Multisectoral Cooperation – Institutional Response to Violence against Women
The Project Integrated Response to Violence against Women in Serbia is implemented by United Nations in Serbia, through direct participation of three UN Agencies: United Nations Development Programme (UNDP), United Nations Entity for Gender Equality and the Empowerment of Women (UN Women) and United Nations Children’s Fund (UNICEF). Project implementation is funded by United Nations Trust Fund to End Violence against Women. The aim of the project is to strengthen the capacities of institutions and organisations providing protection services to victims of violence, as well as to raise public awareness of zero tolerance to violence as a model of behaviour with the aim to help create a social environment of prevention.

United Nations Development Programme is providing expert and technical assistance and supporting the efforts of the Ministry of Labour, Employment and Social Policy in the implementation of strategic frameworks to combat violence against women, implementing international standards in the field.

The publication Multisectoral Cooperation – Institutional Response to Violence against Women will present together the institutional solutions for linking and cooperation between service providers to victims of violence. The adoption of the general and the special protocols by line ministries of the Serbian Government helps achieve the objectives of Strategic Area 3: International Cooperation of the National Strategy for Prevention and Elimination of Domestic and Intimate Partner Violence adopted in April 2011.

Opinions given in this publication do not imply the expression of any opinion on behalf of UNDP, UN Women, UNICEF or any other United Nations agency or other organization operating under UN.
FOREWORD
Ministry of Labour, Employment and Social Policy

The Ministry of Labour, Employment and Social Policy is leading active policy of combating violence against women in Serbia. In the period 2009-2012, the Ministry took the lead in coordinating government institutions in prevention and elimination of violence against women, as well as the promotion of policies related to combating gender-based violence. During the same period, the project Combating Sexual and Gender-Based Violence against Women with expert and technical support from the United Nations Development Programme (UNDP) was also implemented, funded by the Government of Norway. It was within this project that the Ministry initiated the development and adoption of the first national strategic document in this field, the National Strategy for Preventing and Eliminating Domestic and Intimate Partner Violence. Strategic Area Three of the document is dedicated to promoting multisectoral coordination between institutions, bodies and organisations providing general and specialised services to women victims of violence. In November 2011 already, only months after the Strategy, the General Protocol for Action and Cooperation of Institutions, Bodies and Organisations in the Situations of Domestic and Intimate Partner Violence against Women was adopted, which was the first important step towards the implementation of the Strategy.

Since December 2012, the Ministry has continued cooperation with the United Nations Development Programme through the project Integrated Response to Violence against Women in Serbia, with the aim to improve institutional response to violence. The institutional response must be unanimous, coordinated and decisive, with clearly defined duties and responsibilities. Serbian Government is firm in the attitude that violence against women shall not be tolerated, that perpetrators must be adequately punished and that victims of violence must receive adequate services from service providers.

 Violence is a denial of all human values and a fact before which our society cannot close the eyes.

Line ministries have also developed and adopted special protocols for their professionals working in the institutions within the system, and it is my great honour and pleasure to present the set of special protocols developed by line ministries to the interested professionals. The message we wish to send out is that government bodies and institutions within the system intend to act together as one arm in the protection of victims of violence and prevention and elimination of this form of violation of women’s human rights.

Brankica Janković
State Secretary
National Project Director
Ministry of Labour, Employment and Social Policy
FOREWORD

Integrated Response to Violence against Women in Serbia

Violence against women is a human rights violation present globally and intrinsically related to deeply rooted gender inequalities. The United Nations keep combating violence against women highly among their priorities. At the 57th meeting of the UN Commission on Status of Women dedicated to the elimination of all forms of violence against women and girls, a document was adopted that condemns in the strongest terms the pervasive violence against women and girls. UN member states are called upon to increase attention and accelerate action for prevention and elimination of violence. The focus has been put on prevention, including through education and awareness-raising, and addressing gender inequalities in the political, economic and social spheres. The document indicates the importance of providing inter-sectoral services to victims of violence, including health, psychological support and counselling, social support in the short and the long term. Aligning national laws with international human rights standards on the global and regional international levels, such as UN Convention on elimination of all forms of discrimination against women and the UN Declaration on elimination of all forms of violence against women, is critical to combating violence against women. UNDP welcomes the efforts of the Republic of Serbia to ratify all conventions to prevent and eliminate violence against women and domestic violence.

United Nations Development Program (UNDP) in Serbia has for years been providing technical and expert support to the Government of the Republic of Serbia in planning and implementing measures and policies aimed to establish an integrated institutional response to violence against women through strategic partnerships among institutions and civil society organizations. In the period 2009 – 2012, with UNDP support, the first systematic attempt to introduce institutional solutions for combating violence against women was realised through the project Combating Sexual and Gender-Based Violence. In this period UNDP supported government institutions to develop the National Strategy for the Prevention and Elimination of Domestic and Intimate Partner Violence, as well as the development of the general protocol for cooperation between institutions and organisations on building an integrated system of support and inter-sectoral approach to combating violence against women. UN in Serbia continues to support the implementation of government policies to prevent and eliminate violence through the project Integrated Response to Violence against Women in Serbia. The publication Inter-sectoral Approach – Institutional Response to Violence against Women integrates and presents to the interested public the institutional operational guidelines for professional staff in the protection system. It presents the institutional framework for cooperation with clearly defined procedures and duties within each relevant department. By adopting the general and specialized protocols for action and cooperation of relevant institutions in combating violence against women, the Republic of Serbia has significantly strengthened the institutional system for the protection of women. Adequate response to violence against women needs to be unified and coordinated in order to send a clear message that violence and perpetrators cannot go unpunished.

All women and girls have a right to live free of violence. It is the government’s responsibility to dedicate due diligence to the elimination and prevention of violence. Therefore, combating violence against women remains one of the important goals of the post-2015 Sustainable Development Goals, because only the society based on gender equality may fully realize its capacity for development.

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General Protocol for Action and Cooperation of Institutions, Bodies and Organisations in the Situations of Violence against Women within the Family and in Intimate Partner Relationship
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1. Introduction

Any form of violence threatening or damaging a person’s physical, psychological or moral integrity represents the violation of one of the fundamental human rights in the United Nations Declaration on Human Rights – the right to life and security.

Having in mind that domestic violence is a specific form of violence perpetrated through abuse of power, which violates fundamental human rights and dignity of the victim, but also of the entire community, it is necessary to establish uniform and comprehensive procedures for and cooperation of institutions, bodies and organisations in situations of violence against women within the family and in intimate partner relationship (hereinafter: the participants).

The security of all citizens and persons suffering violence based on the provisions set out by the Constitution, positive regulations and strategic documents in power, is the ultimate goal of the Republic of Serbia, as well as a duty taken on by joining and ratifying international human rights treaties. The Republic of Serbia respects, supports and promotes human rights. Ratifying the Convention on the Elimination of All Forms of Discrimination against Women, Republic of Serbia accepted, inter alia, to ensure the policy of elimination of discrimination against women and their protection from all forms of discriminatory behaviour. To this end, the Republic of Serbia will undertake activities to develop social and cultural customs regarding the behaviours of men and women in order to eliminate both prejudice and usual or any other practice based on the perception of inferiority or superiority of one or the other sex or the traditional roles of men, or women.

Implementing the provisions of the Convention on the Elimination of All forms of Discrimination against Women, the Republic of Serbia introduced a number of basic legal and strategic documents and long-term policies to ensure a non-discriminatory environment for women: Family Law, Criminal Code, Law on Gender Equality, Anti-Discrimination Law, National Strategy for the Improvement of the Position of Women and Promotion of Gender Equality and National Strategy for Prevention and Elimination of Violence against Women within the Family and Intimate Partner Relationship.

Basic guidelines for institutions, bodies and organisations in the Republic of Serbia for the prevention of gender-based violence are set out in the National Strategy for the Improvement of the Position of Women and Promotion of Gender Equality, together with the conclusions from the National Conference on Combating Violence against Women. In this respect, Republic of Serbia has undertaken to:
• Strengthen the capacities of institutions dealing with victims of violence
• Establish and apply mechanisms for action in accordance with international human rights obligations in the area of sexual and gender-based violence
• Strengthen the legal framework in the area of protection of violence victims, and
• Raise public awareness of violence as an unacceptable model of behaviour with the aim to help form a social environment that would have a preventive function

In order to implement the abovementioned guidelines as one of the instruments, it is necessary to adopt and implement the General Protocol of Conduct and Cooperation of Institutions, Bodies and Organisations in Situations of Violence against Women within the Family and in Intimate Partner Relationship, which defines in detail: duties of the participants as well as other stakeholders in detecting and eliminating violence and providing protection and support to victims of domestic violence; forms, methods and contents of cooperation between relevant institutions, bodies and organisations, as well as other participants in detecting and eliminating violence and providing protection and support to victims of domestic violence; other activities and duties related of the institutions, bodies and organisations as well as other participants in detecting and eliminating violence and providing protection and support to victims of domestic violence.

2. General Protocol Aim

Men and women can be the perpetrators of violence, but in the family, the gender dimension is its main characteristic. According to data available about the situation, dynamics and features of domestic violence in the Republic of Serbia, most commonly the victims of violence are women of different ages and family status, and the most common perpetrators are men, current or former married or unmarried or intimate partners. A comprehensive, continued and timely intervention of different stakeholders in the process of victim protection is a precondition for full respect of women’s rights and ensuring gender equality.

Violence against women in the family happens in all socio-economic groups and all cultures.

Violence against women is harmful and significantly disables women in exercising their human rights, especially the fundamental rights to life, security, freedom, dignity and physical and psychological integrity. Violence
against women does not threaten only women, but it also poses a threat to the society as a whole, thus demanding an adequate response from the society. Certain groups of women are exposed more to the risks of physical, sexual and psychological violence, neglect and negligent behaviour and exploitation within and outside the family. Women from minority groups, women with disabilities, girls, refugee or internally displaced women, migrant women, women living in poverty – especially in rural and remote areas, women in institutions or custody, women with psychologically altered behaviour, women of different sexual orientation, women dependent on alcohol, drugs or medicines, elderly women, women returnees, etc. are in a higher risk of victimisation by violence.

In addition to the fact that violence against women, including domestic violence, has been recognised as a specific gender related phenomenon, it is also important to understand that men and boys can also be victims of domestic violence and that this violence also requires adequate response.

In order for women victims of violence to exercise their rights, it is necessary to establish a system that will enable, in situations of domestic violence and especially violence among intimate partners, to initiate a prompt, efficient and coordinated procedure that would end the violence immediately, protecting the woman from further violence and ensuring adequate legal and psycho-social intervention that would provide for her rehabilitation and integration.

Domestic violence, protection and support to victims of violence is a complex process and to establish good cooperation among professionals from all socially organised systems (health care system, education, social and family legal protection, police, judiciary) is the main prerequisite for establishing an efficient multisectoral system of support and protection. In order for the intersectoral approach to victim protection to function well, it is necessary that:

- All participants have a clear idea of the common goal in the process of victim protection
- All participants know their roles and the roles of other sectors well, as well as their professional duties in relation to these roles – rules, limitations, modes of operation
- All participants know well the methods and instruments of information exchange and consultations within and between sectors, followed by appropriate written documents and feedback.

The aim of this General Protocol is to ensure in an integral and comprehensive way, that each stakeholder in organising the protection of women victims of violence within the family and between intimate partners can act in accordance with their legal competencies and duties, in order to promote victim safety and perpetrator accountability.
The aim is also to give fast and efficient protection to women victims of violence immediately after the incident, during the criminal or other proceeding, upon finalisation of the proceeding, or independently of these proceedings. This ensures elimination of domestic violence by prevention (issuing a clear warning that this is unacceptable behaviour not to be tolerated by the society) and repression (by punishing violence and emphasising that the perpetrator is the only one responsible for it). It is also necessary to re-socialise perpetrators by introducing special programmes for the perpetrators of violence against women and domestic violence, in order to achieve a permanent change in attitudes and behaviours of violence perpetrators and prevent reoccurrence of domestic violence.

2.1. General Protocol Objectives

General Protocol Objectives are:

- Design and provide general and unique guidelines for conduct, good practice and cooperation between various government bodies, organisations and other interested legal entities and persons in cases of domestic violence
- Improve victim and potential victim protection, reduce the number of undetected cases of domestic violence and increase the proportion of sanctioned cases
- Improve the position of the victim and ensure that all actions undertaken during the protection process are made in the best interest of the victim
- Avoid actions leading to secondary victimisation of the victims of domestic violence
- Reach common understanding of the purpose, objectives and main principles of protection
- Provide prompt, timely and efficient protection to victims of violence immediately after the violence occurs, during the legal proceeding and after the proceeding
- Ensure comprehensive approach to organising the process of protection and support to women victims of domestic violence, including all their assessed needs, through the adoption of special protocols of action in cases of violence against women within the family and in intimate partner relationship, which will more closely regulate the actions of all participants in providing protection to the victims
- Raise awareness of the phenomenon of domestic violence among all institutions and stakeholders in the system of protection against domestic violence
- Reduce negative social consequences of domestic violence
3. Normative Framework

3.1. International Documents Underlying the General Protocol

International documents underlying the General Protocol are the following:

- United Nations Universal Declaration of Human Rights (1948)
- United Nations Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) represents the most important international treaty on women’s rights. The 1992 General Recommendation No. 19 of the Committee on the Elimination of Discrimination against Women (CEDAW Committee) requires undertaking all necessary measures to eliminate discrimination against women and eliminate violence against women, including the adoption of specific legislation on all forms of violence against women, criminal penalties for violence perpetrators, civil remedies, preventive and protective measures.
- United Nations Declaration on the Elimination of Violence against Women (1993) specifies actions to be undertaken by the states in order to eliminate domestic violence, which include appropriate criminal legislation, development of national action plans, provision of services and resources for women victims of violence, training and gender sensitisation of public servants, as well as allocation of resources in the government budgets to combat violence against women.
- Resolution 2003/45 of the United Nations Commission on Human Rights on the elimination of violence against women encourages governments to introduce: “affirmative duty to promote and protect the human rights of women and girls and must exercise due diligence to prevent, investigate and punish acts of all forms of violence against women and girls”
- United Nations Convention on the Rights of the Child (1989) highlights the states' duty to take “all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence”
- Article 6 of the United Nations Convention on the Rights of Persons with Disabilities (2006) states that member states recognise that women and girls with disabilities are exposed to multiple discrimination and in this regard they shall take measures to ensure full and equal enjoyment of all human rights and fundamental freedoms by women and girls with disabilities.
- The Beijing Declaration and Platform for Action (1995) – in the area of domestic violence, recommends as priority issue to review and
revise legislation and take other necessary measures, including the establishment of appropriate mechanisms in order to ensure that all women enjoy protection from domestic violence which should be treated as criminal offence sanctioned by the law (P. 124-126)

- Recommendation No. R (90) of the Council of Europe Committee of Ministers on social measures concerning violence within the family recommends specific measures in the area of information, early detection of violence, reporting violence, giving assistance and therapy (emergency telephone lines, crisis services and counselling centres), measures for children, measures for women, measures for the perpetrators of violence, education measures (e.g. creating preventive programmes for children in schools), etc.
- Recommendation 1582 (2002) of the Council of Europe Parliamentary Assembly on domestic violence against women calls on the member states to recognise that they have an obligation to prevent, investigate and punish all acts of domestic violence and to provide protection to its victims
- Council of Europe Recommendation REC (2002)5 of the Committee of Ministers to member states on the protection of women against violence
- Council of Europe Convention on Preventing and Combating Violence Against Women and Domestic Violence (2011)

3.2. National Legal Framework

The national legal framework is the following:
- Republic of Serbia Constitution provides that the state shall guarantee the equality of women and men and develop the policy of equal opportunities, prohibit direct and indirect discrimination on any basis, especially on the basis of sex, guarantee the right to equal legal protection, legal aid, right to rehabilitation and compensation of material and non-material damages caused by unlawful or irregular work of the government or other bodies, legal human and minor-
ity rights protection guaranteed by the Constitution; guarantee the inviolability of physical and mental integrity, prohibit slavery and servitude, as well as all forms of human trafficking, guarantee the protection of children from psychological, physical, economic and all other exploitation or abuse and guarantee special protection of families, mothers, single parents and children.

- Criminal Code (Official Gazette RS, No. 85/05, 88/05, 107/05, 72/09 and 111/09)
- The Criminal Procedure Code (Official Gazette SRY, No. 10/01 and 68/02, Official Gazette RS, No 58/04, 85/05, 115/05, 46/06, 49/07, 122/08, 20/09, 72/09, 76/10)
- Family Law (Official Gazette RS, No. 18/05 and 72/11)
- Law on Public Peace and Order (Official Gazette RS, No. 51/92, 53/93, 67/93, 48/94, 85/05 and 101/05)
- Law on Minor Offences (Official Gazette RS, No. 101/05, 116/08 and 111/09)
- Law on Juvenile Criminal Offenders and Criminal Protection of Juveniles (Official Gazette RS, No. 85/05)
- Law on the Protection Programme for Participants in Criminal Proceedings (Official Gazette RS, No. 85/05)
- Law on Execution of Criminal Sanctions (Official Gazette RS, No. 85/05, 72/09 and 31/11)
- Law on Police (Official Gazette RS, No. 101/05 and 63/09)
- Law on Public Prosecution (Official Gazette RS, No. 116/08, 104/09 and 101/10)
- Law on Weapons and Ammunition (Official Gazette RS, No. 9/92, 55/93, 67/93, 48/94, 44/98, 39/03, 85/05, 101/05 and 27/11)
- Law on Gender Equality (Official Gazette RS, No. 104/09)
- Anti-Discrimination Law (Official Gazette RS, No. 22/09)
- Law on Social Protection (Official Gazette RS, No. 24/11)
- Law on Personal Data Protection (Official Gazette RS, No. 97/08 and 104/09)
4. Definitions

4.1. Violence against women within the Family and in Intimate Partner Relationship

Violence against women in intimate partner relationship is the result of the unbalance of power between men and women. According to the United Nations Committee on the Elimination of Discrimination against Women General Recommendation 19, violence against women is the form of violence with regard to the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) and should be considered a serious violation of women’s human rights. Discrimination includes gender based violence, that is, violence directed against a woman only because she is a woman, or that which disproportionately affects women. It includes all actions leading to the infliction of harm or suffering of physical, mental or sexual nature, including threats with such actions, as well as coercion and other forms of the restriction of freedom. Gender based violence represents violation of specific provisions of the Convention, regardless of whether these provisions refer to violence specifically.

The 1993 United Nations Declaration on the Elimination of Violence against Women defines key forms of violence against women, stipulating that such violence may be physical, sexual or psychological, and when it occurs within the family it can manifest as battering, sexual abuse of female children, marital rape, and as other forms of violence.

Violence against family members has specific characteristics in relation to the violence outside of the family. Violence within the family always represents the abuse of power and control over those family members who have less power or resources. In the majority of societies, especially in traditional and patriarchal communities, men have significantly more power, not only physical, but also economic and social power.

Having in mind that certain aspects of violence against women and combating these forms of violence are the subject of other special acts, as well as that certain forms of violence within the family and their prevention and elimination have also been the subject of special strategic documents and action plans, the General Protocol shall primarily serve to provide guidelines for action and cooperation of institutions, bodies and organisations in the situations of violence against women within the family and in intimate partner relationship.

Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence defines domestic violence as any act of physical, sexual, psychological and economic violence occurring
within the family or domestic unit or any other partner or intimate relationship, regardless of whether the perpetrator shares the same residence with the victim.

The Family Law defines violence within the family as behaviour by which one member of the family violates physical integrity, mental health or the serenity of another family member.

Family members as defined in the Family Law are: spouses or former spouses, children, parents and other blood relatives, persons in in-law or adoptive relatives or persons involved in foster care; persons living or having lived in the same domestic household; common-law partners or former common-law partners; persons who have been or are still involved emotionally or sexually, or persons who have a child together or child on the way, even though they have never shared a domestic unit together.

The criminal code sets out the criminal act of domestic violence perpetrated by anyone who by way of force, threat to attack the life or body, insult or ruthless behaviour threatens the serenity, physical integrity or mental state of a member of their family.

Family member is defined somewhat differently in the Criminal Code than in the Family Law, as spouses, their children, spouses’ first bloodline ancestors, common-law partners and their children, adoptive parents and adopted children, foster parents and foster children, as well as siblings, their spouses and children, former spouses and their children and former spouses’ parents if they share the residence, whereas persons having a child together or a child on the way are considered family members even if they have never lived in the same domestic unit.

In 2005, the Government adopted the General Protocol for the protection of children against abuse and neglect, defining the entire process of protection of children against abuse and neglect, including the protection of children against domestic violence.

