several times but not as heavily as this time. She was ashamed of what has happened that is why she didn't go to the doctor's.

Their son's testimony was identical to that of the victim and he mentioned that it was him who separated the two.

The husband has partly admitted what he's done and he added that they share a flat but their relationship has terminated. His wife has had a relationship with a man in the last ten years and she's flirting with him in his hearing. On that day he couldn't stand it no more and he lost it.

According to the court appointed medical expert the victim has suffered five different injuries and one of them counts as a serious bodily harm.

The perpetrator got a suspended prison sentence. (B14)

Further questions to the following case study:

- For what reasons do victim and perpetrator stay in touch?
- What escapes are possible for the victim?
- Could restraining order be imposed?

XI. Case study

An 84-year-old victim denounced her 55-year-old husband. They have been married for four years. The man is a Romanian citizen. According to the victim their relationship has become awful right after the marriage. The man usually does not spend time at home, and many times he is away during the nights as well. Whenever he turns up, he is checking his wife, threatens her and behaves violently. He says: 'I'll kill you! You are a right mess, you silly monkey!' Neighbours have already complained at them

saying they are being loud and once they even called the police. Once the victim has called her girlfriend to bring her medicine and food because she was sick. When the woman knocked at the door it was the husband standing there and he chased her away shouting nobody can enter the house. He squeezed her leg in between the door and the frame. When the woman could free herself he still stabbed in the air with a knife a few times to scare her. She could not call then victim on the phone either because the perpetrator did not pass it to the victim, but hung up on her and he shouted at her not to call again. At the incident analysed here the perpetrator hit the victim on the head, thrust her to the floor and kicked her all over. The victim was taken to hospital with a concussion of the brain and a fracture of a rib.

Apart from the victim, the victim's girlfriend and the perpetrator's female acquaintance were interrogated. The victim's testimony has not yet been included in the files because he has asked for an interpreter.

The perpetrator has also denounced the victim for causing minor bodily harm. Meanwhile the victim has taken divorce proceedings. Thus the three cases have been merged.

It turned out from the files that the victim has already taken divorce proceedings but since the perpetrator has begged himself back to her, the victim has stopped the proceedings. They own their house together thus complicated proceedings were started for the real estate. (B6)

4. Suggestions

- Creating interdisciplinary groups in order to handle the cases effectively
- Involving family members in interdisciplinary groups
- Establishing more shelters and crisis centres
- Make it more obvious which are those organizations that definitely deal with partner violence against older women
- A communication with victims that is free of prejudice
- An effective use of legal regulations
- Consider vulnerability, potentially bad physical and mental condition of older women when handling the case
- Make proceedings faster with regards to the needs of older women
- Rating risk factors in the cases of domestic abuse
- An after-care by police when handling a recurring case
- Raising awareness amongst professionals and the immediate family and environment of the victim
- Media campaign emphasizing the topic

5. Risk assessment sheet

a) How worrying are the records of abuse?

.....

b) Does the abuse become more and more serious, frequent or intense?

.....

c) Does the abuser use or threaten to use weapon?

.....

d) Does the abuser threaten to kill the victim or anyone else?

.....

e) Does the victim want to separate from the partner or have they just divorced?

.....

f) Does the perpetrator abuse or molest the victim?

.....

g) Does the aggressor keep on being jealous to the partner?

.....

h) Is there emotional abuse as well?

.....

i) Is the victim socially isolated? To what extent?

.....
j) Was there sexual abuse?
.....

k) Was there any threatening on either side to commit suicide or any other self-impairment?
.....

l) Does either of the parties have any mental health problems?
.....

m) Does the perpetrator use any drugs or consume alcohol?
.....

n) Does the victim have any disabilities?
.....

o) Does the abuser have any criminal records or is he on a blacklist? Does the abuser tend to neglect court decisions?
.....

p) To what extent does the victim feel unsafe?²
.....

² Barron, J., Radford, L.: Domestic Abuse Training Manual for Health Practitioners. National Domestic Violence Health Practice Forum.

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