

## VIPROM – NEWSLETTER

### Victim Protection in Medicine

Dear readers,

this is already our **third newsletter** of the EU Project VIPROM: “*Victim Protection in Medicine - Exploiting practical knowledge of medical staff to enhance the professional contact with victims of domestic violence*”! We are already halfway through our project, which has been running about 18 months. In very short time, a lot has been achieved in very high quality, which has also been recognised by others and opened many new doors to present our results. **VIPROM is on the move!!!**

As coordinator and lead of the work package designing new training tools for our VIPROM training platform on domestic violence, I am very proud that the **training platform is now available in English, German, Swedish, Greek, Italian as well as in Austrian adaption** after many months of hard work. This is indeed a milestone. These training materials will be used by trainers to teach our stakeholder groups at national level using stakeholder-tailored curricula developed by VIPROM. A train-the-trainer course in English in Münster for our partners, organised by the coordinator, will kick-off our training phase in early September.

There were many more highlights we would like to share with you and I invite you to read more about them in this issue of the newsletter!

Sincerely, yours



Bettina Pfleiderer  
Coordinator of VIPROM

## UPDATE ON VIPROM'S ACTIVITIES IN A NUTSHELL

### 3<sup>ND</sup> consortium meeting in Vienna, Austria



Group picture of the consortium in Vienna in front of the meeting venue (Photo: private)

After meeting in Münster (Germany) and in Parma (Italy), the VIPROM consortium met this time in Vienna (Austria) 20-21 February 2024. The **engaged collaborative discussions in Vienna** were supported by breakout and group brainstorming sessions. During the 1,5 days, we looked back to what we had achieved and ahead, e.g. setting up a strategy for our **train-the-trainer** programme and our **pilot trainings**. The meeting in Vienna was also the kick-off for the first evaluation round of the training modules on the training platform to optimise our training tools further.

We enjoyed not only great Austrian food and cakes, but also a tour in the medical historic museum. A big thank you to our partners VICESSE for the good organisation and their Viennese hospitality! **We are looking forward to our next consortium meeting in Uppsala (Sweden) in 17-18 September.**




### VIPROM Deliverable on “Stakeholder training Needs Assessment” is online now!

We are happy to share with you that we have reached another project milestone! You can now officially access the public version of our Deliverable 2.1: “*Stakeholder Needs Assessment*” on our project website. In the document, you will find a qualitative report on the specific needs for DV training in the medical sector for Sweden, Germany, Austria, Italy, and Greece. The research has served the twofold purpose to assess both, the specific **needs for DV training** in the medical sector for **various stakeholder groups** (physicians; dentists; nurses; midwives and students, including: medical and dental students, nursing students and students of midwifery science), but also the **commonalities** between them. Read our interesting results by downloading the Deliverable [here](#).

### VIPROM training platform on DV is available in 6 languages now!

We are very excited to share with you that at month 18 of the project, in addition to the already existing English versions, the training modules are now available in **Swedish, Italian, Greek and German and Austrian adaption** on the VIPROM training platform. In the last months, the VIPROM consortium has put a lot of effort on reviewing, updating and translating our modules. The modules have been also reviewed by national experts and will be – based on their as well as on the trainer’s feedback using our modules - further optimised in spring 2025.

The platform is available for several languages:

	<a href="#">Bitte klicken Sie hier für die deutsche Version der Plattform.</a>
	<a href="#">Cliccare qui per la versione italiana della piattaforma</a>
	<a href="#">Παρακαλώ πατήστε εδώ για την ελληνική έκδοση της εκπαιδευτικής πλατφόρμας.</a>
	<a href="#">Bitte klicken Sie hier für die Module, die an den österreichischen Kontext angepasst sind.</a>
	<a href="#">Vänligen klicka här för den svenska versionen av plattformen.</a>

**Did you also know that a new module on self-care can be found on European training platform on domestic violence<sup>1</sup>?** We invite you to take a look at the new **Module 9 “Self-Care”** [here](#).

But we have more existing news to share! **Read more about it in the next part.**

<sup>1</sup> The module was created by our sister project IMPROVE, which we introduced in our [last newsletter](#).

## VIPROM training courses are about to start!

After the training modules are online available in the VIPROM partner national adaptations now, we are going to take the next step and start with our national train-the-trainer courses and national stakeholder trainings. In the first round, there will be a **Train-the-Trainer** course 3-4 September 2024 in Münster, Germany, organised by VIPROM's coordinator Bettina Pfeleiderer and her team. Afterwards, we will start to **train medical doctors, midwives, nurses and medical students in our five partner countries**.