This General Protocol defines abuse of power, trust and dependence within the family as violence, which threatens the survival, security and wellbeing of another family member or members. It includes different forms of abuse, such as violence between partners, abuse and neglect of the elderly or other adult dependents, abuse and neglect of children, abuse of parents and witnessing and exposure to abuse over another family member.

Violence among intimate partners includes a pattern of violent behaviour in a current or former intimate partner relationship such as marriage, common-law marriage, other emotional or sexual relationship or between persons who have a child together or child on the way, although they have never shared a domestic household, including same sex partners.
5. Detecting Violence

Violence in intimate partner relationship includes different forms and manifestations:

Physical violence is the deliberate use of physical force that can cause pain, injury, disability or death. It includes behaviour such as scratching, pushing, hair-pulling, shaking, slapping, hitting, kicking, biting, strangling, stabbing, inflicting burns, physical restraint, battering and killing, not excluding other manifestations.

Sexual violence is a sexual act without consent or the ability of the victim to choose to give consent, regardless of whether the act has been performed; sexual act or attempt of this act when a person is not in the position to consent or refuse participation due to illness, disability, influence of psychoactive substances, age, that is, because of intimidation, blackmail or pressure; painful and humiliating sexual act. Intimidation, blackmail or pressures to participate in the unwanted sexual act include using words, gestures, objects or weapons expressing intention to cause pain, injury or death.

Psychological violence is the violation of victim's serenity through behaviour, threats and applying methods of intimidation with or without using tools and weapons that can inflict physical injuries. It includes the humiliation of victims, controlling their behaviour, withholding information, embarrassing and degrading, blaming, isolating the victim from friends and family, manipulating children and degrading the victim as parent, denying access to money and other resources influencing the victim's mental and emotional state.

A specific form of psychological violence is controlling the victim by way of following or stalking, with repeated use of harassment and intimidation, such as stalking a person, appearing at their place of work or residence, making disturbing phone calls, sending letters and messages and destroying the victim's property.

Economic violence is a form of psychological violence which includes unequal access to joint resources, denying or controlling access to money, prevention of employment or education and professional advancement, denying rights to property, forcing renouncement of property, alienating property without consent, not excluding other manifestations.
6. Child and Other Vulnerable Family Members Witnessing Violence against Women within the Family and Intimate Partner Relationship

Children are considered victims of violence in the family not only when they experience it directly, but also when they are exposed to acts of violence that one family member performs against another family member as witnesses. Witnessing and exposure to violence traumatises children, regardless if they watch the violence directly, or hear sounds, thumps or screams from a close range, when they know that violence is occurring or can occur, or when they subsequently see the consequences of violence among family members.

Recent studies confirm that exposure to physical, sexual or psychological abuse and violence between parents or other family members have a serious impact on children and other vulnerable family members. Such exposure causes trauma and negatively influences the child’s development and security and the position of other vulnerable family members such as persons with disabilities, elderly family members, persons with severe health or development problems.

This is why it is necessary to ensure that children’s rights and needs are taken in consideration when providing services and assistance to victims of domestic violence when they are witnesses of violence. The term “child witness” does not only relate to children who witness the act of domestic violence directly, but also to the children exposed to violence indirectly. In these cases it is necessary to apply complementarily the General Protocol on the Protection of Children from Abuse and Neglect.

When giving assistance to victims of domestic violence with vulnerable members as violence witnesses, it is necessary to take measures of protection that meet the needs of these persons, considering that they are not in the situation to protect themselves without the help of others.

All services to children witnesses of domestic violence and other vulnerable family members need to be provided in accordance with their best interests.
7. Participants

Under this Protocol, the Participants in organising protection and support to women victims of violence within the family and in intimate partner relationship are institutions, bodies and organisations, with statutory responsibilities or programmes to implement activities focusing on detecting cases of domestic violence, stopping the violence, ensuing safety, support and empowerment to the victims, rehabilitation of women victims of domestic violence and sanctioning violence perpetrators. In accordance with positive legislation, the following actors are responsible to act in cases of domestic violence:

- the police
- social protection institutions and other service providers in the social protection system
- health institutions and other forms of health services
- institutions in the education system in cases when children are involved as witnesses of violence
- public prosecutor’s office
- regular and misdemeanour courts

In the process of prevention, providing legal and psycho-social assistance and representation in accessing community services designed for victims of domestic violence, the associations with defined activities of assistance and support to victims of violence within the family and in intimate partner relationship have an important role. With the aim to avoid secondary victimisation, the responsible parties are required to act in a manner respecting their dignity. When acting with victims of domestic violence, all those responsible are required to act in a gender sensitive manner.

8. General Principles in the Protection of Victims of Domestic Violence

All experts involved in organising the protection and support for women victims of domestic violence need to uphold to the following general principles:

1. Victim’s security (safety) is the priority in the work of professional services.
2. Ensure the safety and wellbeing of the child by ensuring safety and supporting the independence of the non-violent parent.
3. The perpetrator is solely responsible for violent behaviour.
4. All interventions should take into account the inequality of power between the victim and the perpetrator of domestic violence.
5. Respect the needs, rights and dignity of the victim.
6. Emergency of procedure is in accordance with the assessed danger of the situation and vulnerability of the victim.
7. Institutions, within their roles, competencies and missions, shall be responsible to stop violence and take protection measures.
8. Raise professional competencies through planned education and affirmation of best practice examples.

9. **Victim Protection Process**

A number of international documents recommend the multisectoral approach to dealing with violence. Cooperation between institutions, bodies and organisations is an important precondition for organising the protection of women victims of violence within the family and in intimate partner relationship.

Involving different services in the process of protection against domestic violence is based on the following assumptions:

1. The participants who are the main actors in the system of protection against domestic violence have different competencies and scope of responsibilities and therefore they can resolve issues concerning violence more efficiently only through multisectoral cooperation.
2. The participants who are the main actors in the system of protection against domestic violence have the duty to put the victim’s rights in the centre of all measures implemented through effective cooperation, in order to fulfil their legal obligations and the purpose of the intervention provided. In this respect, the cooperation between institutions, as well as their individual and coordinated intervention, must be clearly defined in order to avoid potential shift of responsibility from one to another service.

In order to establish an efficient system of protection of victims of violence in intimate partner relationship and within the family, it is necessary to establish continuous multisectoral cooperation between the main social protection institutions. This involves cooperation between social protection institutions, centres for social work in particular, the police, judiciary, investigation courts and health institutions. The protection system needs also to include civil society organisations implementing programmes and activities related to services for victims of violence.
Ensuring safety and protecting the victim’s rights, as well as stopping violence are primarily the role of the police and the public prosecutor, immediately after notification from citizens, institutions, bodies and organisations about domestic violence. Other services (social, health, educational institutions, etc.) provide support to victims, ensure recovery and preconditions for a productive life without violence.

9.1. Detecting and Reporting Violence against Women within the Family and in Intimate Partner

Relationship

Protection from violence in the family begins by detecting violence. Detecting violence is a part of all institutions’ regular activities. Detection can be the result of the report by the victim to any institution within the protection system, or notice of physical, psychological or other traces and manifestations of violence by any official or professional or by a third party reporting the violence to the institution.

It is the right and duty of everyone to report domestic violence. Not reporting domestic violence is a criminal act. A person with knowledge of a criminal act of domestic violence has the duty to report it to relevant institutions and bodies.

The Family Law stipulates that everyone has, in accordance with the law, the right to protection from domestic violence. Health workers, professionals in social protection and education have a special duty to report domestic violence to the police and the public prosecutor.

According to official data, in the majority of cases domestic violence is reported by the woman victim of violence, followed by police officers, professionals in centres for social work and civil society organisations, as well as health workers.

In institutions and organisations in which the staff come across women victims of violence, they should keep in mind that traces of violence are not necessarily in the form of injuries, bruises or other physical manifestations. It is the professionals’ duty to detect and recognise other signs of violence and express suspicion about it, as well as to document it appropriately. This can be achieved by asking certain questions during their regular activities and providing other services, that is, perform a check of violence in all indicated situations. Except in situations when traces of violence are visible, the check for violence must be performed upon a credible statement of the victim or a witness, or when there are other circumstances, medical or psychological symptoms indicating the existence of violence. Whenever possible, it is necessary to ask the usual questions about violence, whether
it is a police, health service or centre for social work intervention. These questions shall be asked even in the situation when there are no adult male household members.

When detecting violence, other possible signs in the behaviour of the potential victim should also be considered, including direct and indirect signs such as:

- Anxiety, avoiding the subject, minimising, expressed attitudes that violence is “deserved”
- Expressing fear from behaviour of the perpetrator and fear for own safety
- Fear of deprivation of parental rights, fear that the perpetrator may harm the children, attitude that the children “need both parents”
- Fear for other household or family members
- Demonstration of shame and guilt, taking responsibility for violence
- Indication of economic dependence, isolation and lack of support from the extended family
- Fear of Police and other authorities

Factors indicating the occurrence or severe consequences of domestic violence:

- Multiple victims
- Experienced assault or repeated assault on the same victim
- Victim belongs to the group of vulnerable family members (with disabilities, mentally altered behaviour, different sexual orientation, dependence of psychoactive substances, elderly, etc)
- Other persons witnessing violence, e.g. relatives, and especially children or other vulnerable family members
- Additional humiliation and degradation of the victim (e.g. taking photographs, exposing the victim to the view of others after the violence has been committed and other)

### 9.2. Documenting Violence

Any institution that receives information raising reasonable suspicion of perpetrated domestic violence will document the information appropriately along with all the knowledge of important circumstances it has acquired.

The aim of documenting information is to make a report containing quality, accurate and reliable information about the event, its history and consequences.
Precise recording of information related to the identity of the person against whom violence was perpetrated, as well as the identity of the individuals that were at the same time directly or indirectly exposed to violence (e.g. children, relatives or others), the identity of the perpetrator, detailed description of events and history of violence (previous events, duration, frequency and escalation), the description of specific risk factors, detailed description of violence consequences (possible injuries and mental state), taking photographs of the person (injuries) and the scene of the event, recording statements of direct and indirect victims and witnesses of violence, reports on expert findings and assessments, documentation about earlier reported events and previous actions taken by the services are of utmost importance for the process of victim protection.

When collecting data on violence it is necessary to perform the interview with the victim without the presence of the perpetrator (in separate rooms and out of their eyesight). It is not recommended to ask the question “why”, because it indicates a search for causes that the victim need not understand and is associated with accusation and guilt.

Collecting information about violence is a difficult and sensitive task, service-specific. In order to increase reliability of information, it is necessary to get to know the source of information well, to ask precise, detailed and clear questions, to carefully observe and record the appearance and behaviour of the victim and perpetrator of violence. Inconsistencies in the victim’s account need not mean that the statement is untrue. Inconsistencies often reflect confusion, problems understanding the question, remembering or emotional excitement because of recalled traumatic experience.

9.3. Collecting Information on Other Participants in the Process

The staff in all relevant institutions need to learn about the phenomenon of domestic violence and to have accurate and concrete information as to where and how the victim can be referred to other services and service providers in the community.

It is necessary to ensure that the victim of violence receives all the necessary support so that she would be encouraged to accept assistance and take steps to ensure her safety. It is important to build trust and unambiguously indicate that violence is unacceptable behaviour, and that the responsibility for it lies always on the perpetrator, and not on the victim. It is necessary to provide complete information about the actions, procedures and their outcomes, as well as about the available resources for help and support to the victim and other vulnerable family members.

In all cases it is necessary to give the victim detailed information about all
the participants and services in the community providing assistance and security. If possible, the victim shall be given a leaflet containing information she needs. This shall include: addresses, phone numbers and other details about the following participants: police station, centre for social work, health institution, emergency telephone line for victims of violence, shelter (safe house) and other organisations in the community specialised in domestic violence and violence against women.

In agreement with the woman victim, one of the above services can be contacted in order to ensure adequate assistance and develop a safety plan.

The participants should participate in developing a jointly produced information leaflet, describing basic rights and possibilities for the protection of women victims of violence within the family and in intimate partner relationship. The leaflet would immediately be presented to the victim by staff in bodies, organisations and institutions on first contact with the woman victim of violence within the family and in intimate partner relationship.

Wherever the language of national minorities is in use, the leaflet should be also printed on the languages in official use in these environments.

Staff in all institutions in the system of protection and support to women victims of domestic violence shall take care to inform the victims about the steps and measures taken, as well as the rights of the victim in each stage of the procedure.

9.4. Raising Awareness and Empowering the Victim

If the victim of violence will not speak of violence, it is necessary to respect her decision. The victim shall then be told that she can turn for assistance at another occasion and she is informed about the potential risks and available sources of assistance. It is necessary to document all the information learned during the interview with the victim and other persons involved, as well as of all the actions taken.

When, based on the interview, it is obvious that children or other vulnerable family members are exposed to domestic violence against women, it is necessary to report the case to the centre for social work.

9.5. Actions in Case of Immediate Threat of Violence

When the knowledge of the situation indicates that the life and security of the victim or other family members are in grave immediate danger, it is necessary to initiate activities by official duty. The knowledge of grave immediate danger can be acquired based on the statement or behaviour of the victim or other individuals, statements and behaviour of perpetrators, traces of violence and insight on the spot.
The officer, who in line of duty learns about grave and immediate danger from violence, shall act in accordance with the law and take and initiate actions to protect the victim against violence. In these cases it is necessary to report, without delay, the knowledge of danger from violence to the policy.

9.6. Assessment of Security Risks

The circumstances indicating there is grave immediate danger from violence against women within the family and in intimate partner relationship include one of the mentioned or more often a combination of several factors, in particular: threat of murder or suicide by the perpetrator, possession of weapons, divorce or departure, that is, separation from the violent partner, suicidal thoughts or behaviour of the victim, previous incidence of violence, existing mental illnesses, abuse of psychoactive substances, escalation of stalking or harassment of the victim, her family or friends, jealousy, conflicts around custody of the child or the ways of maintaining personal relations between the child and the parent perpetrating violence in the family, criminal history of the perpetrator, regardless of whether it is connected to the violence, existing court protection orders and history of failure to comply with them, experience of fear with the victim and her risk assessment of the violence occurrence or recurrence.

9.7. Report to the Police and Public Prosecutor

Violence against women within the family and in intimate partner relationship shall be reported to the police and the public prosecutor, in accordance with the law. It is necessary for the participants in the protection system to assess at each moment the risk to the victim and adjust their actions to provide maximum security for the victim.

The police shall, in all cases where there is reasonable doubt of domestic violence as a criminal offence, notify the prosecutor in charge and submit a report of the event or raise criminal charges against the suspect, in accordance with the Criminal Procedure Code. The foundation for criminal charge shall be assessed solely by the public prosecutor.

9.8. Filing the Petition to Impose Domestic Violence Protection Orders

In order to ensure immediate protection of the woman victim of violence within the family and intimate partner relationship and other family members exposed to violence, the public prosecutor and custody body shall, in accordance with the law, file the petition to impose domestic violence protection orders.
Monitoring adherence to the imposed domestic violence protection orders require that the participants in the system exchange information and take appropriate actions, in accordance with the law.

9.9. Victim Assistance and Monitoring

Officers who come in contact with the victim of violence shall offer her assistance and support they are authorised to offer and shall ensure adequate repeated contact and monitoring. For planning of services and protection measures for women victims of violence and other family members exposed to violence, the case conference shall be summoned. The case conference shall be scheduled by the case leader (professional in the centre for social work), unless agreed differently.

All participants shall by way of cooperation contribute to the development of individual plan of integrated services ensuring comprehensive, coherent, effective and efficient protection for the woman victim and non-violent members of her family. The plan of protection must ensure the victim’s safety, stop the violence and prevent recurrence, protect the victim’s rights, enable free decision-making in their best interest, ensure they receive services in support of their recovery, empowerment and independence. Planned measures need to be mutually well coordinated and focus on avoiding secondary victimisation.

Service provision must not depend on the victim’s preparedness to file charges or testify against the perpetrator.

The plan for protection of the woman victim of violence within the family and in intimate partner relationship also determines the monitoring and evaluation of adequacy of measures planned and undertaken, including deadlines for re-evaluations. These procedures shall also be implemented in cooperation (coordinated action) of all participants.

Depending on the assessment of results, decisions shall be made about revising measures (when planned measures have not produced desired outcomes) and decisions on further protection and monitoring measures. In case when the protection objectives are achieved, primarily security, recovery and empowerment, the decision to close the case can be made.

All institutions shall make sure that the woman victim of domestic violence is provided with free legal aid, by one of the institutions providing free legal aid (local self-government, chamber of commerce or association).
10. General Protocol Implementation and Monitoring

10.1. Introduction of the General Protocol

All participants in the procedure of protection of women victims of violence within the family and intimate partner relationship shall introduce the General Protocol and its content to the staff, as well as the activities as part of its implementation and monitoring.

10.2. Adoption of Special Protocols

For the purpose of consistent implementation of this General Protocol, all the participants shall adopt special protocols of action in cases of violence against women within the family and in intimate partner relationship up to 12 months after the adoption of the General Protocol, which shall be harmonised with the content of this Protocol.

In the aim of establishing efficient intersectoral cooperation, the ministries for internal affairs, social protection, health and justice should:

- Develop in the special protocols internal procedures within each system in more detail, in accordance with the basic principles and objectives of the General Protocol
- Within their jurisdictions, recommend to institutions and other organisations to develop in more detail their procedures for better protection of women against violence in the family and intimate partner relationship
- Encourage entering into cooperation agreements on the local level between the necessary institutions and other organisations in order to efficiently implement the protection of women against violence within the family and in intimate partner relationship. Measures and plans for the improvement of cooperation and implementation of this Protocol should be considered during meetings with the representatives of different institutions on the local self-government level.

10.3. Training for the Implementation of the General and Special Protocols

All participants shall provide continuous process of staff training, in order to develop and maintain staff capacities in the area of domestic violence. Staff training and development programmes shall be implemented in accordance with the principles in this General Protocol.
The participants shall, in accordance with their abilities, provide training of appropriate number and structure of staff in the institutions within the system for implementation of the General and special protocols of action in cases of violence against women within the family and in intimate partner relationship. All employees in the police, the prosecutor's office, centres for social work and health institutions should have basic knowledge of the phenomenon of violence against women within the family and be acquainted with the procedures laid out in the General Protocol.

The participants shall, in accordance with their abilities, train individuals or teams (specialised training) to act in cases of violence against women in the family in accordance with the principles of this Protocol.

10.4. Monitoring Protocol Implementation

In order to improve actions taken in cases of violence against women within the family and intimate partner relationship, the ministries in charge of internal affairs, social protection, health and justice shall monitor the implementation of the General and special protocols, as well as the effects of actions.

11. Records of Information on Cases of Domestic Violence

Participants in the system of protection of women victims of domestic violence shall keep records of cases of domestic violence in accordance with the law.

The participants shall monitor the effects of procedures in cases of violence against women within the family and intimate partner relationship and ensure data processing as well as their availability to the public.
Special Protocol For Action of The Centre for Social Work – Custody Authority in Cases or Domestic and Intimate Partner Violence against Women

BELGRADE, March 2013
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1. Introduction

The General Protocol for Action and Cooperation of Institutions, Bodies and Organizations in the Situations of Domestic and intimate partner violence against women, Chapter 10.2, lays down the obligation of the ministry in charge of social protection and family law protection to adopt a special protocol within 12 months as of the day of the adoption of the General Protocol.

The scope and contents of the phenomenon of domestic and intimate partner violence against women (domestic and intimate partner violence) indicate that there is a need to adopt both the General Protocol and special protocols on actions and cooperation of institutions in different systems providing assistance and support to citizens suffering violence and who have found themselves in a vicious circle of violence which is virtually impossible to break from without a timely, comprehensive and continued intervention of professionals employed in the respective institutions. Specifically, the role and public competencies of the centre for social work – custody authority, entrusted to this social protection institution in the Law on Social Protection, the Family Law and other legislation in the jurisdiction of other socially organized systems providing assistance and support for citizens, impose the obligation that the Special Protocol in the field of social protection and family law protection develop in detail the actions and procedures of the centre for social work – custody authority.

Pursuant to reports of all centres for social work, it is evident that the number of registered cases of domestic violence in the Republic of Serbia is on the rise. However, this is not necessarily the result of an actual increase in the number of cases of domestic violence in comparison with the previous period. The Ministry is of the opinion that the increase in the number of registered cases of domestic violence is primarily due to a more comprehensive and continued response of the general public and experts to this phenomenon. Citizens, professionals employed in different systems and victims of violence have become significantly more sensitive to this phenomenon and no longer perceive it as a person’s private matter. Today the phenomenon of violence against women and domestic violence in general is not denied, minimized or considered normal, and is therefore more often reported and responded to. It is certainly disquieting that there is an increase in the number of severe forms of domestic violence with consequences of grave harm and fatal consequences for the victim. The victims of domestic violence most often are the weakest members of the family, women, children and the elderly.¹

¹ The data contained in the tables are taken from the Annual Report on the Work of Centres for Social Work in the Republic of Serbia 2011, which was compiled by the Republic Institute for Social Work in May 2012. The development of the annual report for 2012 is under way.
### Table 1. Number of registered victims of domestic violence in the Republic of Serbia

<table>
<thead>
<tr>
<th>Territory of Serbia</th>
<th>2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Serbia</td>
<td>1930</td>
<td>2479</td>
<td>3416</td>
<td>3534</td>
<td>3528</td>
<td>4319</td>
</tr>
<tr>
<td>Vojvodina</td>
<td>1163</td>
<td>1704</td>
<td>1851</td>
<td>1988</td>
<td>1846</td>
<td>2032</td>
</tr>
<tr>
<td>Kosovo and Metohija</td>
<td>73</td>
<td>84</td>
<td>49</td>
<td>30</td>
<td>73</td>
<td>102</td>
</tr>
<tr>
<td>Belgrade</td>
<td>275</td>
<td>436</td>
<td>956</td>
<td>2323</td>
<td>2193</td>
<td>2028</td>
</tr>
<tr>
<td><strong>Total in Serbia</strong></td>
<td>3441</td>
<td>4703</td>
<td>6272</td>
<td>7875</td>
<td>7807</td>
<td>8481</td>
</tr>
</tbody>
</table>

### Table 2. Method of reporting domestic violence in 2011

<table>
<thead>
<tr>
<th>Origin of the report</th>
<th>Number of filed reports</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family member</td>
<td>1843</td>
</tr>
<tr>
<td>Filed by a person outside of the family</td>
<td>488</td>
</tr>
<tr>
<td>Filed by an institution (kindergarten, school, health institution)</td>
<td>658</td>
</tr>
<tr>
<td>Filed by the Ministry of Interior</td>
<td>2407</td>
</tr>
<tr>
<td>Requested by the Court under Article 286 of the Family Law</td>
<td>673</td>
</tr>
<tr>
<td>Filed by an NGO or a citizen association</td>
<td>33</td>
</tr>
<tr>
<td>Custody authority ex officio</td>
<td>537</td>
</tr>
<tr>
<td>Filed by the victim</td>
<td>1169</td>
</tr>
<tr>
<td>Anonymous report</td>
<td>299</td>
</tr>
<tr>
<td>Another person</td>
<td>190</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>8297</strong></td>
</tr>
</tbody>
</table>

### Table 3. Procedures for protection against domestic violence instituted by the custody authority ex officio in 2011

<table>
<thead>
<tr>
<th>Type of procedure</th>
<th>Number of procedures</th>
</tr>
</thead>
<tbody>
<tr>
<td>The procedure for imposing the measure of protection against domestic violence under the provisions of the Family Law</td>
<td>294</td>
</tr>
<tr>
<td>The procedure for the deprivation of parental rights</td>
<td>163</td>
</tr>
<tr>
<td>The procedure for the partial deprivation of parental rights</td>
<td>149</td>
</tr>
<tr>
<td>Submitting the criminal offence report regarding the criminal offence of domestic violence</td>
<td>368</td>
</tr>
<tr>
<td>The procedure for the deprivation of legal capacity of perpetrators of domestic violence acts</td>
<td>32</td>
</tr>
<tr>
<td>Compulsory hospitalization of perpetrators under the provisions of the Law on Non-Adversarial Proceedings</td>
<td>41</td>
</tr>
<tr>
<td>Civil proceedings for the protection of child rights</td>
<td>145</td>
</tr>
<tr>
<td>Other</td>
<td>475</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>1667</strong></td>
</tr>
</tbody>
</table>
I FUNDAMENTAL PRINCIPLES OF THE SPECIAL PROTOCOL

The Special Protocol for Action of the Centre for Social Work – Custody Authority in Cases of Domestic and intimate partner violence against women is founded on the respect for fundamental principles laid down in the Law on Social Protection:

- **Principle of respect for the integrity and dignity of the beneficiary**, meaning that the citizen is entitled to social protection which is provided with respect for their physical and mental integrity, security and respect for their moral, cultural and religious beliefs, in compliance with the guaranteed human rights and freedoms.

- **Principle of prohibition of discrimination** meaning that any form of discrimination against the beneficiary of social protection on the basis of race, sex, age, nationality, social background, sexual orientation, religious, political, union or other affiliation, property, culture, language, disability, the nature of social exclusion or any other personal characteristic is prohibited.

- **Principle of acting in the best interest of the beneficiary** meaning that services are provided in line with the best interest of the beneficiary, respecting their life cycle, sex, ethnic or cultural background, language, religion, life habits, developmental needs and the needs for additional support in their daily functioning.

- **Principle of the least restrictive environment** - Social protection services shall be provided in the immediate and least restrictive environment, ensuring that services are selected which shall enable the beneficiary to remain in the community and in the family.
• **Principle of efficiency of social protection** - Social protection shall be provided in a manner which ensures the achievement of the best possible results in relation to the available financial resources.

• **Principle of timeliness of social protection** – Social protection shall be provided in a manner which ensures a timely identification of the needs of the beneficiary and the provision of services in view of preventing the occurrence and development of the situation which may threaten security and satisfaction of life needs and hamper social inclusion.

• **Principle of comprehensiveness of social protection** – Social protection services shall be provided in compliance with their respective functions, and will be connected and harmonized, so that they may ensure comprehensive social protection of the beneficiary at any given life age.

• **Principle of advancing the quality of social protection** – Social protection services shall be provided in compliance with the principles and standards of modern professional social work practices. The quality of social protection services shall be advanced by the application of contemporary achievements of science and the profession, and by professional support with a view to the advancement of professional competences of the professionals and the quality of protection of beneficiaries.

• **Principle of availability and individualized social protection** – The provision of social protection services shall be organized in a manner which ensures their physical, geographical and economic availability, respecting cultural and other differences. Social protection services shall be provided in a manner which ensures an individualized approach to the beneficiary and a professional tasked to lead their specific cases (hereinafter: case leader).

Pursuant to the fundamental principles underlying the Special Protocol, the beneficiary and/or person suffering domestic and intimate partner violence enjoys specific rights enabling the beneficiary, along with the support and assistance of social protection professionals and the centre for social work – custody authority, to take active part in the procedure of providing assistance and support and thus take responsibility for the organization and quality of their life. In that sense, the rights of the beneficiary of services in the system of social and family law protection are:

• **Right to information.** The beneficiary shall have the right to be informed on all procedures and information which are relevant for the identification of their needs and the methods to meet those needs;

• **Right to participate in decision-making.** The beneficiary shall have the right to participate in the assessment of their status and needs and in decision-making on whether to accept the service, as well
as to obtain timely information they need for making the decision, including the description, objective and benefit of the proposed service, as well as the notification on available alternative services and other notifications relevant to the provision of the service. No service shall be provided without consent of the beneficiary or their legal representative, except in cases prescribed by law;

- **Right to a free choice of services.** The beneficiary shall have the right to a free choice of services and providers of social and family law protection services, pursuant to this law;

- **Right to confidentiality of information.** The beneficiary shall have the right to the confidentiality of their personal information contained in the documents which are processed for the needs of the report and/or records, including those relating to their personality, behaviour and family circumstances and the manner of using social protection services.

- **Right to privacy.** The beneficiary shall have the right to respect of their privacy in the course of providing social protection services. Seeking information or undertaking action necessary for the provision of services or securing the rights of the beneficiary shall not be considered the violation of the right to privacy.

- **Right to filing a complaint.** The beneficiary who is not satisfied with the provided service, procedure or behaviour of the service provider shall be entitled to lodge a complaint before the competent authority.

The respect for the abovementioned principles, upon which the assistance and support for persons suffering domestic and intimate partner violence must be realized and organized, ensures to a significant degree the achievement of desired effects of undertaken measures and activities under the jurisdiction of the centre for social work – custody authority, as key institution in the system of social and family law protection. As part of its competences, this institution of social and family law protection has the obligation of coordination, in addition to a direct provision of assistance and support, so that the actions of other institutions of socially organized systems of assistance and support may be timely and holistic and primarily directed at meeting the needs of the victim of domestic and intimate partner violence.
II OBJECTIVES OF THE SPECIAL PROTOCOL

1. Aim

The objectives of the Special Protocol are based on the fundamental principles and objectives of the General Protocol.

The aim that is general objective of the General Protocol is to ensure holistically and comprehensively that each stakeholder can act in accordance with their legal competencies and duties in organizing the protection of women victims of domestic and intimate partner violence, in order to promote victim safety and perpetrator accountability.

The specific objectives of the General Protocol are:

- Design and provide general and unique guidelines for conduct, good practice and cooperation between various government bodies, organizations and other interested legal entities and persons in cases of domestic violence,
- Improve victim and potential victim protection, reduce the number of undetected cases of domestic violence and increase the proportion of sanctioned cases,
- Improve the position of the victim and ensure that all actions undertaken during the protection process are made in the best interest of the victim,
- Avoid actions leading to secondary victimization of the victims of domestic violence,
- Reach common understanding of the purpose, objectives and main principles of protection,
- Provide prompt, timely and efficient protection to victims of violence immediately after the violence occurs, during the legal proceeding and after the proceeding,
- Ensure a comprehensive approach to organizing the process of protection and support to women victims of domestic violence, including all their assessed needs, through the adoption of special protocols of action in cases of domestic and intimate partner violence against women, which will more closely regulate the actions of all participants in providing protection to the victims,
- Raise awareness of the phenomenon of domestic violence among all institutions and stakeholders in the system of protection against domestic violence and
- Reduce negative social consequences of domestic violence.
The aim of the Special Protocol may be derived from the aim for the adoption of the General Protocol.

The definition of the aim of the Special Protocol relied primarily on the contents of the public competences entrusted to the centre for social work – custody authority.

The aim of the Special Protocol is to lay out the structure of procedures conducted in the centre for social work – custody authority in implementing public competencies and ensure that violence is terminated immediately, prevent the reoccurrence of an act of violence, provide for the safety of the person suffering violence, meet the fundamental existential needs of the person suffering violence, empower and enable the victim of violence to take over responsibility for the quality and organization of their own life without violence with or without support, and to provide for a comprehensive coordination role of this institution in responding to the incidence of domestic and intimate partner violence.

2. Specific Objectives

- Define internal procedures of the centre for social work – custody authority in all stages of work on cases of domestic and intimate partner violence, from detection, screening, initial assessment, specialist assessment, planning the provision of services and measures, to monitoring, evaluation and repeated inspection, as well as the identification of the priority of response and providing urgent measures of protection of victims of domestic and intimate partner violence;

- Mandate the centre for social work – custody authority to elaborate in more detail their actions with the view to a better protection of women against domestic and intimate partner violence, through the establishment of a special internal team of professionals, specifically educated to tackle the phenomenon of domestic violence, intimate partner violence and the provision of assistance and support to the victim;
Indicate the obligation of the centre for social work – custody authority laid down in Article 58 of the Law on Social Protection which stipulates that, in conducting its coordination role on the local level in order to meet the needs of persons suffering domestic and intimate partner violence, since services of social and family law protection may be provided simultaneously and combined with services provided by other systems, it is possible to enter into cooperation agreements on the local level with institutions and other organizations whose cooperation is necessary for efficient protection of victims of domestic and intimate partner violence.

III NORMATIVE AND LEGAL FRAMEWORK

It may be concluded that the normative framework, although its adoption and implementation preceded the adoption of the General Protocol, lays down comprehensively the scope, manner and contents of actions of social protection institutions relating to the response to domestic violence and/or intimate partner violence against women.

Thus in two main “instruments” – laws, i.e. the Law on Social Protection and the Family Law, the centre for social work – custody authority is envisaged as the key institution of the system of social and family law protection, mandated to play an active role in all stages of the implementation of its mandate, from prevention to detection and response, and to provide assistance and support to persons suffering such violence.

1. Centre for Social Work – Custody Authority (activities)

1.1. Law on Social Protection

The aims of social protection and the work of professionals in the centre for social work are stipulated in Article 3 of the Law on Social Protection. The aims of social protection are to: achieve and/or maintain minimum material safety and independence of an individual and a family in meeting their life needs; ensure the availability of services and achieve rights in the field of social protection; create equal opportunities for independent living.

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2 Law on Social Protection (“Official Gazette of the Republic of Serbia” no. 24/2011)
and stimulate social inclusion; preserve and advance family relations and advance family, gender and inter-generational solidarity; prevent abuse, neglect and exploitation and/or eliminate its consequences. The aims of social protection are achieved by means of providing social protection services and other activities preventing, minimizing or eliminating the dependence of an individual or a family on social services.

As legally verified in Article 41 of the Law on Social Protection, the aims of social protection are achieved by means of providing services to the beneficiary. A specific group of beneficiaries of social protection is foreseen in Article 41, paragraph 2, item 6 and includes a group of persons for whom there is a danger that they may become or already are victims of abuse, neglect, violence and exploitation and/or if their physical, mental or emotional wellbeing and development are threatened by action or oversight on the part of the parent, guardian or another person taking immediate care thereof.

Furthermore, Article 41, paragraph 3, items 2 and 3 of the Law on Social Protection stipulates that the beneficiary of social protection services is every: “Adult aged 26 to 65 (hereinafter: adult) and an adult over 65 years of age (hereinafter: an elderly beneficiary) is a beneficiary in the sense of paragraph 1 of Article hereof, when their wellbeing, security and productive life in society is threatened by risks resulting from age, disability, illness, family and other life circumstances, in particular: 2) there is a danger that they will become or already are a victim of self-neglect, neglect, abuse, exploitation and domestic violence; 3) if they are facing difficulties resulting from disrupted family relations, addiction to alcohol, drugs or other narcotics or due to other forms of socially unacceptable behaviour and other causes.

Pursuant to the aims of social protection and beneficiary target groups envisaged in the Law on Social Protection, “the centre for social work shall decide on the exercise of the rights of beneficiaries stipulated in this Law and on using the services of social protection ensured by the Republic of Serbia, the autonomous province and local government units and shall perform other tasks set forth in the law and regulations adopted pursuant to the law. The centre for social work, in line with the instruments of the local government unit, shall take part in the activities relating to planning and development of social protection in the local authority unit” (Article 119).

Specifically, in performing its role, the centre for social work enjoys significant public competencies: “The centre for social work, pursuant to the Law: 1. makes an assessment of the needs and strengths of the beneficiary and the risks and plans the provision of social protection services; 2) conducts procedures and decides on the right to allowances and on using social pro-
tection services; 3) undertakes the prescribed measures, **instigates and participates in court and other proceedings**; 4) maintains the prescribed records and looks after maintaining of documentation on the beneficiary.

The centre for social work **initiates and develops prevention and other programs contributing to meeting individual and common needs of citizens in the field of social protection in the territory of the local government unit for which the centre is established, initiates and develops prevention and other programs contributing to the prevention and elimination of social problems** and conducts other tasks in the field of social protection, pursuant to the Law and other regulations.” (Articles 120 and 121)

**Family Law**

In line with the Constitutional provisions, the Family Law stipulates more closely the obligation of the state and/or state system and institutions to undertake measures of special protection of the individual and the family. Article 2 of the Family Law prescribes that: “The family shall enjoy special protection from the state. Every person has the right to respect of their family life.” Specifically, the provision of Article 10 of the Family Law stipulates an explicit prohibition of domestic violence: “Violence is prohibited. Every person shall have the right, pursuant to law, to protection from domestic violence”.

In view of a number of criteria, such as: the scope and specific contents of public competencies, the number and structure of employed professionals and the territorial coverage by services, the legislator opted to entrust the centre for social work with tasks relating to family protection and/or tasks relating to organizing protection, assistance and support for the person suffering violence. Details of the mandate of this institution are given in Article 12 of the Family Law: “Tasks relating to the protection of the family, assistance to the family and custody, in the sense of this law, shall be performed by the centre for social work (hereinafter: custody authority). When the custody authority, in performing tasks stipulated by the law hereof, decides on administrative issues, they will perform these tasks as entrusted. Organization of the work of the custody authority, professional standards and the contents and manner of maintaining registries and documentation shall be prescribed by the Minister in charge of family protection”.

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3 Family Law (“Official Gazette of the Republic of Serbia, no. 18/2005)
1.3. Rulebook on the Organization, Norms and Standards of Work in Centres for Social Work

Additional specification of the subject matter and scope of work of centres for social work was made in the Rulebook on the Organization, Norms and Standards of Work enacted by the minister in charge of family care, under the authority of Article 12 Paragraph 3 of the Family Law. Given the complexity of the situation and the needs of persons exposed to domestic violence, especially women who are victims of intimate partner violence, it is necessary to make a list of all particular competences of the centre for social work – custody authority in the field of social care and family law protection:

In exercising public competencies and in accordance with the law, the centre for social work – custody authority decides on the following matters:

1. Exercising the right to financial aid;
2. Exercising the right to financial aid for the care and assistance of another person;
3. Exercising the right to assistance for vocational training;
4. Exercising the right to housing in social care institution;
5. Exercising the right to housing of an adult person in another family;
6. Foster care;
7. Adoption;
8. Custody;
9. Deciding on the child’s personal name and its change;
10. Measures of preventive supervision over the exercise of parental rights;
11. Measures of corrective supervision over the exercise of parental rights.

In the exercise of public authority and in accordance with the law, the centre for social work – custody authority performs the following tasks, in particular:

- Conducts mediation procedure – mediation in family relations (reconciliation and settlement);
- Submits findings and expert opinions at the request of the court, in litigation proceedings regarding the protection of children’s rights, or the exercise and deprivation of parental rights;

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• Submits, upon the request of the court, the opinion on the usefulness of measures of protection from domestic violence sought by other authorized plaintiff;

• Assist the court which conducts proceedings relating to the protection from domestic violence in obtaining the necessary evidence;

• Evaluates general suitability of foster parents, adoptive parents and guardians;

• Conducts inventory and assessment of the value of assets of the person placed under guardianship;

• Cooperates with the public prosecutor or the juvenile judge in the selection and implementation of corrective measures;

• Conducts mediation between the juvenile perpetrator and the victim of a criminal offence;

• Submits reports on the enforcement of educational order to the public prosecutor or the juvenile judge;

• Attends, with the approval of the court, the preparatory proceedings against a juvenile offender (the hearing of a juvenile offender, the hearing of other persons), submits requests and cross-examines persons being interrogated;

• Submits the opinion to the court which conducts criminal proceedings against juveniles on the facts relating to the age of the minor, the facts necessary to assess his or her maturity, examines the environment and conditions under which the juvenile lives and other circumstances concerning his or her personality and behaviour;

• Attends meetings of the court panel for juvenile offenders and trial in criminal proceedings against a juvenile offender;

• Informs the court responsible for the execution of institutional treatment measures and law enforcement authority when the enforcement of a measure cannot commence or continue due to refusal or escape of the juvenile;

• Ensures the implementation of corrective measures comprised of specific tasks;

• Verifies the enforcement of the educational measure of increased supervision by parents, adoptive parents or guardians and assists them in the implementation of the measures;

• Verifies the enforcement of the educational measure of intensified supervision in another family, and renders assistance to the family in which the minor lives;

• Implements the educational measure of intensified supervision by the custody authority by taking care of the minor’s education, his or her employment, his or her detachment from the harmful
environment, necessary medical treatment and improvement of his or her living conditions;
• Ensures the implementation of the educational measure of intensified supervision with the obligation of daily living within an institution for the education and upbringing of minors;
• Submits to the court and the public prosecutor for juveniles report on the enforcement of corrective measures under his competence;
• Requests the court to decide on the cost of implementation of corrective measures;
• Performs other tasks prescribed by the law;
• In exercising public authority Centre provides social work services and initiates court proceedings when authorized by the law.

The centre for social work – custody authority is under obligation to develop prevention programs which contribute to meeting the individual and common needs of citizens and/or prevention and eradication of social problems in the local community. Pursuant to the Rulebook, prevention programs are defined in a separate plan of prevention activities within the annual operational plan and should, inter alia, be directed at:

• Individuals, families at risk and marginalized populations, their empowerment to lead a productive life in the community, accountable parenthood and prevention of dependence on social services;
• Preventing the incidence of social problems such as: domestic violence, juvenile delinquency, addiction to psycho-active substances and similar;
• Development of volunteering capacities in the community;
• Campaigns directed at strengthening civic awareness and accountability for satisfying common needs, detection and elimination of community problems.

IV DEFINITION OF DOMESTIC VIOLENCE AND OTHER DEFINITIONS

The national legislation, pursuant to the Family Law, stipulates that: “Domestic violence, in the sense of this law, is a behaviour by which one member of the family violates physical integrity, mental health or the serenity of another family member. Domestic violence, in the sense of paragraph 1 of

Article hereof, shall mean in particular: infliction or attempt to inflict bodily harm; arousing fear by threatening with murder or inflicting bodily harm to a member of the family or a person close to them; coercion to sexual relations; encouragement to sexual relations or sexual relations with a person under 14 years of age or with a helpless person; restriction of freedom of movement or communication with third persons; insults and any other form of rude, ruthless and malicious behaviour”.