Are you interested in participating in one of our national VIPROM trainings? Please contact [Bettina Pfeleiderer](#) for more information about the available training-courses in Germany, Austria, Sweden, Italy and Greece!

Moreover, we want to give you a little sneak-peak: next year in spring we will have a 10-session English webinar training on DV, open to all medical professionals and all across Europe. In the next newsletter issue and on our Social Media channels, you will find more information on our "European Webinar Series"!

## And last but not least...

... there are two new [blogs](#) online. In [Dentists see more than just teeth!](#) you can read about **why exactly are dentists important first responders in identifying DV**. In the blog of our cooperation partner [IRISI](#) (Identification and Referral to Improve Safety Interventions), you can find out how the [programme ADVISE](#) (Assessing for Domestic Violence in Sexual Health Environments) can support staff in recognising and responding to patients affected by DV, Sexual Violence and Abuse, offering direct referrals to specialist services.

Also, VIPROM coordinator Bettina Pfeleiderer was speaker on the IMPROVE Webinar — *Breaking barriers: How can AI support victims of domestic violence?* She gave an introduction to the topic of domestic violence and its prevalence, an explanation of Artificial Intelligence (AI) and how it works and how AI can be used in DV. The webinar was recorded and can be watched through [this link](#).

## VIPROM coordination team received an award

Big Win for VIPROM Team in Germany! We're thrilled to announce that the VIPROM coordinator, [Bettina Pfeleiderer](#), and her team — Madeleine S., Greta Heule, and Dr. Jana Bregulla — have won the prestigious Wrigley Award, clinching 1st prize in the "Medical Practice and Society" category! Their innovative training tools and materials for dentists and dental students, focusing on "Child Dental Neglect," have set a new standard in dental education. The team is already gearing up to roll out tailored training sessions on this critical topic.



Since 1994, the Wrigley Award has celebrated excellence in caries prevention research and practice, and this year, Bettina Pfeleiderer proudly accepted the award on behalf of the University of Münster-VIPROM team at a dental congress in Leipzig, Germany. Stay tuned for more groundbreaking work from this powerhouse team!



## INTRODUCING: our sister projects IMRPOVE & ISEDA

In our last newsletter, we have already talked about the collaboration with our two sister projects: **IMPROVE** and **ISEDA**. Since both projects also work on the issue of domestic violence (DV), we want to create synergy effects and a holistic approach towards combating DV. In this issue, we want to tell you more about ISEDA. Do you know that AI can play a significant role in combating DV?



# ISEDA

The **ISEDA project (Innovative Solutions to Eliminate Domestic Abuse)** aims to combat and eliminate domestic violence by employing an enriched European approach, utilizing modern technological tools and practices and improved multi-sectoral expertise in its activities. The project

will develop a **chatbot**, which will employ empathetic language and inform victims on ways to get help and assistance, as well as give information on the **different types of domestic violence, how to prevent, detect and investigate it**. An integrated **data platform** will provide advice on how to gather court proof evidence and record trends on the nature, frequency and circumstances of domestic violence. Through **interactive learning** targeting **primarily police authorities**, participants will develop the necessary skills to better assess domestic violence situations, respond accordingly and provide better assistance to victims. Awareness raising campaigns and education programs will aim to sensitize the general public, but also engage students, foster know-how on deconstructing toxic gender stereotypes and promote healthy relationships. Perpetrator programs will serve as a chance for positive change for those who perpetrate violence, increasing the quality of life of women and their children, of men themselves and related families and communities.

Here is the link to their...

- Website: <https://iseda-project.eu/>
- LinkedIn page: <https://www.linkedin.com/showcase/iseda-horizon-europe/>
- X page: <https://twitter.com/IsedaProject>

## DOMESTIC VIOLENCE - WHAT'S NEW IN EUROPEAN POLITICS?

In our last [newsletter issue](#), we already talked about the ratification of the **European Council Convention on Preventing and Combating Violence against Women and Domestic Violence** on the 28th of June 2023. Now, on the 24<sup>th</sup> of April 2024, the European Parliament approved the first ever EU rules to combat violence against women.

These rules include:

- **Measures** to prevent rape and improve understanding of consent
- **Criminalising** forced marriage and genital mutilation
- **Banning** 'cyber-flashing' or the sharing of private information without consent
- **Specialised support** for victims.

On 7 May 2024, the EU Council adopted the first EU law on combating violence against women.