The Criminal Code of the Republic of Serbia stipulates that the criminal act of domestic violence is defined as an act performed by: “anyone who by way of force, threat to attack the life or body, insult or ruthless behaviour threatens the serenity, physical integrity or mental state of a member of their family, shall be punished ....”

Irrespective of the comprehensiveness of the legal definition of domestic violence in the Family Law and the Criminal Code, one should take into account, as a general operational definition, the definition of violence against women provided in the General Recommendation No. 19 of the United Nations Committee on the Elimination of Discrimination against Women (1992) which says that violence against women represents a form of discrimination in the sense of the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) and should be considered a severe breach of women’s rights. The definition of discrimination includes gender-based violence, i.e. violence that is directed against a woman because she is a woman or that affects women disproportionately. It includes acts that inflict physical, mental or sexual harm or suffering, threats of such acts, coercion and other deprivations of liberty. Gender-based violence may breach specific provisions of the Convention, regardless of whether those provisions expressly mention violence.

The 1993 United Nations Declaration on the Elimination of Violence against Women defines key forms of violence against women, stipulating that such violence may be physical, sexual or psychological, and when it occurs within the family it can manifest as battering, sexual abuse of female children, marital rape, and as other forms of violence.

The following terms will be used in this Special Protocol:

1. **“beneficiary - victim of domestic violence”** is a person suffering violence, or a family or social group in the community where violence takes place, who uses the services of the centre for social work – custody authority to meet their needs and who may not achieve or maintain the quality of life or protect their rights without the support of the authority;

2. **“professional of the custody authority”** is a professional performing social work duties and duties relating to family protection and provision of services in the centre for social work – custody authority or administrative and legal affairs or planning and development affairs;

3. **“case leader”** is a professional in the centre for social work – custody authority in charge of the specific case who determines and draws upon the necessary professional and other resources in the centre or other institutions and organizations in the local community, which are necessary to meet and overcome the needs and problems and/or provide adequate services to the beneficiary;

4. **“case management”** is a systemic social work approach which includes the activities of assessment, identification of service approach, planning, coordination, supervision and evaluation of services which are supposed to respond to the needs of a specific beneficiary;

5. **“supervisor”** is a professional tasked to coordinate, guide, stimulate and evaluate the work of case leaders, and to consolidate administrative, educational and developmental and supporting functions of supervision in their activities;

6. **“assessment”** is an organized process of data collection, identification and assessment of problems, needs, strengths and risks, the situation and involved persons, which develops progressively in order to identify the objectives of work with the beneficiary, as well as the necessary services and measures;

7. **“planning”** is a process in which, based on the information obtained in the assessment stage, a focused, systematic and time limited plan is developed in cooperation with the beneficiary and the family and other involved professionals, services and persons;

8. **“plan of services and measures”** is a set of services, measures, tasks and activities necessary to achieve the desired objectives in the organization of protection, assistance and support for the beneficiary;

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9 The definition of terms for the purpose of the Special Protocol was done on the basis of the terminology defined in the Rulebook on the Organization, Norms and Standards of Work of Centres for Social Work.
9. “evaluation” is a procedure by which the adequacy of assessment and the results of services and measures are appraised in specific time intervals and/or the degree to which the tasks prescribed in the plan and the defined outcomes are achieved;

10. “service” is a set of activities and goods offered to the beneficiary aiming to advance the quality of life, meet their needs, and eliminate or mitigate the risks;

11. “measure” is a set of legal procedures conducted in the centre in line with public competences.

V BENEFICIARIES OF PROTECTION AGAINST DOMESTIC VIOLENCE

The Law on Social Protection stipulates who may benefit from the rights and services in the social protection system. The Law prescribes that services and rights in the social protection system may be used and/or a person is entitled thereof if there is a danger that they will become or already are a victim of self-neglect, neglect, abuse, exploitation and domestic violence. A closer definition of the group of persons enjoying special civic and legal protection from domestic violence is set forth in the Family Law.

Thus the right to protection against domestic violence is enjoyed by:

- Spouses or former spouses,
- Children, parents and other blood relatives, persons in in-law or adoptive relation or persons involved in foster care;
- Persons living or having lived in the same domestic household;
- Common-law partners or former common-law partners;
- Persons who have been or are still involved emotionally or sexually, or persons who have a child together or child on the way, even though they have never shared a domestic unit together.

It may be concluded that the Family Law envisages a wider group of persons entitled to protection against domestic violence in comparison to the common understanding and the generally accepted definitions of the family and/or persons constituting a family. However, the Criminal Code of

10 Family Law (Official Gazette of the Republic of the Republic of Serbia, no. 18/2005), Article 197 paragraph 3.
the Republic of Serbia\textsuperscript{11}, based on the generally accepted understanding of the family, prescribes a narrower group of persons entitled to the criminal and legal protection against domestic violence. Thus the Criminal Code stipulates that a family member may constitute spouses, their children, spouses’ first bloodline ancestors, common-law partners and their children, adoptive parents and adopted children, foster parents and foster children, as well as siblings, their spouses and children, former spouses and their children and former spouses’ parents if they share the residence.

It may be concluded that family members, pursuant to the Criminal Code, do not include persons who have a child together or child on the way that have not shared a domestic household.

\textbf{VI CIVIL LAW PROTECTIVE MEASURES AGAINST DOMESTIC VIOLENCE AND THE PROCEDURE}

\textbf{- Obligations of the Centre for Social Work – Custody Authority -}

Civil law protective measures against domestic violence are laid down in the Family Law. The provision of Article 198 stipulates that one or more measures for protection against domestic violence may be imposed against a family member who has committed violence, which temporarily prohibit or restrict maintaining personal relationships with other family members and may be imposed by the court within civil proceedings.

Protective measures against domestic violence are as follows\textsuperscript{12}

- An order for eviction from the family home or an apartment, regardless of ownership or leasehold;
- An order to move into a family house or an apartment, regardless of ownership or leasehold;
- Prohibiting approach to a family member at a certain distance;
- Prohibiting access to the area around the residence or workplace of a family member;
- Prohibiting further harassment of the family member.


\textsuperscript{12} Family Law (Official Gazette of the Republic of the Republic of Serbia, no. 18/2005), Article 198, paragraph 2.
Imposed protective measures against domestic violence may last up to one year and may be extended until the reasons for which the measure was imposed cease to exist. The measure or measures for protection against domestic violence may cease before the expiry of their duration if the reasons for which they were imposed cease to exist.

Proceedings relating to protection against domestic violence before the territorially competent court of general jurisdiction and/or before the basic court within whose territorial jurisdiction is the place of permanent or temporary residence of the family member against whom violence has been committed, may be initiated by the complaint submitted by a family member against whom violence has been committed, his legal representative, public prosecutor and custody authority. The complaint for the termination of protective measure against domestic violence may be submitted by the family member against whom a certain measure has been imposed. Proceedings relating to protection against domestic violence shall be particularly urgent. The court is required to hold the first hearing within eight days as of the date the complaint was received by the court and the appellate court shall render a decision within fifteen days upon receipt of the appeal.\(^{13}\)

The provisions of the Family Law particularly stipulate the obligations of the centre for social work – custody authority within the procedures for protection against domestic violence. The Family Law lays down basic obligations of the centre for social work – custody authority in implementing the procedures for protection against domestic violence, in accordance with its scope of work:\(^{14}\):

Obligations of the centre for social work – custody authority are as follows:

- Initiate the proceedings for protection against domestic violence by submitting a complaint;
- If it the proceedings for protection against domestic violence have not been initiated, provide assistance to the court in obtaining the necessary evidence;
- If the proceedings for protection against domestic violence have not been initiated, give an opinion on the usefulness of the measures sought;
- Maintain records and documentation on domestic violence.

\(^{13}\) Family Law (Official Gazette of the Republic of the Republic of Serbia, no. 18/2005), Articles 283, 284. and 285

\(^{14}\) Family Law (Official Gazette of the Republic of the Republic of Serbia, no. 18/2005), Articles 284, 286 and 289.
In line with the above, it can be concluded that the role of the centre for social work - custody authority is a very important one, especially when taking into account that the court is not bound by the limits of the claim when imposing civil law measures for protection against domestic violence and that it can impose a measure that has not been sought if it deems that such a measure may achieve the best protection (deviation from the principle of disposition)\textsuperscript{15}.

\textbf{VII PROCEDURE OF THE CENTRE FOR SOCIAL WORK – CUSTODY AUTHORITY IN THE ORGANIZATION OF PROTECTION, ASSISTANCE AND SUPPORT FOR THE VICTIM OF DOMESTIC VIOLENCE}\textsuperscript{16}

\textbf{1. Identification of Violence}\textsuperscript{17}

**Physical violence against women within the family:**

Physical violence is the deliberate use of physical force that can cause pain, injury, disability or death. It includes behaviour such as scratching, pushing, hair-pulling, shaking, slapping, hitting, kicking, biting, strangling, stabbing, burning, physical restraint, battering and killing, not excluding other manifestations.

**Sexual violence against women within the family:**

Sexual violence is a sexual act without consent or the ability of the victim to choose to give consent, regardless of whether the act has been performed; sexual act or attempt of this act when a person is not in the position to consent to or refuse participation due to illness, disability, influence of psychoactive substances, age, that is, because of intimidation, blackmail or pressure; painful and humiliating sexual act. Intimidation, blackmail or pressures to participate in an unwanted sexual act include using words, gestures, objects or weapons expressing intention to cause pain, injury or death.

\begin{itemize}
  \item \textsuperscript{15} Family Law (Official Gazette of the Republic of the Republic of Serbia, no. 18/2005), Article 287.
  \item \textsuperscript{16} This chapter of the Special Protocol is developed based on the structure of the procedure and standards of work prescribed in the Rulebook on the Organization, Norms and Standards of Work in Centres for Social Work.
  \item \textsuperscript{17} The definitions of specific types of domestic violence are taken from the General Protocol.
\end{itemize}
Psychological violence against women within the family:
Psychological violence is the violation of victim’s serenity through behaviour, threats and applying methods of intimidation with or without using tools and weapons that can inflict physical injuries. It includes the humiliation of victims, controlling their behaviour, withholding information, embarrassing and degrading, blaming, isolating the victim from friends and family, manipulating children and degrading the victim as parent, denying access to money and other resources influencing the victim’s mental and emotional state. A specific form of psychological violence is controlling the victim by way of following or stalking, with repeated use of harassment and intimidation, such as stalking a person, appearing at their place of work or residence, making disturbing phone calls, sending letters and messages and destroying the victim’s property.

Economic violence against women within the family:
Economic violence is a form of psychological violence which includes unequal access to joint resources, denying or controlling access to money, prevention of employment or education and professional advancement, denying rights to property, forcing renouncement of property, alienating property without consent, not excluding other manifestations.

2. Detection of Violence
Professionals of the centre for social work – custody authority may discover and/or detect an individual case of domestic violence directly when performing their scope of activities in the field of social and family protection. Another way of learning about individual cases of domestic violence by the centre for social work – custody authority is detecting them indirectly, by means of reports filed by other state bodies, organizations, institutions, victims of domestic violence, relatives and citizens.
Irrespective of the manner of detection, the centre for social work – custody authority is obliged to respond in the following way:
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- Upon learning directly about the committed act of domestic violence or learning that there is a risk of domestic violence, the centre for social work shall immediately institute the proceedings ex officio and undertake to open the case thereof and conduct screening and determine the level of priority of response. An official record is made of direct detection;

- If the information came indirectly, through a report, the centre for social work – custody authority organizes a receipt of the report which includes: accepting submissions, receiving telephone calls or personal contact with the applicant or the person who reported the incident, assistance in drafting an appropriate motion, providing the necessary information to the applicant, referrals to other relevant services and initiating the case within the centre, as well as verifying eligibility and determining the priority of response. (Motions shall include: requests, automatic data processing forms, applications, petitions, appeals, complaints, initiatives and other means through which the user or other natural person or legal entity may address the centre).

3 Eligibility Assessment

In a professional procedure, upon conducting the reception of the report it is necessary to conduct screening and the assessment of eligibility of the report of domestic violence. Screening and the assessment of eligibility shall be conducted in the following manner:

- In case of the report being made orally, the professional conducting the reception procedure shall notify the applicant on the competencies and procedures conducted in the centre, lead a standardized interview with the applicant on all relevant facts known to them on the committed act of domestic violence (time, place, manner, duration, known consequences and the victim – victims and witnesses of domestic violence and possible involvement of other institutions in response to the act of domestic violence) and shall check if the family or the individual is already registered in the centre for social work – custody authority and on which grounds. The professional shall fill in the Reception Form based on the data obtained through the interview, the enclosed documentation and the conducted check.
• If the motion was submitted by mail, fax, e-mail or similar means, the professional conducting the reception procedure shall write down the arrival of the motion, look into the information contained and check whether the case has been registered with the centre and on which grounds.

• Based on the conducted interview with the applicant and/or analysis of the contents of information contained in the application and having checked if the case has been registered with the centre and on which grounds, the professional conducting the reception procedure shall make a decision to forward the Reception Form, together with the opened File on the beneficiary, to the manager of the service in charge of responding to the motion and/or to the professional in charge of assessment if there are no services established as specific organizational units within the centre. Such action is obligatory in all cases if the contents of the motion corresponds to the description of situation of an adult victim of domestic violence, person with disability or an elderly person suspected of being neglected, abused or exploited.

4. Determining the Priority of Response

The professional conducting the reception procedure is obliged to assess each report from the viewpoint of priority of response. If they assess that urgent intervention is necessary, they shall take action to organize the urgent intervention.

In all other cases, the professional, having conducted the assessment, shall write down the suggested priority of response onto the reception form and shall forward the case to the manager of the appropriate service and/or delegated case leader.

The circumstances taken into account in determining the priority of response in cases of domestic violence and described are:

• Need for support and/or security of the victim or the child who is an indirect victim of domestic violence;

• Specific characteristics of the situation and the severity of circumstances threatening the victim or the child who is an indirect victim of domestic violence which may lead to acute domestic violence, which cannot be prevented;

• If the victim of domestic violence or the child who is an indirect victim of domestic violence has sustained physical injury or if the threat is such that it may lead to physical injury;
- Prior knowledge of the centre for social work – custody authority on the specific case of domestic violence;
- Quality of cooperation of members of the family where violence takes place or in which there is a risk of occurrence of domestic violence, in prior contact with the professionals of the centre for social work – custody authority;
- Objective and subjective circumstances in the family and the relations of family members which threaten the victim of violence or the child who is an indirect victim of domestic violence;
- Other circumstances which indicate the priority of action in cases of domestic violence.

5. Urgent Interventions

The centre for social work – custody authority is obliged to provide directly, or in cooperation with other services and bodies in the local community, an urgent service to the victim of domestic violence, when it is necessary to undertake measures for ensuring security and protection of health and/or when there are justified reasons for suspicion that failing to undertake urgent measures and services in the mandate of the centre for social work – custody authority would threaten the life, health and development of the victim of domestic violence who needs protection.

Urgent intervention shall be provided immediately or no later than 24 hours as of the moment the case has been detected and/or the assessment of eligibility of report has been conducted in the course of screening.

If needed, urgent intervention may be conducted in cooperation with internal affairs bodies and health care institutions.

Urgent intervention is about ensuring promptly the following:
- Security of the victim of domestic violence;
- Health care of the victim of domestic violence;
- Existential conditions for the victim of domestic violence.
Security of the victim of domestic violence may be ensured by:

- Removing the perpetrator or potential perpetrator of domestic violence from the shared family household (house, apartment) or from the immediate environment of the victim of domestic violence,
- Removing the victim of domestic violence or potential victim of domestic violence from the shared family household (house, apartment) or from the immediate environment of the perpetrator or potential perpetrator of domestic violence and the placement of the victim into a secure environment (placement of the victim into a “safe house” or a social protection institution - shelter, or a foster family which provides the service of residence for underage persons or a family which provides the service of family residence for adults, or in a relative’s family, or another form of alternative residence). The selection and type of residence for the victim of domestic violence shall be made on the basis of assessment of security, in turn determining other elements which shall prevent access of the perpetrator of domestic violence to the victim.

Health care of the victim of domestic violence shall be ensured by:

- Conducting urgent medical examination to establish if there are any traces of physical or sexual violence;
- Providing urgent health care to remedy injuries resulting from physical or sexual violence;
- Providing professional psychological or psychiatric assistance to establish the level of psychological trauma as a consequence of exposure to domestic violence and to achieve psychological stability of the victim of domestic violence.

Existential needs of the victim of domestic violence shall be ensured by providing:

- Food;
- Hygiene;
- Clothes;
- Footwear.
6. Response Priority Levels

In cases of domestic violence, on the basis of identified circumstances which are taken into account when determining the priority of response and which are being described, the manager of appropriate service shall determine the priority of response:

- **“immediate”** – if in the specific case the collected data indicate acute violence with immediate threatening to the physical and emotional integrity of the victim or a high risk that such violence may occur, the initial assessment procedure takes place immediately, and immediate intervention must be performed as soon as possible, and no later than 24 hours thereon;

- **“urgent”** – if the collected data indicate that a child is a victim of domestic violence under moderate risk of threat to their physical and emotional integrity, the initial assessment takes place immediately, and no later than three days (72 hours) as of the report and/or detection of the case of domestic violence;

- **“regular”** – if the collected data indicate that the risk of violence occurring in the family is low and/or the level and quality of established communication among family members and the organization of family life is such that it may not result in domestic violence in immediate future, the procedure of initial assessment takes place immediately and no later than five working days as of the report and/or detection of domestic violence.

7. Initial Assessment, Planning Initial Assessment and the Procedure

The initial assessment of the status and the needs of the beneficiary – victim of domestic violence is initiated and realized once the case has been opened, the decision on the level of priority of response has been made, urgent interventions have been undertaken if needed and the case leader has been designated. Initial assessment takes place immediately and lasts no longer than seven working days, and is conducted by the professional who is the case leader, in cooperation with a supervisor.

The initial assessment is planned on the basis of available data and information on the case of domestic violence. The initial assessment procedure
is a basis for determining the scope of work with the beneficiary – victim of domestic violence and their family to ensure adequate and timely services. It is obligatory to involve the beneficiary – victim of domestic violence in the identification of the scope and dynamics of work, as well as other persons relevant to perform initial assessment.

The contents of the initial assessment plan:

- Persons relevant to the specific case of domestic violence which shall be contacted to collect information;
- Persons which shall be involved in the assessment procedure;
- Services which shall be contacted to collect information or data necessary to document domestic violence or undertake specific measures (e.g. the police authorities, health services, other professionals if needed);
- Manner of collecting the necessary data (standardized or semi-standardized interviews, collection of personal and other relevant documentation, tests, scales, questionnaires, visit to their home, school, working place, etc);
- Timeframe for the implementation of each activity.

Scheduling a first contact with the beneficiary – victim of domestic violence and other family members or other persons to collect data and information may be conducted by phone or in writing. A first contact may be conducted in the family household of the beneficiary – victim of domestic violence, in the institution or where the beneficiary – victim of domestic violence is placed or in the official facilities of the centre for social work – custody authority.

Initial assessment shall include the following procedures:

- Observation and interview with the beneficiary – victim of domestic violence and/or the child, the witness – indirect victim of domestic violence and any other person in the household (interview with the child shall be adapted to the age and communication abilities of the child);
- Observation and interview with the members of a wider family, other relevant persons in the environment of the beneficiary – victim of domestic violence;
• Direct observation of the living conditions in the family where violence has, or is occurring, or if there is a high risk that it may occur – in the field;
• Collection and analysis of information from other sources including the existing documentation in the centre, health care, education and other institutions;
• Collection of relevant data and/or findings and professional opinions from professionals employed in institutions of socially organized systems.

Initial assessment shall comprise the following components relating to the needs of the beneficiary – victim of domestic violence and the child who is an indirect victim, the witness of domestic violence and the family itself; security of the beneficiary – victim of domestic violence and the child who is an indirect victim, the witness of domestic violence; risks, social history, needs, the family and data on domestic violence:

• Description and assessment of the needs of the beneficiary – victim of domestic violence and/or the child who is an indirect victim, the witness of domestic violence and the family itself (personal characteristics and development needs – health, education, development of emotions and behaviour, identity, presentation in society, ability to look after themselves, family and social status of the beneficiary – victim of domestic violence and/or the child who is an indirect victim, the witness of domestic violence);

• Description and assessment of family functioning (personal characteristics of the beneficiary – victim of domestic violence and/or the child who is an indirect victim, the witness of violence, members of close and wider family, physical and mental health, substance abuse, mental disability, childhood abuse, stability of the family system, family history and functioning, support of a wider family);

• Description and assessment of the social status in the narrow sense of the beneficiary – victim of domestic violence and/or child who is an indirect victim, the witness of violence and members of a closer family (employment, income, housing status, status of the family in the community, community resources);
• Summary assessment: assessment of strengths, personal, family and environment resources which may contribute to overcoming the issues and difficulties and the assessment of security and description of risks and/or main problematic areas. Security assessment focuses on the current situation and the potential severity of the committed act of domestic violence. Risks relate to forecasting unfavourable or dangerous patterns of behaviour, situations and circumstances which may occur in the future and include factors threatening to the security, health and existential conditions of the beneficiary – victim of domestic violence and/or child who is potential victim, the witness of violence and members of a closer and wider family.

• Procedures with the family to create a secure situation for the beneficiary – victim of domestic violence and/or child who is an indirect victim, the witness of domestic violence and members of a closer or wider family and/or overcome current difficulties in the functioning of the family if the assessment indicates that this is possible;

• Undertake procedures to protect the beneficiary – victim of domestic violence and/or child who is an indirect victim, the witness of violence and members of a close family and ensure access to services which are to enable that the current situation is overcome and the problem is dealt with.

The results of the conducted initial assessment are reported in line with the form prescribed in the Rulebook on the Organization, Norms and Standards of Work of the Centre for Social Work or as part of the special findings and professional opinion. The findings of the initial assessment shall be imparted to the beneficiary – victim of domestic violence, in line with their ability to understand the necessary information, or to the child who is an indirect victim and the witness of violence to the extent in which they are able to understand depending on their age and maturity. Other persons, members of the closer and wider family, as well as persons or services that have detected or reported the case or have taken part in the assessment procedure shall be informed about the findings of the conducted initial assessment only if that does not threaten the security of the beneficiary – victim of domestic violence or the child who is an indirect victim or the witness of violence, or the investigation in pre-criminal and criminal proceedings.

The decision on the group of persons or services which are to be informed and the manner of imparting the information on the findings of the initial assessment shall be made by the case leader upon approval of the supervisor and/or service manager.
When deciding on undertaking measures of protection of the beneficiary – victim of domestic violence, in the course if the initial assessment procedure, the case leader shall consult with the supervisor or service manager prior to decision making. The decisions shall be made and justified in written, irrespective of their tackling professional procedures or an individual administrative instrument.

8. Directed Assessment, Planning and the Procedure

In cases of detected and reported cases of domestic and intimate partner violence against women, the custody authority shall conduct directed assessment, as these are cases entering or which may enter civil law or criminal proceedings, and there is the complexity of components affecting the decision. Furthermore, the obligation to conduct directed assessment comes from the need to gain detailed insight into all aspects and needs of the beneficiary – victim of domestic violence within the relevant professional procedure, in order to ensure the provision of adequate services.

The directed assessment procedure shall last no longer than 30 working days as of the day of finalization of screening. In exceptional cases, upon approval of the supervisor, the duration of the directed assessment may be extended, unless this is in conflict with the law-prescribed deadlines, for a period no longer than 30 working days.

Planning of the directed assessment

The case leader, with support and consent of the supervisor and/or service manager conducts the planning of:

- Identification of the area of assessment;
- Members of the family or other relevant persons from the beneficiary’s environment that should be involved in further assessment;
- Areas of assessment which necessitate the involvement of other professionals of the centre for social work – custody authority, which call for cooperation of professionals from other institutions and services;
• Special bodies, organizations and institutions which should be involved in the procedure (police authorities, health care institutions, national employment service, etc);
• Identification of the manner of collecting necessary factual data (interviews, documentations, tests, scales, questionnaires, visits to home, school, workplace etc);
• Identification of deadlines for the implementation of necessary activities.

Findings and Professional Opinion, Structure and Contents

Findings and the professional opinion is composed by the case leader in writing when it is necessary to submit findings of assessment to a court, another body or institution or when it is necessary to refer the beneficiary to a service under the mandate in another institution or organization

The findings and professional opinion on the conducted directed assessment of the status and needs of the beneficiary – victim of domestic violence shall contain the findings of the assessment, undertaken and planned services and measures of protection, assistance and support:

• Personal data on the beneficiary – victim of domestic violence and the situation description and the reason for instituting the procedure in the centre for social work – custody authority;
• Overview of the problem of the beneficiary – victim of domestic violence;
• How the beneficiary – victim of domestic violence perceives the role and their expectations from the centre for social work – custody authority;
• How relevant persons from the family and social environment of the beneficiary – victim of domestic violence, which were directly or indirectly involved in the assessment, perceive the problem of domestic violence and family functioning, the role and expectations in reference to the interventions of the centre for social work – custody authority;
• Assessment of security of the beneficiary – victim of domestic violence and the needs for interventions which are to ensure security thereof;
• Assessment of personal potentials of the beneficiary – victim of domestic violence and the potentials of their family and wider environment;
• Assessment of potentials of the local community and availability: description and assessment of organized institutional and non-institutional forms of assistance and support for the beneficiary – victim of domestic violence in the local community which may help them overcome the problem and the consequences of sustained violence (education, health care, employment, social welfare, non-government organizations, etc);

• Assessment of social support enjoyed by the beneficiary – victim of domestic violence and the family;

• Description and assessment of the current situation and social history of the beneficiary of the victim – domestic violence, including their status in the family, the method of meeting the needs in the family, emotional, physical and social functioning and difficulties thereof;

• Description and assessment of family environment and functioning, including the physical environment of the family (household), housing conditions, neighbourhood, family structure, stability, causes of stress and relations among family members;

• Description of education levels, employment and income of all family members;

• Description of other relevant characteristics of the beneficiary – victim of domestic violence such as cultural or religious affiliations, nationality, which affect or may affect the dynamics of internal family relations and the manner of meeting the needs of the beneficiary – victim of domestic violence;

• Description of the history of domestic violence in relation to family members;

• Description and assessment of the health status and needs of the beneficiary – victim of domestic violence in particular from the viewpoint of mental health, including the history of health treatments, medicines and hospitalizations;

• Description of abuse of psychoactive substances (alcohol, drugs, tablets and other substances) by the beneficiary – victim of domestic violence and other family members if this is relevant to the problem;

• Description of undertaken and planned measures and services by the centre for social work – custody authority and other relevant services and institutions;

• Proposal of other measures and services which are necessary for the stabilization of the beneficiary's needs – victim of domestic violence and meeting their needs.
9. Planning and Types of Plan

Aiming at a timely, comprehensive and continued provision of services for the beneficiary – victim of domestic violence, special plans of services and measures are developed.

The development of a plan of services and measures shall involve: the case leader and members of the team of professionals; the beneficiary – victim of domestic violence, other relevant persons from the family and wider environment of the beneficiary – victim of domestic violence; professionals and representatives of other services who took part in assessment procedures or are providing, or should be providing services to the beneficiary – victim of domestic violence or their family. All parties involved in the development of the plan should put their signature on the plan and the supervisor should also approve and sign the plan.

The plan of services and measures in cases of domestic violence shall be adopted:

- Initial plan of services and measures no later than 15 days from the day on which work with the beneficiary – victim of domestic violence started;
- Plan of services and measures upon finalized directed assessment, no later than 60 days from the day on which work with the beneficiary – victim of domestic violence started;
- Plan for stabilization, independence and integration of the beneficiary – victim of domestic violence;
- Other plans focused on the provision of assistance and support for the beneficiary – victim of domestic violence.

Plans of providing services to the beneficiary – victim of domestic violence shall contain:

- Description of the status contained in the assessment and the identified risks to be dealt with;
- Identification of general and specific objectives, specified as desired and/or expected outcomes;
- Identification of indicators of expected outcomes which should indicate that the existing problem, need or risk has been overcome, reduced or the need has been satisfied;
- Identification of activities to achieve objectives and outcomes;
- Identification of who, how, when and where they are to realize the activities, in order to achieve the defined objectives.
• Identification of the timeframe for the beginning and finalization of the task;
• Identification of verification means relating to the achievement and realization of general and specific objectives of work;
• Identification of methods and deadlines for reassessing the plan and repeated planning if necessary.

In the course of planning, it is necessary to make sure that reasonable measures are undertaken, which are in line with the principle of least restrictive intervention and which are relevant for achieving and maintaining an optimum level of meeting the needs of the beneficiary – victim of domestic violence.

The plan of services and measures is monitored and assessed continuously; the undertaken services, measures and interventions are documented, harmonized and altered in line with the identified objectives.

Reassessment is conducted on the basis of the findings of evaluation at least every six months from the day of adoption of the plan of services, unless the plan envisages a shorter period of time.

Reassessment and evaluation should indicate
• Whether the undertaken services and measures respond to the needs of the beneficiary – victim of domestic violence;
• Which barriers and circumstances obstruct the progress against the identified objectives and outcomes;
• Whether the established deadlines are appropriate and whether they should be changed and adapted to the newly occurred circumstances;
• Whether the beneficiary – victim of domestic violence and the family need some additional services and the manner in which these may be provided;
• Whether the services are coordinated adequately to respond to the needs of the beneficiary – victim of domestic violence in a timely, harmonized and effective manner.
10. Finalization of Work

Work with the beneficiary – victim of domestic violence and/or provision of services may be terminated under the following conditions:

- The undertaken services and measures have responded to the needs of the beneficiary – victim of domestic violence;
- Causes and consequences of committed violence in the family have been eliminated;
- Organization of life of the beneficiary – victim of domestic violence is such that there is no risk of reoccurrence of violence or such risk has been minimized and does not call for specific involvement of the centre for social work – custody authority;
- The beneficiary – victim of domestic violence explicitly refuses to accept the provision of assistance and support;
- Other circumstances have been identified during work that hinder objectively the provision of assistance and support to the beneficiary – victim of domestic violence.

Termination of work with the beneficiary is documented by the case leader by entering the following into the official documentation:

- Reasons for termination of work on the case;
- Short overview of provided services, including progress achieved in line with social protection objectives;
- Assessment of remaining risks including an assessment of the current situation of the beneficiary and the family, needs, strengths and risks;
- Closing remarks.

The decision on termination of work with the beneficiary – victim of domestic violence shall be verified by the supervisor or service manager prior to termination of work.
VIII PARTICULARLY IMPORTANT ISSUES THAT PROFESSIONALS EMPLOYED IN THE CENTRE FOR SOCIAL WORK – CUSTODY AUTHORITY SHOULD KNOW

1. Why does a woman stay with her perpetrator?18

- She does not enjoy support from anybody,
- Nobody believes her,
- Others blame her,
- Legal proceedings are too long,
- She is afraid of her perpetrator,
- She lacks income,
- She has nowhere to go,
- She has children,
- She is afraid that he may take away her children,
- She is ashamed of what people may think of her,
- She depends emotionally on her partner,
- She takes care of the perpetrator,
- She believes that things are going to improve.

2. Active Role of the Centre for Social Work – Custody Authority in Proceedings of Criminal Law and Civil Law Protection against Domestic violence and in Partner Relations

Domestic and/or intimate partner violence against women is a criminal offence. Every state authority is obliged to report the criminal offence to competent services immediately upon detecting that a criminal offence has taken place. Reporting may be done before the competent police administration or the competent public prosecutor by filing a criminal report.

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18 Autonomous Women’s Centre. Relying on the statistical data which indicate that women and children are most commonly victims of domestic violence, professionals employed in the centre for social work – custody authority should take into account these facts when responding to the phenomenon of domestic and intimate partner violence.
Every victim of domestic violence or a woman who is a victim of intimate partner violence has the right to protection, immediate termination of violence and that civil law measures of protection against domestic violence be taken against the perpetrator as laid down in the provisions of the Family Law. It is the duty of the centre for social work – custody authority to assist the beneficiary – victim of domestic violence or the woman who is a victim of intimate partner violence to seek and take part in the criminal proceedings for protection against domestic violence. It is the duty of the centre for social work – custody authority to use their authorities laid down in the Family law to institute on their own the criminal proceedings for protection against domestic violence in every case when they identify the inability of the beneficiary – victim of domestic violence.

IX SPECIAL OBLIGATIONS OF THE CENTRE FOR SOCIAL WORK – CUSTODY AUTHORITY IN THE IMPLEMENTATION OF THE SPECIAL PROTOCOL

Entering the Cooperation Agreement

The centre for social work – custody authority is under obligation to undertake the signing of a cooperation agreement on the local level among institutions and other organizations whose cooperation is necessary for an efficient achievement and delivery of protection of victims of domestic and intimate partner violence, within a year of the day of adoption of the Special Protocol in view of their coordination role on the local level in order to meet the needs of persons suffering violence in the family and in partner relations, pursuant to Article 58 of the Law on Social Protection.

Establishment of the Internal Team and the Identification of Procedures

The centre for social work – custody authority is under obligation, within six months as of the day of adoption of the Special Protocol, to elaborate internal actions in more detail with a view to a more effective protection of women against domestic and intimate partner violence and establish a separate internal team of professionals to tackle the phenomenon of domestic violence, intimate partner violence and provide assistance and support to victims.
X CLOSING PROVISIONS

The directors of the centre for social work – custody authority shall be responsible for the implementation of the Special Protocol.

The Republic Institute for Social Protection shall conduct monitoring and analysis of the impact of the implementation of the Special Protocol and shall compile a report thereof which shall be submitted to the Ministry of Labour, Employment and Social Policy until the end of February of the current year for the previous year.
Special Protocol on Conduct of Police Officers in Cases of Domestic and Intimate Partner Violence against Women
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Special Protocol on Conduct of Police Officers in Cases of Domestic and Intimate Partner Violence against Women

Number: 01-
Date:
Belgrade

The Government Conclusion dated 24 November 2011, adopting the General Protocol for Action and Cooperation of Institutions, Bodies and Organisations in the Situations of Domestic and Intimate Partner Violence against Women, provides that the Ministry of Interior shall adopt a special protocol in order to elaborate in more detail on internal actions, in accordance with the principles and objectives of the General Protocol.

The adoption of the Special Protocol on Conduct of Police Officers in Cases of Domestic and Intimate Partner Violence Against Women is of great importance for the Ministry of Interior, because it represents not only the adherence to the principle that victim security or safety is the priority, but also a normatively defined procedure of conduct of police officers in cases of domestic violence.

The objectives of the protocol is the standardisation of conduct of police officers in cases of domestic and intimate partner violence against women, as well as the specialisation of certain police officers who will participate in the police response in these cases.

The Ministry of Interior will not only adopt the Special Protocol on Conduct of Police Officers in Cases of Domestic and Intimate Partner Violence Against Women, continue with the implementation of activities in the process of victim protection against all forms of gender-based violence and but will also support intersectoral cooperation in this area, with the overall aim to introduce systemic solutions and implement mechanisms that enable efficient conduct in accordance with international commitments and the national legislation in relation to human rights protection.

MINISTER
OF INTERIOR
Ivica Dačić
1. Definitions and general terms

Any form of gender-based violence, or any action that results in the affliction of damage or suffering of physical, mental or sexual nature, threat thereof, coercion or other forms of limitation to freedom represents violence against women as a form of discrimination under the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), the most important international women rights treaty, ratified by the Republic of Serbia in 1981.

Violence in the family and in intimate partner relationship comes in different forms and manifestations.

- **Physical violence** is deliberate use of physical force that can cause pain, injury, disability or death. It includes behaviour such as scratching, pushing, hair pulling, shaking, slapping, hitting, kicking, biting, strangling, stabbing, burning, restriction of movement, battering and murder and other manifestations.

- **Sexual violence** is a sexual act without consent or choice of the victim to consent, regardless of whether the act has taken place; sexual act or the attempt of such an act when a person is not capable of conceding to or refusing participation due to illness, disability, influence of psychoactive substances, age, that is, under intimidation, blackmail or pressure, a painful and demeaning sexual act. Intimidation, blackmail or pressure to participate in unwanted sexual act includes the use of words, gestures, objects or weapons with the intent to cause pain, injury or death.

- **Psychological violence** is the violation of the victim's serenity due to behaviour, threats and using methods of intimidation with or without the use of tools and weapons that can cause bodily injuries. It includes victim humiliation, controlling their behaviour, denying her information, shaming and demeaning them, blaming, isolating them from friends and family, manipulating her using children and demeaning the victim as parent, denying her access to money and other resources that influence the victim's mental and emotional state.

A specific form of psychological violence is controlling the victim by following or stalking her, again using disturbing and intimidation, such as persecution, coming to their place of work or residence, disturbing phone calls, letters and messages and destroying the victim's property.

- **Economic violence** is a form of psychological violence that includes unequal access to common resources, denied or controlled access to money, preventing employment or education and professional advancement, denying right to property, pressure to wave the right to property, alienating property without consent and other manifestations.
In the Republic of Serbia, domestic violence is defined and prohibited by the provisions of the Family Law, Criminal Code and Law on Public Order and Peace.

According to Article 197 of the Family Law, domestic violence is the behaviour by which one family member endangers physical integrity, mental health or serenity of another family member. Domestic violence is in particular

- Intentional infliction or attempt of infliction of bodily injury
- Fear caused by threat of death or infliction of bodily injury to a family member or a close person
- Forced sexual intercourse
- Inciting someone to sexual intercourse or inciting to sexual intercourse a person under 14 years of age or a vulnerable person
- Restricted freedom of movement or communication with third persons
- Insults, as well as any other insolent, rude or malevolent behaviour

Family protection, family assistance and custody affairs, in the sense of this Law, shall be provided by the centre for social work. The proceedings in case of protection against domestic violence are initiated by complaint. The complaint for domestic violence protection measure, as well as for the extension of measure of protection against domestic violence can be raised by: family member who has been violated against, their legal representative, public prosecutor and custody authority.

**Pursuant to Article 198 of the Family Law the court can impose one or more measures for protection against domestic violence against the family member who has committed violence, which temporarily prohibit or restrict maintaining personal relationships with other family members.**

Regarding police conduct, the incrimination of domestic violence in the Criminal Code is important, which, because of the complex criminal legal protection of the family member defines a special criminal act of Domestic Violence (Article 194 of the Criminal Code). However, the prosecutor in charge can qualify another criminal act with elements of violence in the perpetrator’s actions (e.g. heavy bodily injury, light bodily injury, abandonment or neglect of a minor, abuse and torture, endangering safety, unlawful deprivation of liberty, threat with dangerous tool during fight or quarrel, inciting suicide and assisting suicide, rape and similar). Moreover, having in mind different manifestations of violence, it is possible to identify violations of the Law on Public Order and Peace.
The criminal act of domestic violence (Article 194 of the Criminal Code) is perpetrated by **whomever by use of violence, threat of attacks against life or body, insolent or ruthless behaviour endangers the serenity, physical integrity or mental state of a member of their family.**

Family members, under the Criminal Code, are: spouses, their children, spouses’ first bloodline ancestors, common-law partners and their children, adoptive parents and adopted children, foster parents and foster children. Family members are also: siblings, their spouses and children, former spouses and their children and former spouses’ parents if they share the residence, as well as persons who have a child together or child on the way and have not shared a domestic household.

2. **General principles of protection of women victims of domestic and intimate partner violence**

Domestic and intimate partner violence against women is recognised as a serious offence with negative impact on the social community and rights of individuals and it requires strong and efficient response of government bodies and civil society organisations dealing with these issues.

The police shall in their conduct adhere to the following common and general principles defined in the General Protocol for Action and Cooperation of Institutions, Bodies and Organisations in the Situations of Domestic and Intimate Partner Violence against Women:

1. Victim’s security (safety) is the priority in the work of professional services.
2. Ensure the safety and wellbeing of the child by ensuring safety and supporting the independence of the non-violent parent.
3. The perpetrator is solely responsible for violent behaviour.
4. All interventions should take into account the inequality of power between the victim and the perpetrator of domestic violence.
5. Respect the needs, rights and dignity of the victim.
6. Emergency of procedure is in accordance with the assessed danger of the situation and vulnerability of the victim.
7. Institutions, within their roles, competencies and missions, shall be responsible to stop violence and undertake protection measures.
8. Raise professional competencies through planned education and promotion of best practice examples.
In order for the women victims of violence to access their rights, it is necessary to establish a system that will enable a fast, efficient and coordinated procedure in situations of violence, which momentarily stops the violence, protects the victim from further violence and ensures adequate legal and psychosocial intervention enabling her rehabilitation and integration.

Violence against family members has specific characteristics in relation to violence outside the family. Violence in the family always represents abuse of power and control over family members who have less power or have access to fewer resources. In most societies, especially in traditional and patriarchal communities, men have significantly more power – not only physical, but also economic and social power.

The police must be aware of the unequal power between men and women, as well as cultural differences between family members in different communities and areas, in order to treat women in an impartial, constructive, consistent and non-judgemental way, using all authorities defined by the law.