The new legislation list will include a longer list of serious circumstances for offenders including severe penalties. The focus will be on making it easier for victims to report crimes through adopting a new framework under which offenders could face prison sentences of up to five years. Such sentences could be more severe if the victims are children, spouses, ex-spouses, politicians, journalists, and human rights activists.

The legislation focused on the importance of healthcare service and the prioritisation of healthcare accessibility, including sexual and reproductive health services:

“Today Parliament has taken the first steps to make Europe the first continent in the world to end violence against women. This is a wide-ranging piece of legislation that will prevent violence against women, protect victims and prosecute perpetrators, thereby ensuring a holistic approach to tackling these heinous crimes. There can be no equality without eradication of violence against women; we must ensure that there can be no impunity for those who commit such crimes.” (The co-rapporteur from the Women’s Rights and Gender Equality Committee, Frances Fitzgerald, European Parliament Pressroom, 2024)

The EU countries have three years to transpose the rules into national law.

## Violence against women



1 in 3

women in the EU aged 15 or over have experienced physical and/or sexual violence



1 in 2

women in the EU have experienced sexual harassment



1 in 10

women in the EU have faced online harassment

Source: euractive.com

Link to the Directive on Combating Violence Against Women and Domestic Violence : [https://www.europarl.europa.eu/doceo/document/A-9-2023-0234-AM-298-298\\_EN.pdf](https://www.europarl.europa.eu/doceo/document/A-9-2023-0234-AM-298-298_EN.pdf)

The EU council adopted first-ever EU law combating violence against women on the 7<sup>th</sup> of May, 2024.

### Reference:

European Parliament. (2024, April 24). Parliament approves first ever EU rules on combating violence against women. Retrieved from <https://www.europarl.europa.eu/news/en/press-room/20240419IPR20588/parliament-approves-first-ever-eu-rules-on-combating-violence-against-women>.

## GOOD TO KNOW – NEW APPROACHES IN THE PRACTICAL WORK

### Paediatrics - looking beyond the obvious!

Due to their profession, the focus of paediatricians in paediatric practices is on recognising possible signs of the presence of **domestic violence against children**. This includes neglect as well as sexualised or psychological violence. There are already many helpful tools and materials on how to **recognise, address, document** and **act** on DV when children are affected.

In Module 3 of the European Training Platform you can already find **helpful screening questions for children** in case DV is suspected. Here on the right side, you can find one of many examples from the spotlight on Paediatrics:  
→ → → → → → → → → →

However, if one does not look “beyond the obvious”, opportunities to identify DV within the family system are often missed. This can happen when it is neglected to ask **whether the accompanying parent is exposed to violence at home**. Various studies (such as the one cited below) not only show the serious effects for children of witnessing domestic violence against a parent, but also the need to be taught about the possible consequences in depth:

*“The topic of domestic violence should be addressed in greater depth in specialist training for paediatricians. The training institutions have a major role to play here. Courses to prepare for the specialist examination should also include the topic in their curriculum. Only if the paediatricians are aware of the consequences of domestic violence, they will pay attention in their daily work, e.g. to clues in the medical history or physical symptoms of all affected persons. In general, the assessment of risk factors, such as domestic violence, or other stress factors, such as mental illness or substance abuse of the parents, should be included in the medical history when treating children and adolescents.” (Kratzsch et al. 2014/2015<sup>2</sup>, freely translated)*

Therefore, in this issue we want to switch the focus from the child to potentially affected grown-ups by presenting some **screening questions to assess whether the father or mother experiences domestic violence**.

In the following, you can find some examples:

- “In my discussions with your daughter/son, I have the impression that your child is stressed in the family situation. Do you have any ideas why this can be the case?”

Screening questions

Ask simple questions. The child should not be “interrogated”. Allow silences. If the individual cries, give enough time to recover.

Phrases to use

“Is there something you’re sad or worried about?”

“Some kids can get scared at home. What do you believe may scare them?”

“What happens at your house (or daycare) when people get angry?”<sup>43</sup>

Do not use

“Is the mark on your arm a result of parental physical punishment?”

<sup>2</sup> KRATZSCH, W., I. MENRATH und M. STEFFENS: Auswirkungen von Partnerschaftsgewalt auf Mütter und ihre Kinder und die Rolle der Pädiatrie. *Pädiatrische Praxis* **83**, 539–550 (2014/2015). Hans Marseille Verlag GmbH München. S. 545

- “I have the impression that you don't feel comfortable in your partnership and that you feel threatened. Such experiences can trigger emotional tensions that also affect the children. If you wish, you can talk to me about this too...”
- “In addition to the (...) problems for which your child is being treated by us, I have the impression that your son/daughter is also under stress. It seems that your child is worried about you. Could there be a reason for this?”