3. The conduct of police officers when they encounter a case of domestic and intimate partner violence against women

Protection against domestic violence begins by recognising violence. Recognising violence falls within the scope of regular duties of all institutions. Recognising violence can be the outcome of the victim’s report of violence to any institution in the system of protection, or it can be a perception of physical, psychological or any other traces and manifestations of violence by any official or professional or any third person reporting the violence to the institution.

The police are obliged to act in cases of domestic and intimate partner violence. The police shall accordingly undertake measures to prevent, discover and document criminal acts and misdemeanours perpetrated by use of violence by the family member or partner.

The police should respect ethical rules when treating victims of violence and accordingly give them safety and support.

The police conduct shall include establishing cooperation with other government bodies and civil society organisation.
3.1. Reporting domestic and intimate partner violence against women

The police can find out about an act of domestic violence in different ways (directly, indirectly and on own initiative):

− When the victim reports violence on own initiative
− By an anonymous or known person (over the telephone or in writing)
− Through report by a professional in a health centre, centre for social work or other institution
− While performing other police work and security tasks

We would here like to present cases when violence is reported, most commonly found in practice, and give them special attention because they are very important for a right approach to working with women victims of domestic and intimate partner violence: which are to report violence by telephone and directly in police offices.

3.1.1. Reporting domestic and intimate partner violence against women by telephone call

Initial conversation between the police officer with the person reporting the violence (citizen’s information), should provide an opportunity to form a, to the extent possible, complete and good quality preliminary idea about the violence reported. With the aim of ensuring citizen safety, the police are required to undertake IMMEDIATE INTERVENTION in all cases, and particularly when the life and health of the victim may be in danger.

The police officer who receives the report on violence should obtain answers to the following questions:

1. Where the violence is (address, apartment number)
2. Who they are talking to (victim, witness, family member)
3. What has happened (is the violence in progress at the time of the call)
4. If someone is hurt (if yes, whether they need emergency medical assistance)
5. Who the reported person is, whether they are there, if not, where they are
6. Who the victim is (if she is in immediate danger)
7. Whether weapons have been used, whether there has been threat with weapons, where the weapon is now
8. If the reported person is under the influence of alcohol or opiates
9. Whether there are children present (how many children, what ages, whether they are safe)
10. If violence has occurred before (if the police have intervened before)
11. Whether there is a court measure in force for protection against violence.

NOTE: In cases when there is no immediate threat to the victim or urgency to act, focus on questions regarding victim safety.

Depending on the specific situation and if deemed necessary, the police officer will notify the person who reported the violence about the approximate time of arrival of police officers to the crime scene. The person who reported the violence can be asked to stay on the telephone line with the police, and if possible to inform the police about current events and the violence. In cases when there is immediate danger to the victim, the police can recommend the victim to go to a safe place (to neighbours', parents', relatives', etc.) until police officers arrive to provide the necessary protection.

The police officer who communicates with the victim cannot make comments and express personal attitudes about the incident while they are talking with the victim of violence, nor can they inquire in the victim's readiness to testify in further legal proceeding.

RECOMMENDATION: there should be police officers on duty who have undergone education/training on conduct in cases of domestic violence, so they can take over this type of call.

There should be a written record of the interview performed (events log, official note, report or similar).

3.1.2. Reporting domestic and intimate partner violence by the victim or other person in the police offices

One of the ways to report domestic and intimate partner violence against women is for the victim or another person to directly report it to police officers in police premises.

When taking a statement from the victim of violence it is necessary to provide physical protection and enable the victim to give a statement about the event without the perpetrator present, if possible in police offices that are separated and free from disturbance and everyday work activities of police officers.
3.2. Referral of police officers and their arrival to the scene of domestic and intimate partner violence

The aim of police intervention is to stop domestic violence within the limits of police authority.

At least two police officers shall be referred to the scene of events (preferably officers of different sexes to provide opportunity for the victim to talk to a woman), with the aim to determine the circumstances of the case and provide protection and other assistance to the victim of violence, prevent the perpetrator from continuing with violent behaviour, and as needed, provide transport to the nearest medical institution or shelter.

It is necessary to give information to the police officers appointed to the intervention on what is known about the reported person, if they are under the influence of alcohol, opiates or medicines that can alter his mental state. Also, it is important to know if force, weapons or other means were used during the reported violence to hurt the victim or might have hurt the victim, as well as whether the reported person had previously committed the same or similar acts with elements of violence.

Upon arrival to the scene of events, the police officers’ duty is to:

1. Perform identification of the perpetrator of violence (one or more), victim and witnesses to the event
2. Separate the victim from the perpetrator and provide physical protection to the victim of violence and enable her to make her statement without the presence of the perpetrator and out of his sight
3. Collect all data necessary to inform and prove the criminal offence or misdemeanour of domestic or intimate partner violence. In doing so, special care should be given to take into account all information regarding the circumstances related to the concrete situation of violence, define the type of violence more precisely and the way in which the violence was committed, the duration, continuity, possible earlier violence and if the authorities have already been involved and to what extent.
4. Take into special consideration the children exposed to violence
5. Inform the victim of violence that the relevant centre for social work will be notified about the case
6. Inform the perpetrator of violence about the concrete measures that will be taken against him

Police officers who have the above information should be aware of the high risk that accompanies the cases of domestic violence. When collect-
ing information, it is necessary to make an assessment of potential risks to their own safety as well as that of the victim, and take all necessary measures and activities of precaution and the protection of safety.

It is determined whether a weapon, dangerous tool or other objects suitable for attack or self-harm were used at the scene of events. The weapon shall, issuing a receipt on temporarily confiscated object, be temporarily confiscated and the motion for permanent confiscation shall subsequently be given. In case of knowledge of illegal possession of a weapon, necessary measures shall be undertaken to discover it and confiscate pursuant to the Criminal Procedure Code.

**MOST COMMON RISKS**

1. The perpetrator of violence has access to, is using or threatening to use weapons.
3. There are court orders in place and a history of violation.
4. The perpetrator has criminal history (not necessarily related to acts of domestic violence)
5. There is alcohol or drugs abuse or suspicion of mental disorders or illness.
6. Suicide threats or attempts (by the perpetrator and/or the victim).
7. Victim's feeling of fear and her opinion about the risks of future violence.
8. Unemployment and financial issues.
9. Current problems in intimate partner or family relations (e.g. announced leaving of the partner, divorce, property, custody or visiting rights over children and similar).
10. If there are children present, whether they have been or might be hurt.
11. Threats to victim, her family, friends.
12. Coercion to sexual intercourse.
13. History of jealous behaviour of the perpetrator in relation to the victim, stalking or harassment of the victim by former partner.
14. Other indicators of potential relevance: victim isolation (social or geographic), reluctance to leave the apartment/house, lack of (or weak) language skills or no citizenship, certain types of disability or chronic conditions, pregnancy, victim's age and similar. болести, трудноћа, узраст/старост жртве и сл.
The first presented risk indicates a possibility that the perpetrator of violence has access to weapons and in this respect the police officers have the duty to note whether any of the family members in the household possess weapons as well as if they can possibly acquire a weapon differently.

The conduct of police officers on the scene of violence must be professional. Means of coercion must be used within the boundaries of the legally defined authorities, with the prevailing use of the reciprocity principal. When undertaking measures and actions police officers shall act in accordance with the Criminal Procedure Code.

3.3. Control over the perpetrator of violence

It is the task of the police when they intervene to re-establish order and peace, that is, to establish control over the perpetrator of violence but also over other persons found at the scene of events. For certain complex interventions to be successful, an estimation number of police officers to intervene must be estimated. The exercise of police authority in order to prevent the criminal act or misdemeanour from continuing and the separation of the attacker is possible by arresting them and taking them in the police official premises.

**NOTE:** During police intervention, it should be kept in mind that there is fear of retaliation with the victim and fear of what will happen during the next encounter. Also, victims often do not wish the perpetrator to lose his job as a result of reporting them, because in this case he would not be able to support the family. Not seldom it happens that victims of violence feel guilty about the event and feel they should have done something to avoid violence, so they are uncertain when the police arrives about whether they should testify about the event or withdraw, thinking that the police intervention is sufficient to “scare” the perpetrator, who will not then repeat the violence.

3.4. Conduct of police officers after collecting information

In accordance with the information received from the victim of violence related to the severity of the act and its consequences, it shall be decided on whether uniformed police officers or criminal police detectives will continue working on the case. (**Instruction on the operations of organisational units on crime fighting**).

Responsible police officers shall report on the knowledge, information and evidence acquired to their superior or officer on duty, who shall further inform the relevant prosecutor, who within their competences shall qualify
the crime and give order on further procedure (collecting evidence and information, criminal and technical work on the scene of events, in certain cases informing the relevant investigating judge about the event in order to authorise investigation and other).

In case the relevant prosecutor states that there are no elements of crime in the act initiated ex officio, police officers shall inform the victim about this qualification and tell her that she can file a private complaint. Also, if there is evidence of misdemeanour pursuant to Law on Public Order and Peace, police officers shall take measures in accordance with the Law on Misdemeanours.

The victim shall be notified about the undertaken police measures.

3.5. Documenting events

The scene of domestic violence events is where the police officers establish the facts, by establishing where the violence occurred, in order to find material evidence and possible witnesses to the violence, but also they determine whether the victim sustained injuries (visible injuries or other injuries that are determined by medical examination).

It is very important to locate the evidence at the scene of events in order to document well the criminal report. In this respect it is necessary to:

1. Specify the type and location of victim's injuries by describing them, and also, with the victim's consent, by photographing the injuries.
2. Collect clothes that are torn or bloody, as well as objects that can provide traces, etc., in accordance with the rules of criminal tactics and techniques.
3. Photograph and describe the appearance of the scene of events as found (the furniture in the apartment overturned, destroyed, damaged), whether it is necessary to initiate a search investigation in order to collect material evidence that can be used during the criminal proceeding.

Interrogation of the suspect for the crime or misdemeanour in the area of domestic violence shall be performed in accordance with the Law on Criminal Procedure, that is, the Law on Misdemeanours.

In addition to the criminal or misdemeanour report, it is also necessary to submit the following: reports on previous reports of violence to the police, reports on prior sentences (misdemeanours or criminal offences), record of existing protection measures against domestic violence issued by the court (Family Law) and their violation, as well as information and documents from other sources, such as the reports of the centre for social work or organisations specialised in providing support to victims of domestic violence.
3.6. Information from citizens (victim and witnesses)

Gathering information from the victim requires the following **special preparations:**

1. Provide official premises where the victim will be encouraged to testify about the violence that happened to her.
2. Check how the victim feels (whether she needs to rest, drink water, medical assistance, etc.).
3. Prepare all relevant knowledge about previous cases of reported violence, doctor’s reports, material evidence collected.
4. Present the police officer who takes information from other persons present, as well as the purpose of the interview.
5. Explain to the victim before the interview starts, that the police officer is there to help her and ask her to tell the officer if she feels she has not understood a question and encourage her to speak about everything in her own words, even about the details she thinks the police already know.

Understanding, support, expressed consideration and skills of the police officer are important to gain the victim’s and the witnesses’ trust and gather information about the event or events related to the violence. Having this in mind, it would be preferable if the police officers interviewing the victim are women. Interview with children should be conducted exclusively by a police officer with adequate license, with a professional from the centre for social work, pedagogue and potentially a trustworthy person present.

In situations of domestic and intimate partner violence, there are often no witnesses, or they will not speak about what they have seen or what they know (they do not want to interfere or they fear consequences). Useful witnesses are not just the eye-witnesses to the specific event, but also all individuals who know that the victim has suffered violence, harassment, stalking, that she received threatening phone calls, persons who heard sounds (such as screaming, yelling, breaking), saw the victim immediately after the event, saw the place of events immediately after the incident, gave assistance to the woman or children immediately after the event. Therefore, it is important when the victim is giving her statement about the event, to ask her in each phase if someone was present or could know something about the event.
3.7. False reports

There is a certain percentage of false reports of criminal acts with elements of domestic violence, and the most common motives for false reports are:

− Revenge towards the partner for breaking off the relationship
− Jealousy
− Unrequited love
− Material benefit
− With young persons to justify: running away from home, staying out late, missing school, bad results in school, turning the parents’ attention to personal or family problems.

Some of the elements that may indicate that the domestic and intimate partner violence report is false are the following:

− inaccurate details about the time, place and method used in the act
− lack of defence injuries with the plaintiff reporting forced intercourse
− Time lapse between the moment when the crime was “committed” and when it was reported, etc.

**NOTE:** Inconsistencies in the victim’s or witnesses’ statements do not necessarily mean that the report is inaccurate (false). Inconsistencies can occur because of a misunderstood or unclear question, confusion because of the situation they are in, difficulty to recall events because of the experienced trauma, excitement, potential reluctance of the victim, influences by the family not to report the violence and similar.

4. Victim safety and referral to protection system

The police officers shall in a suitable and clear manner inform the victim about her legal rights, in particular the protective measures and conditions under which they can be imposed and how they affect the perpetrator, as well as the measures and actions to be undertaken by the police in the future against the perpetrator of violence, which are of particular importance for her safety (e.g. bringing the perpetrator to the police offices, issuing and duration of the measure of police custody, referring to the relevant judge with proposal for custody, that is, issuing custody order, releasing the perpetrator immediately after questioning by the relevant judge, about the importance of self protection and cooperation of the victim in a manner that would contribute to her safety).
The police officer shall consider all relevant issues for the assessment of the victim's safety, as well as the safety of other family members and discuss with them the measures of their safety. In cases when there is risk of repeated victimisation, the police officer shall warn the victim about the potential risk to her or potentially her child. (3.2. – most common risks)

In high risk cases, or if the victim asks to move to a shelter/safe house for domestic violence victims, the relevant centre for social work shall be asked to consider and initiate measures for urgent assistance to the victim and family members under threat.

If it is necessary to conduct an interview with or assist a child or a minor, urgent arrival and intervention shall be sought of a social worker from the centre for social work, taking care that the time spent in the police station is as short as possible.

It is necessary for the victim to gain detailed information about all the participants involved in providing assistance and ensuring safety. This includes addresses, telephone numbers, and helpline for women victims of violence, shelters (safe houses) and other organisations in the community specialising in domestic violence and violence against women. Allow for a “support person” to be by the victim (someone that will accompany her in proceedings with authorities).

It is important to build a relationship of trust and be clear that violence is an unacceptable form of behaviour and that responsibility for the violence is always with the perpetrator and not with the victim.

STATEMENTS OF SUPPORT TO THE VICTIM
   − The violence you experience was not your fault
   − Violence is solely the responsibility of the perpetrator
   − Nobody has the right to abuse you
   − Violence is prohibited (as misdemeanour and as criminal offence)
   − You are not alone, you can get help, I can tell you who can give you help other than the police
   − Violence has serious effects on your health, but also the health of your children

STATEMENTS OF HARM TO THE VICTIM
   − How could you let this happen to you?
   − What did you do to make him angry?
   − Why didn’t you tell me this before?
   − Why didn’t you call the police?
− Why are you with him when you know he’s violent?
− Why didn’t you leave him the first time he hit you?

Giving protection shall not depend on the victim’s readiness to file charges or testify against the perpetrator of violence.

It is important to ensure good exchange of information between all the participants in providing protection.

In accordance with the Law on Social Protection and the centre for social work Rules of Organisation, Normatives and Standards of Work, it is the duty of the centre for social work to coordinate measures and services in the community. The police shall refer all domestic and intimate partner violence victims to the Centre for Social Work, exchange information and participate in meetings organised to discuss the case, organise plan of protection and services for the victims of violence.

The plan of protection needs to ensure victim safety, stop the violence and prevent it from repeating, to protect the victim’s rights, to enable her make free decisions in her best interest, to receive services that assist her recovery, empowerment and independence. The plan of protection and services should also include repeated contact with the victim, monitoring and evaluation of the effects of the measures taken.

Please note that pursuant to the provisions of the Law on Police, police affairs are safety and protection of victims, rights, freedoms and integrity of person, as well as support to the rule of law.

5. Cooperation with other institutions that deal with domestic and intimate partner violence against women

Written information shall be produced and submitted to the centre for social work about the measures taken and the situation found, in order to enable social and intervention measures or measures of legal family protection (example: In order to ensure urgent protection of the woman victim of domestic and intimate partner violence and other family members exposed to the violence, the public prosecutor and the custodial authority shall, in accordance with the law, request the issuance of protection measures against domestic violence).

Participate in meetings about the case organised by the Centre for Social Work (as coordinator) together with the representatives of other relevant bodies, institutions and organisations.
6. Special protocol implementation and monitoring

1.1. Knowledge about the Special Protocol

Relevant organisational units of the Ministry of Interior shall present to the employees the content and activities to be implemented in the implementation and monitoring of the activities in accordance with the Special Protocol.

1.2. Training of police officers about the implementation of the Special Protocol

General Police Directorate, Criminal Force Directorate and Directorate for education, training, professional development and science shall organise training on domestic and intimate partner violence against women and on the implementation of the Special Protocol on Conduct of Police Officers in Cases of Domestic and Intimate Partner Violence against Women.

The training programme shall be designed in accordance with the principles of the General Protocol and the Special Protocol on Conduct of Police Officers. The content of the training shall include information on the following: regulations, rules and principles of police conduct in accordance with the Special Protocol. The content of the training shall also include information on: the dynamics of partner and domestic violence, prejudice and specific characteristics of domestic violence in relation to the cultural differences and lifestyles of some populations, information about the work of the public prosecutor, court procedures, support groups for victims of violence, efficient exchange of information with other institutions and organisations. It would be preferable if the trainers included persons other than police officers, who work on the protection of victims of domestic and intimate partner violence.

**Basic training** shall include all police officers whose daily work includes domestic violence reports. This training shall be implemented through the annual Programme of Professional Development of Police Officers with the Ministry of Interior.

**Specialised training** can be organised for police officers who will more often than others have the opportunity to work with the issue of domestic and intimate partner violence. This type of training shall be provided on proposal of the Area Police Directorate Commissioner. Police Directorate shall together with the Directorate for education, training, professional de-
velopment and science organise the training, and if possible engage ex-
erts in the proposed area (judges, prosecutors, university professors, civil
society organisations, etc.).

1.3. Information sharing about police jurisdiction

Having received consent from the Minister of Interior, informational mate-
rials on domestic and intimate partner violence can be printed.

1.4. Monitoring implementation of the Special Protocol

In order to improve the conduct in cases of domestic and intimate partner
violence victims, the Ministry of Interior shall monitor the implementation
of the Special Protocol as well as the effects of the conduct.

In Area Police Directorates the following shall be continuously performed:
− Analysis and assessment of undertaken measures of protection
against domestic violence
− Identification of the necessary changes and improvements in op-
erations
− Monitoring of the effects of conduct in cases of domestic and inti-
mate partner violence against women and ensuring data process-
ing, as well as their publication in accordance with the law

7. Data records on cases of domestic and intimate partner violence against women

Records on acting on reports of violence against women shall be kept
within the existing records of the Ministry of Interior, depending on the
type of violation. истарства унутрашњих послова у зависности од врсте учињене повреде.
Republic of Serbia Ministry of Health - Special Protocol for The Protection and Treatment of Women Victims of Violence
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Republic of Serbia Ministry of Health - Special Protocol for The Protection and Treatment of Women Victims of Violence

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Dear Madam/Sir,

Let me remind the citizens, and, before all, health professionals employed throughout health centres in Serbia, that the **Special Protocol of the Ministry of Health of the Republic of Serbia on Protection and Treatment of Women Victims of Violence** was adopted in June 2010. The Special Protocol is an instrument used to recognize, record and document gender-based violence, with the aim to involve health professionals to respond on the plane of discovery, elimination and prevention of this negative social phenomenon.

The health sector is often the first and the only instance that women exposed to gender-based violence address. Health effects of violence endanger the physical, mental and social status of a woman. By understanding and accepting their role, health professionals can help tackle the issue of violence against women. Some institutions have not given the necessary importance to this problem, nor have they been using the Special Protocol and the Form for Recording and Documenting Violence, which means that many women exposed to suffering caused by abuse still do not receive adequate assistance from the persons they address, and if a problem is not recognised and not addressed adequately, it cannot be resolved.

Awareness and responsibility to discover, document and respond to gender-based violence is of key importance. The implementation of the Special Protocol and the relevant software ensures the promotion and improvement of health services and helps eliminate and prevent gender-based violence in Serbia. Therefore, I call upon all health professionals and other citizens to by reacting and not ignoring abuse of women take a step forward in their professional approach and in this way actively participate, together with other stakeholders in the community, in discovering, sanctioning, reducing, preventing and eliminating violence.

Sincerely,

**Prof. Slavica Đukić Dejanović PhD**  
Minister of Health
1. Introduction

Violence against women includes a variety of different forms of abuse based on gender characteristics, directed towards women and girls in different periods of their lives. Violence against women is the result of imbalance of power between women and men, resulting in discrimination against women, in the society and in the family. It represents a violation of human rights, the very nature of which deprives women of their ability to enjoy fundamental freedoms, makes women vulnerable to further abuse and represents a big obstacle to overcoming societal inequalities between men and women\(^1\). Women rights are an integral part of universal human rights. In accordance with these international documents, these rights shall be guaranteed, respected and protected, which makes recognising and preventing discrimination against women very important.

Having in mind that women in Serbia, according to the last census of 2002, make 51.4% of the population, the importance of prevention and elimination of violence against women and the improvement of normative framework and harmonisation with international standards in this area. In 2002, World Health Organisation (WHO) declared violence top priority public health issue.

These are the reasons why violence against women is not only a personal but also a social phenomenon and issue. According to international documents, violence against women includes, primarily, physical, psychological and sexual violence, which can occur in the family and in the wider social community. They also indicate that some groups of women are more exposed to risk of victimisation by violence, especially the women from minority groups, women refugees, migrant women, women living in poverty in rural and remote areas, women in institutions or prisons, female children, women with disabilities, women of different sexual orientation, elderly women, displaced women, returnee women, women living in poverty, women in the situations of armed conflict etc.

Data indicate that violence against women is present in between 10 and 69% in different countries of the world\(^2\). Available data on the distribution, age structure, characteristics and effects of violence against women in the Republic of Serbia exist due to research conducted by the NGO sector\(^3\). Research conducted by the Victimology Society of Serbia in seven munici-

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palities on the territory of the Republic of Serbia demonstrated that 28% women respondents experienced violence in general, 22.4% of whom experienced violence by intimate partner. Research conducted by the Women's Health Programme, according to WHO methodology, on the sample of 1,456 participants, showed that the frequency of physical violence is 23%, sexual 6%, and both 24%. 22% of respondents experienced related mental health problems, 9% complained about poor general health state, and 30% reported bodily injuries. Each case of violence against women contains the risk of lethal outcome. According to this research, a particularly disturbing fact is that 78% of respondents do not turn to any of the institutions for help by naming experienced violence. In 2002, World Health Organisation declared violence a top priority public health issue.

1.1 International binding documents

Women's rights are an integral part of universal human rights, and in accordance with all international documents, they have to be guaranteed, respected and protected, which is why it is very important to recognise and prevent discrimination against women.

The Republic of Serbia, as a member of United Nations (UN), Council of Europe and other international organisations and signatory to a number of international documents related to women’s rights and gender equality, shall continuously work on the equality of rights between women and men, in order to ensure equal opportunities in all areas of private and professional life.

Serbia also has obligations deriving from UN Convention on Elimination of All Forms of Discrimination against Women (CEDAW), ratified in 1981, as well as the recommendations deriving from Concluding Comments of the UN Committee for the Elimination of All Forms of Discrimination Against Women (CEDAW Committee) after Serbia submitted the initial report of the Republic of Serbia according to this Convention. This Convention follows up on the Universal Human Rights Declaration, and Article 12 stipulates that “States Parties shall take all appropriate measures to eliminate discrimination against women in the field of health care in order to ensure, on a basis of equality of men and women, access to health care services, including those related to family planning.”

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6 WHO Multi-country study on women's health and domestic violence, WHO, 2005
Beijing Platform for Action\(^8\) represents a UN programme for empowering and advancement of women. This platform aims at removing all obstacles to women’s active participation in all spheres of public and private life, emphasizing that women have the right to enjoy the highest standards of physical and mental health, which represent a pre-condition for their wellbeing and opportunity to participate in all spheres of public and personal life.

This declaration also indicates that “violence against women is a manifestation of historically unequal social power relations between men and women, which have led to domination over and discrimination against women by men and to the prevention of women’s full advancement. Violence against women is one of the crucial social mechanisms by which women are forced into a subordinate position compared with men.”

| Violence against women is a violation of fundamental human rights |

Millennium Declaration with UN Millennium Development Goals\(^9\) recognised violence against women as a fundamental threat to socio-economic development. Violence is connected with complex social situations such as poverty, lack of education, gender inequality, child mortality and maternal health. These aspects are recognised directly in MDG 3 on the promotion of gender equality and women’s empowerment, and indirectly in MDG 5 on the improvement of maternal health, and in MDG 6 – Combat HIV/AIDS, malaria and other diseases, although gender mainstreaming is recommended in all MDGs.

Among the numerous Council of Europe documents on violence against women, the following should be singled out: Declaration on Policies for Combating Violence against Women in a Democratic Europe (Rome, 1993), Recommendation 1450 (2000) on Violence against women in Europe; Recommendation 1582 (2000) on domestic violence against women; Recommendation Rec(2000)5 of the Committee of Ministers to Member States on the protection of women against violence and Recommendation 1681 (2004) related to the Campaign to combat domestic violence against women in Europe.

1.2 National Documents

Violence against women is recognised and sanctioned in the following existing legislation of the Republic of Serbia:

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8 Adopted at the Fourth World Conference on Women in Beijing, 1995
9 Millennium Development Goals, adopted at UN General Assembly in 2000
• Criminal Code of the Republic of Serbia (Article 194)
• Family Law of the Republic of Serbia (Article 197)

Also, several crucial national documents have been adopted recently, which, among other things, also include the issues of violence against women. These are:
• Law on Gender Equality (2009)
• Anti-Discrimination Law (2009)
• National Strategy for Improving the Position of Women and Promotion of Gender Equality (2008)\(^\text{10}\)

**Criminal Code of the Republic of Serbia, Article 194: Domestic Violence**

1. Whoever by use of violence, threat of attack against life or body, insolent or ruthless behaviour endangers the tranquillity, physical integrity or mental condition of a member of their family, shall be punished by imprisonment from three months to three years.

2. If in committing the offence specified in paragraph 1 herein weapons, dangerous implements or other means suitable to inflict serious injury to body or seriously impair health are used, the offender shall be punished by imprisonment from six months to five years.

3. If the offence specified in paragraphs 1 and 2 herein results in grievous bodily harm or serious health impairment or if committed against a minor, the offender shall be punished with imprisonment from two to ten years.

4. If the offence specified in paragraphs 1, 2 and 3 herein results in death of a family member, the offender shall be punished with imprisonment from three to fifteen years.

5. Whoever violates a measure of protection against domestic violence that was imposed on them by the court in accordance with the law shall be punished with a fine and imprisonment from three months to three years.

**National Strategy for Improving the Position of Women and Promotion of Gender Equality** regulates areas related to women's participation in policy and decision making in economy, education, health, violence against women, as well as media and public opinion. Objective 2 of the Strategy re-

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\(^\text{10}\) In the original text the following is missing: Action Plan for the implementation of the National Strategy for Improving the Position of Women and Promotion of Gender Equality 2010-2015 and National Strategy for Prevention and Elimination of Domestic and Intimate Partner Violence against Women, adopted in 2011.
lated to strengthening the capacities of the system of protection of women against violence identifies activities on drafting and adoption of a unified protocol on action in cases of violence against women in social protection, health, educational institutions, police and the justice system, as well as on continued training of staff in these sectors.

2. Basic Terms Related to Violence against Women

Violence against women is any act of gender-based violence resulting or potentially resulting in physical, psychological or sexual injury or suffering of women, including threats of such actions, limitation of or arbitrary deprivation of liberty, equally in the public or private sphere. Women from marginalised and multiply discriminated groups (Roma women, women with disabilities, refugee and displaced women, war victims, women living in same-sex relationships, women with psychologically altered behaviour, women dependent on alcohol, drugs and medicines, women living with HIV/AIDS, women with chronic diseases, migrant women, poor women, female children, elderly women, women from rural areas and other multiply discriminated groups) are particularly vulnerable to violence.

Because of its devastating consequences, violence against women is one of the main obstacles to a harmonious, human and democratic societal development. As already mentioned above, a number of international documents and recommendations have been adopted over the last decades, which point to the state's obligation to clearly define specific forms of violence against women and to develop efficient and effective instruments to protect women against violence, to protect the right to life, liberty and personal safety of women, to prevent violence regardless of where it occurs, and to provide comprehensive legal protection, social and economic assistance to women victims of violence to help them leave the situation of violence and mitigate the harmful effects caused by it.

Physical, sexual and psychological violence often occur together, which significantly increases the risk to women's health.

The most common perpetrators of violence against women are their male intimate partners, regardless of whether the violence occurs in the context of living in a shared household or when meeting occasionally. In 96% of the cases of violence in heterosexual intimate relationships, the perpetrator is a man and the victim a woman, which makes it quite clear why priority was given to measures and activities directed at elimination of violence against women and its consequences.
WHO has defined **physical violence** as “the intentional use of physical force with the potential for causing death, disability, injury, or harm, including, but not limited to, scratching; pushing; shoving; throwing; grabbing; biting; choking; shaking; slapping; punching; burning; use of a weapon (gun, knife or other object)\(^1\).”

The same source defines **sexual violence** as “use of force, coercion or physical intimidation by one person to force another to sexual activity against their will, regardless of whether the act has been completed”.

**Psychological violence** (or abuse) relates to “continuous denigration and humiliation by the partner, as well as intimidation of performing any of the above actions”. 

Psychological violence must not be neglected or underestimated. It can have even more severe effects on the woman’s health, regardless of whether it is accompanied by physical violence and injuries or not.

Different methods and tactics are implemented in order to exert power over and control women, as well as physical violence against them, as demonstrated in Box 1.

Modern concept explains violence as a risk factor that increases probability for the occurrence of numerous health disorders and illnesses, and it can lead to death, directly or indirectly. Therefore, violence is a risk factor that has a negative influence on a person’s health, just as smoking tobacco, consuming alcohol or malnutrition.

 Experienced physical or sexual violence can result in death, directly or indirectly caused by violence, as well as a number of non-death outcomes, i.e. disorders of physical, mental and reproductive health or risky behaviour that damage health. Box 2 gives an overview of health consequences in relation to violence. Also, any existing health disorder can be significantly exacerbated by exposure to violence.

Bodily injuries can be caused by the following acts of violence: slapping, shoving, hair pulling, throwing objects at someone, hitting, kicking, strangling, burning, use of guns, spiky (pointy) and sharp objects, etc.

\(^1\) World Health Organization, 2002.
Violence against women
POWER AND CONTROL WHEEL

PHYSICAL VIOLENCE

Isolation
Controlling what she does, who she sees and talkst to, what she reads, and where she goes

Emotional abuse
Putting her down. Making her feel bad about herself. Calling her names. Making her think she's crazy.

Economic abuse
Preventing her from getting or keeping a job. Making her ask for money. Giving her an allowance. Taking her money.

Sexual abuse
Forcing her to sexual activities against her will. Sexually attacking her body. Treating her like a sex object.

Using children
Making her feel guilty about the children. Using the children to relay messages. Using visitation to harass her.

Threats
Making and/or carrying out threats to do something to hurt her. Threatening to take the children away, leave her, commit suicide, or report her to welfare.

Male privilege
Treating her like a servant: making all the big decisions, acting like the "master of the castle"

Intimidation
Making her afraid by using looks, actions, gestures, loud voice. Smashing things. Destroy her property.

Emotional abuse
Putting her down. Making her feel bad about herself. Calling her names. Making her think she's crazy.

Power and Control

battering, threats with weapons
pushing down to the ground, arm twisting, tripping

Goal
Tactics
Serves to employ tactics and achieve the goal
Bodily injuries include bruising, cuts, tears, abrasions, stab-wounds, sprained ankles, fractured and broken bones, eye injuries, torn eardrum and internal organ injuries, which directly threaten one’s life and can result in death. This Protocol will further elaborate on the methods of documenting such bodily injuries.

The health effects of violence are not just physical injuries, but many more, less visible health disorders.

Injuries, however, are not the only result of violence. Much more often than injuries, women experience the so-called functional health disorders, which occur as indirect effects of violence. Functional health disorders occur much more often with women who suffer violence in relation to those who do not live in violence. These are functional disorders of different organs and systems (Box 2) and they are not always accompanied by visible physical injuries. Therefore health workers rarely connect them with exposure to violence.
Box 2. Health outcomes of violence

**Partner Abuse, Sexual Assault, Child Sexual Abuse**

**Nonfatal Outcomes**
- Physical Health
  - Injury
  - Functional impairment
  - Physical symptoms
  - Poor subjective health
  - Permanent disability
- Negative Health Behaviours
  - Smoking
  - Alcohol and drug abuse
  - Sexual risk-taking
  - Physical inactivity
  - Overeating
- Chronic Conditions
  - Chronic pain syndromes
  - Irritable bowel syndrome
  - Gastrointestinal disorders
  - Somatic complaints
  - Fibromyalgia
- Reproductive Health
  - Unwanted pregnancy
  - STIs/HIV
  - Gynaecological disorders
  - Unsafe abortion
  - Pregnancy complications
  - Miscarriage/low birth weight
  - Pelvic inflammatory disease

**Mental Health**
- Post-traumatic stress disorder
- Depression
- Anxiety
- Phobias/panic disorder
- Eating disorder
- Sexual dysfunction
- Low self-esteem
- Substance abuse

**Fatal Outcomes**
- Homicide
- Suicide
- Maternal mortality
- AIDS-related

*(directly or indirectly caused by violence)*

Health workers that discover signs presented in Box 3 with a patient, should suspect exposure of the woman to violence and undertake appropriate activities on prevention and intervention as described further in the text.

**Box 3. Clinical indicators of violence**

<table>
<thead>
<tr>
<th>History</th>
<th>Psychological Symptoms</th>
<th>Physical Findings and Common Characteristics of Injuries</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chronic unexplained pain (persistent headache, abdominal, pelvic, chest pain, back or joint pains)</td>
<td>Insomnia, sleep disturbances</td>
<td>Any injury, especially to face, head, neck, throat, chest, abdomen and genital areas</td>
</tr>
<tr>
<td>Sexually transmitted diseases and exposure to HIV through sexual coercion</td>
<td>Depression and suicidal ideation</td>
<td>Dental or temporomandibular joint (TMJ) trauma</td>
</tr>
<tr>
<td>Multiple therapeutic abortions/miscarriages</td>
<td>Anxiety symptoms and panic disorder</td>
<td>Burns</td>
</tr>
<tr>
<td>Exacerbation of symptoms of a chronic disease (e.g. diabetes, asthma)</td>
<td>Eating disorders</td>
<td>Signs of sexual assault</td>
</tr>
<tr>
<td>Intra-oral injuries</td>
<td>Substance abuse, including tobacco</td>
<td>Central distribution of injuries, which can be covered up with clothing</td>
</tr>
<tr>
<td>Non-compliance with medical treatment</td>
<td>Post-traumatic stress disorder</td>
<td>Injuries of the forearms (so-called defensive injuries)</td>
</tr>
<tr>
<td>Frequently missed appointments</td>
<td>Use of psychiatric services by victim or partner</td>
<td>Wrist and ankle lacerations</td>
</tr>
</tbody>
</table>

Injuries that are not explained adequately or consistently

Injuries to multiple areas

Bruises of different shapes and sizes, reflecting types of weapons

Bruises in various stages of healing
### Behavioural Indicators

- Delay in seeking treatment
- Repeated use of emergency services for trauma or primary care
- Evasiveness during history taking or examination
- References to partner’s temper or anger
- Reluctance to speak in partner’s presence
- Partner answers all questions for patient or insists on being present when asked to leave exam room
- Overly attentive or verbally abusive partner
- Abuse or neglect of children, disabled person or elderly adult in the home

### Findings During Pregnancy and Childbirth

- Frequently missed prenatal appointments
- Low maternal weight gain
- Any injury including “falls”
- Complications such as miscarriage, low birth weight infant, prematurity labour, antepartum haemorrhage, etc
- Poor self-care or compliance
- Substance abuse, including tobacco or alcohol during pregnancy


### 3. Prevention and intervention

regardless of whether there are nationally defined strategies in the area of violence against women and the role of the health system, or they are being developed, the most important activities are at the level of health institutions. Health workers are the ones who, with their approach and through their work, translate recommended good practices into practice of all staff and so help adequately address the issue of violence against women, with all its specific characteristics. Data also tell us that women exposed to violence most often access the health system and that the violence, which is their main problem, remains unrevealed and their specific needs are not met.

Women are reluctant to speak spontaneously about the violence they experience, and on the other hand, health workers in the majority of cases do not perceive gender-based violence as part of their competencies. This is why it is necessary for health workers to be ready and trained to use their
attitude towards violence and other measures of assistance to women victims of violence, to name, recognise and identify violence and respond adequately. The discovery of violence should primarily be used to make immediately available all direct and indirect resources to the woman in order to empower her and enable her to use these resources.

Even though the woman has experienced violence, she will often deny this experience. There are many reasons to deny violence, and some of them are presented in Box 4. Health workers should be aware of these reasons and have understanding for them.

Box 4. Reasons why women deny violence

- Fear of the perpetrator
- Economic dependence
- Cultural pattern of tolerance to violence
- Concern for children (fear of losing children, fear of the perpetrator harming children, “children need both parents” attitude)
- Fear of being alone
- Loyalty and emotional ties to the perpetrator
- Feeling of guilt and of inferiority
- Embarrassment, shame, humiliation, degradation
- Dysfunctional family
- Alcoholism/drug abuse
- Personality disorders
- Pregnancy
- Violence experienced in childhood
- Lack of trust in anyone

Good practice in treatment of women victims of violence includes activities and actions presented in Box 5.
Box 5. Activities – good practice examples for providing health services to women victims of violence

1. Identify and confirm violence
2. Address the health outcomes of violence
3. Document violence
4. Assess safety
5. Develop a safety plan
6. Refer to community resources
7. End the conversation in a supporting tone

Box 5a. The purpose of the procedures

- To create conditions for the victim of violence to speak about the violence she is suffering or has suffered
- To ensure confidentiality of information and protection of privacy
- To enable adequate response to urgent needs of the client suffering violence
- To document violence
- To adequately assess the risk of the situation
- To enable multidisciplinary approach to domestic violence
- To enable client information and access to institutions dealing with the issues of domestic violence

Box 5b. Underlying principles of interventions

- Violence against women and children is a criminal act
- Violence endangers mental and physical health
- Violence is a serious personal and social issue
- Violence should be seen as a potentially life threatening form of behaviour
- Each victim of violence has the right to assistance without prejudice
• Non-disclosure and confidentiality of information received from the victim is of primary importance for her safety
• All interventions and care must be directed at empowering the victim of violence
• Education of health workers to recognise violence and react adequately is an integral part of prevention and efficient and timely intervention
• It is necessary to work continuously on raising the awareness of the entire social community about violence
• Giving information about the services dealing with these issues should be an integral component of procedures

Box 5c. Conditions for successful interventions:

• Respect confidentiality
• Respect the woman’s independence in making decisions
• Believe what the woman is saying is her experience
• Accept the woman’s feelings
• Listen, but not offer advice or ready-made solutions
• Provide support and participate in future planning
• Provide clear information on what can be received from professionals or institutions
• Not minimize the importance of violence
• Not ignore violence and/or avoid talking about abuse

3.1 Acknowledging and identifying violence

Regardless of whether the woman confirms the violence, health workers should clearly show that violence is illegal, it cannot be justified by anything, and they should show understanding for the woman’s situation. Also, it is extremely important to preserve the woman’s self-esteem and dignity. Box 6 gives examples of statements that health workers can use to do this. The examples of how not to communicate with the woman are also given, in order to prevent further stigmatisation and alienation from the health sector as a place of assistance.
Box 6. Acknowledging violence

<table>
<thead>
<tr>
<th>Supporting statements</th>
<th>Potentially harmful statements</th>
</tr>
</thead>
<tbody>
<tr>
<td>I am sorry this has happened to you.</td>
<td>Why did you allow this to happen to you?</td>
</tr>
<tr>
<td>Violence is not your fault.</td>
<td>Why did you do to make him angry?</td>
</tr>
<tr>
<td>Violence is exclusively the responsibility of the perpetrator.</td>
<td>Why didn't you tell me before?</td>
</tr>
<tr>
<td>Nobody has the right to abuse you.</td>
<td>Why didn’t you call the police?</td>
</tr>
<tr>
<td>Violence is a crime.</td>
<td>Why are you with him when you know he’s violent?</td>
</tr>
<tr>
<td>You are not alone, if you want to, you can get assistance, I can refer you.</td>
<td>Why didn’t you leave him the first time he hit you?</td>
</tr>
<tr>
<td>Abuse has serious effects on your health.</td>
<td></td>
</tr>
<tr>
<td>There is a way out.</td>
<td></td>
</tr>
<tr>
<td>I am concerned for your safety.</td>
<td></td>
</tr>
</tbody>
</table>

3.1.1. How to ask questions about violence?

If the health worker suspects a woman has experienced violence, they should ask questions to confirm their suspicion. WHO recommendations for health professionals say that whenever possible, they should routinely screen for violence when taking history.