### ...and then?

If the parent confirms the suspicion...

- Show your openness to the topic
- Communicate that there is no "good" reason for violence
- Make it clear that victim decides on the next steps to take
- Avoid asking for reasons for the violence
- Encourage the victim to seek help in coping with what has happened
- Accept it if he/she does not want to take immediate action (keep the "door open" even if she/he does not want to go through it immediately).
- Arrange a follow-up appointment.
- Assess whether the victim or child are still at risk.

The following table can serve as reference for initiating further steps:

<b>Latent danger</b>	<b>Fears that the threat will increase again at some point:</b> <ul style="list-style-type: none"> <li>• Provide information about support services (information brochure or similar)</li> <li>• Offer the victim your support in making the first contact with a service</li> <li>• Arrange a follow-up appointment</li> <li>• Make a note in the medical file that will not be passed towards the health insurance</li> </ul>
<b>Acute danger</b>	<b>Feelings of acutely being threatened and needs protection:</b> <ul style="list-style-type: none"> <li>• Inform the victim about the women's shelters (in case of the mother) and the possibility of a restraining order by the police</li> <li>• If necessary: Help the victim to go to from the medical practice directly to a safe place (friends, relatives, shelter).</li> <li>• Call a taxi if necessary</li> <li>• Activate your practice's internal safety plan</li> </ul>

### Please note...

- All employees should be informed about the procedure for dealing with acute violence (check: do you have an **internal safety plan**?)
- The information about **local support services** should be complete and accessible
- Practice staff should be informed that **special discretion** is required when passing on information to the mother or father
- **No information** should be given to the violent partner
- Also **take care of your own safety**.

## TOPIC OF INTEREST IN DV RESEARCH of VIPROM PARTNERS

### Femicides in Austria – New research project incorporates physicians' knowledge

The Institute for Conflict Research (IKF), one of our VIPROM partners, was founded in 1975 and is a research institute with the legal status of a non-profit organisation. The purpose of the institute is on research, related to political and social conflicts on an interdisciplinary level and to develop possible solutions as well as - in the sense of scientific policy advice - to create a fact-based basis for decision-making. One of the institutes research focuses is violence against women. In 2023, IKF published results of a study on murders of women in Austria with a particular focus on femicides (murders of women committed by men), because they are women (see below). This study covered the period from 2016 to 2020. The gruesome numbers showed that in a country of less than nine million inhabitants, 137 women were violently killed during these five years; more than half of them (n = 74) by their current or former partners (all of them men). In 21 of these cases official records showed a history of domestic violence, in 16 cases the police had intervened repeatedly. Yet, only four of the victims had sought the help of victim protection centres or women's shelters within the last three years before they were killed.

In 2023, again 26 women were murdered by their male partners or ex-partners. Although Styria is only the fourth largest of Austria's nine states in terms of population, ten femicides took place there. Five women were killed by their (ex) partners in Vienna, the country's capital and by far the largest state in terms of population. Regional authorities in these two states decided to take an in-depth look at the situation in order to develop better systems for protection. IKF is therefore working on two new research projects on femicides in Styria and Vienna, both of which also include data on attempted femicides.

The Styrian project is especially interesting as it features a broad research question and a multi-methods approach. Besides an analysis of court files, the research design includes a representative population survey on general knowledge about the Austrian violence protection system as well as qualitative interviews with survivors and people from their social networks. Even more interesting for the VIPROM community, the project also features quantitative surveys of teachers and physicians, which will assess the experiences of these professionals in order to strengthen their role in the DV protection system. Drawing directly on knowledge from the VIPROM project, the target groups also include dentists as an important group of (potential) first points of contact for DV victims. Results from this project will support further efforts to strengthen referral procedures, so more women receive professional help and consultation thereby helping to combat femicide as the most horrible outcome of gender-specific violence.

If you yourself are a victim of domestic abuse our interpersonal violence in Austria or know someone affected, you can call: +43 800 222 555

[Click here](#) to read IKF's study on femicides in Austria.





## VIPROM CONSORTIUM



## CONTACT US



 [www.viprom-cerv.eu](http://www.viprom-cerv.eu)



 [pfleide@uni-muenster.de](mailto:pfleide@uni-muenster.de)



 [Subscribe to our newsletter](#)



 [viprom-cerveu](#)



 [viprom-cerveu](#)



Co-funded by  
the European Union