The conversation with the patient must take place without any third person (perpetrator, person accompanying the woman to the examination, health institution staff, and similar). There is no standardized set of questions to be asked to the woman and each health professional shall adapt them to the specific situation and violence context. The questions asked can be indirect and direct. The proposed questions to verify the existence of violence are shown in Box 6a. and 6b.
Box 6.a Indirect questions for verifying the existence of violence

- I don’t know if this is your case, but many women who come to this institution are exposed to violence, this is the reason why we decided to start talking about it.
- Since violence occurs often in the lives of women, would you like to talk about it?
- I am worried about how you sustained such injuries.
- Has someone hurt you?
- We can often see these types of injuries with patients who suffer violence.

Box 6.b Direct questions for verifying the existence of violence

- Are you afraid of your partner?
- Has in the last year your partner physically hurt you, slapped, pushed, hit or kicked you?
- In the past year, has your husband/partner humiliated, offended or tried to control you?
- Has your partner threatened you?

If you receive a positive response, there are additional questions:

- Do you need help regarding what you have told me?
- Would you like us to notify the police, centre for social work, and/or somebody else?

In this way, the message is sent to the patients that violence against women exists, that it is not socially acceptable and that medical professionals are not neutral and that this problem very well concerns them.

It is important that the health professional does not insist on verification of violence, even when everything indicates to it. It is necessary to respect the woman’s decision/autonomy with each action. If the woman/patient is denying violence, and there is a suspicion of her being exposed to violence, in this case she should be examined and should not be insisted on her talking if she is not ready. An “open door” should be left for her to come back and say what she is experiencing.
3.2 Response to health effects of violence

The care for medical conditions caused by violence is, in effect, the only area in which health professionals recognise their competences. Only acute conditions and most often injuries are mainly seen as health effects on violence. This is certainly a very important segment of providing medical assistance, but we should not forget about a whole range of health conditions and diseases that occur as effects of women’s exposure to violence (see Box 2).

In principle, medical care is not different than providing assistance for any other condition or circumstances they could arise in. In this phase of treatment, it is necessary for health professionals to mobilise their entire medical expertise and apply it absolutely adapted to the context of violence against women.

Box 7 provides the treatment procedures for health professionals of the effects of violence in the given context.

**Box 7. Treatment of health effects of violence**

<table>
<thead>
<tr>
<th>The treatment procedures for health effects of violence</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Assess the effects of abuse on physical and mental health</td>
</tr>
<tr>
<td>• Examine present and recent injuries, as well as old ones</td>
</tr>
<tr>
<td>• Produce detailed medical records</td>
</tr>
<tr>
<td>• Repair injuries and other conditions, in accordance with good practice examples</td>
</tr>
<tr>
<td>• Give the women addresses and telephone numbers of services for assistance to women victims of violence, regardless of whether she wants to go to them at the moment or not</td>
</tr>
</tbody>
</table>

3.3 Documenting Violence

Documenting violence is a very important procedure and health professionals should be trained to routinely fill in the form for recording and documenting violence.

Medical documents that adequately register bodily injuries and health conditions after suffering violence can be used as forensic evidence. It is a valid indicator of the type and severity of injuries inflicted, thus representing important and often crucial evidence of suffered violence and its severity.
### Box 8. Summary of information in the form for recording and documenting violence

<table>
<thead>
<tr>
<th>Basic information include:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Main reason that brought the woman to the health institution or history of the present condition</td>
</tr>
<tr>
<td>• Detailed records on suffered abuse and the relation to the existing health problem</td>
</tr>
<tr>
<td>• Records of health problems that could be the result of abuse</td>
</tr>
<tr>
<td>• Summary of present and former abuse, including:</td>
</tr>
<tr>
<td>– Social situation, relation with the perpetrator and his name (if possible)</td>
</tr>
<tr>
<td>– Patient’s account of the event (using her words)</td>
</tr>
<tr>
<td>– Date, time and place where violence occurred</td>
</tr>
<tr>
<td>– Appearance and psychological condition of the patient</td>
</tr>
<tr>
<td>– Object and/or weapon used</td>
</tr>
<tr>
<td>– Threats and psychological abuse</td>
</tr>
<tr>
<td>– Name or description of witnesses of violence</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Information on physical examination include:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Findings related to the violence suffered (general and specialist)</td>
</tr>
<tr>
<td>• Detailed description of injuries, including type, localization, number, size, colour – drawn on the body map</td>
</tr>
<tr>
<td>• Colour photographs, if possible</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Laboratory and other diagnostic procedures</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Record lab test results, X-rays, the results of other diagnostic procedures related to the violence experienced</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Records on assessment, referral and monitoring</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Information on patient’s health</td>
</tr>
<tr>
<td>• Information on safety assessment, including the potential for murder or suicide (according to the patient’s and the health professional’s evaluations)</td>
</tr>
<tr>
<td>• Records on where she was referred to</td>
</tr>
<tr>
<td>• Records of date and time of scheduled control examination</td>
</tr>
</tbody>
</table>
It is important to mention that this approach, i.e. detailed description and documenting injuries should not be exclusively linked to specialists in forensic medicine. On the contrary, all health professionals who come in contact with the victims of domestic violence, including doctors of various specialists treating the effects of the violence suffered, can adequately perform a forensic examination and compose a valid medical document if trained properly.

The form for recording and documenting violence is a valid indicator of the type and severity of sustained injuries and is of first-rate forensic medical importance.

Pursuant to Article 332 of the Criminal Code of the Republic of Serbia – Failure to Report a Criminal Offence or Offender, doctors shall report the following offences punishable under law by imprisonment of five or more years, if discovered on duty: severe bodily injuries; all injuries inflicted with fire or other weapons, dangerous tools and other means used to afflict severe injury to the body or impair health; all criminal acts in the area of sexual crimes (rape and other).

In accordance with Article 194, Paragraph 3 and 4 of the Penal Code of the Republic of Serbia, doctors shall report the following offences: abuse in the family if leading to serious bodily injury or serious impairment of health or was inflicted on a minor or has resulted in death of the family member.

### 3.4 The assessment of safety and threat to life

In a number of cases, intimate partner violence can result in murder. Therefore it is always necessary to perform an assessment of the woman’s safety, i.e. ask her whether her life is in danger at the moment. The examples of concrete questions that health workers need to ask are presented in Box 9.

**Box 9. Assessment of threat to life**

**Sample questions used to assess vulnerability**

- Are you afraid that your husband/partner might hurt you again?
- Does your husband/partner know you came to the examination?
- Has your husband/partner threatened to hurt himself/you/the children?
- Do you feel safe going home or to work?
- Was the aggressive behaviour of your husband/partner preceded by the use of drugs or alcohol?
If the woman replies to any (one or more) of the questions positively, the health professional can assess that the woman is in direct life threatening situation, in which case a safety plan needs to be developed.

3.4.1 Safety plan development

Safety plan development is a necessary measure the lack of which can endanger the life of the woman and children. It helps increase safety, within the violent relationship as well as if the woman decides to leave the violent partner. It is assumed that the woman victim of violence can recognise the pattern of violence and the regularities in it, which can help plan steps toward safety. To develop the safety plan it is necessary also to have functional resources in the community. Their role is to, by applying the principles of intersectoral cooperation, intervene and take care of the woman whose life is threatened at the given moment.

All these activities develop in cooperation with the woman, who is given information on available sources of further assistance, which are not within the competencies and capacities of health professionals and the health service. What a health professional can and should do is presented in Box 10.

**Box 10. Safety plan development**

<table>
<thead>
<tr>
<th>Activities that aim to increase victim safety</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Ask the woman if she has somewhere to go if violence repeats or escalates</td>
</tr>
<tr>
<td>• Call the police, if the woman so desires, and offer her to make the call for her</td>
</tr>
<tr>
<td>• Offer her to choose a person she can talk to and plan her safety (immediately or later)</td>
</tr>
<tr>
<td>• Inform the woman about safe houses / telephone helplines / NGOs / community institutions that provide assistance to victims of violence</td>
</tr>
<tr>
<td>• Give the woman addresses and phone numbers of services providing protection, regardless of whether she wants to contact them at the moment or not</td>
</tr>
<tr>
<td>• Support the woman’s autonomy to decide on her safety measures by herself</td>
</tr>
</tbody>
</table>
The woman who is exposed to violence should be encouraged to think about the steps and plan safety in the following situations:

A. When sharing the household with the perpetrator
B. In case of having to leave the home quickly if the violence escalates
C. When she decides to leave the perpetrator

3.5 Referrals to community resources

Violence against women and addressing its effects requires participation of the wider social community. It is necessary to establish multisectoral cooperation on the local level in order to ensure efficient communication between institutions and establish a functional system for the provision of assistance and prevention of violence against women. It is necessary for this purpose to establish procedures and mutual cooperation mechanisms between the police, centres for social work, judiciary and NGOs. The list of services dealing with this issue needs to be developed within local communities, in order to enable insight in the best possible way and the availability of institutions and concrete professionals in charge of dealing with this issue in the society.

3.6 Ending the interview

Regardless of whether during the examination the woman has confirmed her experience with violence by the partner or not, whether she accepted police and other relevant services assistance, the duty of the health professionals is to fully respect the woman’s autonomy in making decisions regarding the violence, unless there is an obligation to report. Good practices are based on the health professional’s trust in the woman’s statement. It means to establish a good relationship with the woman, based on mutual trust and understanding, and to clearly let her know she can address them for help.

Health worker’s attitude should be in accordance with the advocacy strategy with the message:

- I can see what is happening to you
- I respect your feelings
- I will document violence and report it
- I will refer you to services and institutions that can help you
- I will help you make a decision that you feel is the best
4. Staff training to implement the protocol

As we have already pointed out, violence against women is a serious public health problem. It has also been recognised as an important factor adding to non-fatal and fatal health results and long-term psycho-social effects on women, children and family. The programmes in the educational system of health professionals are changing slowly, and currently content of the sort in health education is scarce and insufficient for practical work. This is why it is necessary for the contents on violence, and especially on violence against women to be integrated in on-going education, as an additional or integral part of any programme on women’s health.

For health professionals, education is the best way to overcome their fear and uncertainty for work in this area, especially in identifying women exposed to violence. Health professionals should be aware of their responsibility in providing assistance to women victims of violence, which was presented in the previous section of the Protocol. The Protocol shall be promoted to health professionals during meetings and other opportunities for the promotion of good practices.

As part of increased awareness on zero tolerance to violence, posters are recommended to be put up in visible places in health institutions (waiting rooms, corridors and similar). Pamphlets in different formats, education material and addresses and phone numbers of community resources for assistance, are key for the successful implementation of the Protocol. They should be available in all doctors’ offices.

nad ženama neophodna je
Annex 1. Form for recording and documenting violence

The form to be used to document experienced violence can be found in this part of the protocol for health professionals. This document is of forensic medical importance and health professionals are encouraged to document violence whenever they suspect it.

Health organization: ___________________________ Place: _________________________________

Doctor (position): ___________________________ Nurse (position): _______________________________

Violence Documentation

Date of examination: ___________________________ Time of examination: _________________________________

Basic data:

Name and last name: ___________________________ Age: ___________________________
Children: Number __________________ Age(s): ___________________________

Reason of visit:

a) patient reports violence: YES □ NO □

b) if no, why was violence suspected at: ___________________________

Has police intervened?

No □
Yes □ (Police Station): ___________________________
Information related to violent event:

Where did violence occur?: ______________________________________________________

Date:___________________

Time:___________________

Perpetrator:   Known □       Unknown □

If known, state the relationship with the victim:

husband □   ex husband □    partner □    former partner □    same-sex partner □

father □    brother □    son □    cousin □    guardian □    other :______________________________

Description of the event (using patient’s words):

___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Type of violence:

1. Physical violence       Yes □       No □

2. Sexual violence:
coercion to sexual intercourse □,
cocercion to unwanted sexual activities □,
humiliating sexual intercourse □
forced prostitution □
other:________________________________________________________

other:________________________________________________________
3. Emotional/psychological violence
insults □ restrictions □ intimidation □ threats □
other: __________________________________________

Orientation assessment of psychological condition:

communication □ no communication □ agitated □
other: __________________________________________

A. Medical information:
a) Is the patient pregnant? No □ Does not know □ Yes □ (How many weeks:_______)
6) Does the patient have any chronic conditions? No □ Does not know □ Yes □
If YES which? __________________________________________

History of abuse:
1. Is there information or signs of past injuries? Yes □ No □
2. Has she reported information on past injuries? Yes □ No □
3. Other important medical information:
sleep disturbances □ chronic pains □ headaches □
abuse of medicines or other psychoactive substances □
other: __________________________________________

B. Objective examination:
1. Appearance of clothes (describe traces of violence if any):

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
2. Bodily injuries (record type, shape, size, colour of the injury and draw them on the body map as accurately as possible):

___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Документ креирао тим програма Женско здравље
C. Risk assessment (put X in appropriate boxes)

<table>
<thead>
<tr>
<th>A*</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has there been a threat or use of weapons?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has frequency and severity of violence increased in time?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does the patient assess her safety is at risk upon return home?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has the patient attempted suicide or considered suicide?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have children been exposed to threats or violence?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B**</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is there a history of abuse in marriage/relationship?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does the perpetrator currently live in the shared household?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Did police intervene before?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does anyone else know about the abuse?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has the abuse started or increased during pregnancy?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is the patient seeking medical assistance?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Risk:

* A*) If the patient answered affirmatively to any question in group A, express concern about the situation she is in and help her find a solution (encourage her to make contact with people or organisations that could provide protection and security)

* B**) If the patient answered affirmatively to one or more questions in group B, help her look at all the options available to her. Give her information and phone numbers of organisations and institutions dealing with violence.

Given recommendations:

- a ) Control examination □
- b ) Specialist examination □
- c ) Centre for social work □
- d ) Police □
- e ) Legal aid □
- f ) Psychological/psychiatric assistance □
- g ) NGO working with violence victims □
- h ) Other ________________________________
Final conclusion:

**Findings are consistent** with the stated time and type of injuries

**Findings are not consistent** with the stated time and type of injuries

It is inconclusive

Remarks:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Doctor’s signature and facsimile

Nurse’s signature
Annex 2.

**Health Services**

- **General medicine**
- **Emergency medicine**
- **Other health services**

**Women exposed to violence**

**Screening**

- **YES**
  - Helath workers follow the **Special Protocol of the Ministry of Health of the Republic of Serbia**
  - **Procedure followed by health workers:**
    1. Respond to health effects of violence
    2. Document violence
    3. Assess the woman’s safety—safety plan
    4. Refer to community resources
    5. Report violence

- **NO**
  - [confirmed]

**Safety assessment**

- **In immediate danger**
  - Make direct safety plan with the woman
  - Refer to safe house of NGO

- **Not in immediate danger**
  - Make long-term safety plan with the woman
  - Give support
  - Refer to legal aid
ANNEX 3.
Names and telephone numbers of relevant institutions in the area, with the aim to facilitate the health professional in primary health protection, contacting, referring and/or taking care of the victim of violence.

<table>
<thead>
<tr>
<th>INSTITUTION</th>
<th>TELEPHONE NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Police administration</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Prosecutor’s office</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Centre for Social Work</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Pre-school institutions and schools</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Local self-government</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Media</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Safe house (if there is one)</td>
<td></td>
</tr>
</tbody>
</table>
Overview of The Procedure to be followed by Educational Institutions in Case of Violence Against Girls and Family Violence
Education system plays a very important and special role in every society. This position is determined by a number of points of reference, some of them being as follows:

- It includes all, i.e. majority of children of the same generation (this is particularly valid for preschool preparatory year and elementary school);
- Considering it’s compulsory character, at least nine generations are included in the system at the same time;
- Children, i.e. pupils spend great part of their time (4 to 8 hours ) in one place, and in organized manner, thus building specific inter-relations based on defined value systems;
- The system’s educational function is of special importance considering that quality of the school system greatly determines future of a society;
- Teaching staff deals with particularly vulnerable population of children and youth.
- In line with the above stated, the role of education system is primarily to prevent violence, abuse and neglect. It includes measures and activities that provide an institution with safe and encouraging environment, fostering the spirit of cooperation, respect and constructive communication, with the aim to, among other things, support the principles of gender equality, raise awareness of and sensitivity to violence, including gender-based and family violence, and to develop knowledge and skills and attitudes required for constructive response to violence among girls, boys, their parents and all the employees.

In situations of violence against children, boys and girls are treated equally in the education system, taking into account specific gender characteristics, in accordance with the circumstances. Specifically, violence situations that this information refers to, include peer violence against girls, especially sexual and gender-based violence, and also violence in peer partnership relations, violence of the staff and other adults against girls, i.e. violence experienced by children as witnesses of family violence.

Both preventive and intervention procedures defined by the education system for protection of girls and women from violence are regulated by a series of documents specifying actions of education system in protection of children and pupils from violence, abuse and neglect, adopted during the period 2007 to 2011. Significant parts of these documents are outlined in the text bellow in this Information.

By ratifying the UN Convention on the Rights of the Child, Republic of Serbia has committed to secure pursuit of all child rights, and in particular, the
right to be protected from all forms of violence, neglect and abuse, to be fully informed, right to have fair trial and protection of privacy, and also to be supported in physical and mental recovery and social reintegration for a child exposed to violence.

Following fundamental principles of the Convention in comprehensive and consistent manner, by adopting the Law on the Basic Principles of Education” („Official Gazette of RS”, No. 72/09 and 52/11) the System demonstrates commitment to the following principles:

- Education and upbringing in a socially responsible institution established on democratic principles and fostering tolerance, openness, awareness of cultural and civilizational interrelations on the world scale, commitment to fundamental moral values, values of justice, truth, solidarity, freedom, honesty and responsibility, with full respect for the rights of the child, pupil and adult;

- Efficient cooperation with the family by including parents, i.e. guardians, aimed at successful achievement of the set goals in education and upbringing.

The Law on the Basic Principles of Education stipulates, among other things, development goals and objectives of education for every child and pupil:

- Complete intellectual, emotional, social, moral and physical development in accordance with the child’s age, development needs and interests;
- Acquiring life skills for solving problems, establishing connections and implementation of these skills in the future education process, professional work and daily life;
- Raising self-awareness, self-initiative, self-esteem and capacity to express his/her own opinion;
- Development of and respect for racial, cultural, language, religious, gender, sexual and age equality, tolerance and respect of diversity.

On the basis of the Law on the Basic Principles of Education the pupils are entitled to the following rights:

- To be protected from discrimination, violence, abuse and neglect;
  - To receive timely and complete information about the issues of importance for his/her education;
- To get information on the rights and obligations;
- To exercise all rights of the child and pupil;
  - Right to protection and fair treatment of the pupil by the school, even in cases with he/she violates an obligation stipulated by the law.
The Law on the Basic Principles of Education stipulates the procedure to be followed in cases of violence, abuse or neglect committed by a staff member – disciplinary procedure is initiated and carried out. When responsibility of the staff is verified during the procedure, the measure of employment suspension is pronounced, and license of the teacher, educator or professional assistant is revoked.

The Law also defines that offence, i.e. criminal proceedings are initiated against a parent or an adult (third person) who commits violence and neglect against a staff member or when violence is committed by his/her minor child.

The Law specifies that procedure for protection of children and pupils from violence, neglect or abuse is defined by a separate bylaw.

On the basis of the Law on the Basic Principles of Education, and General and Special Protocol, the Rules on the Protocol for Acting in Response to Violence, Abuse and Neglect were adopted („Official Gazette of RS“, No. 30/10).

These Rules are binding for of all staff members of education system institutions.

While implementing the Rules on the Protocol, the institution is under obligation to secure conditions for safe and encouraging growth and development of the child and pupil (girls and boys), protection from all forms of violence, abuse and neglect, and social reintegration of a child and pupil who committed, or was exposed to violence, abuse or neglect. Each institution has to establish a Team for protection from violence, abuse and neglect, to adopt protection programme and to document, analyze and report on the cases of violence against children and staff members in their institution.

Prohibition of violence, abuse and neglect in an institution refers to everybody – children, pupils, staff members, parents and third persons, so that the educational institution represents a safe place for all children and pupils and for work of its employees.

The Rules on the Protocol for Acting in Response to Violence, Abuse and Neglect of all children, i.e. pupils in an institution defines preventive and intervention activities: contents and implementation method, risk assessment, methods of protection from violence, abuse and neglect, monitoring the effects of measures and activities undertaken.

Educational institution is obliged to:

- Carry out the procedure in efficient and economic manner;
- Secure protection and confidential character of data collected be-
Overview of the Procedure to be Followed by Educational Institutions in Case of Violence Against Girls and Family Violence

• Prevent a pupil from repeated and unnecessary testifying.

The Rules on the Protocol stipulate the obligation of educational institutions to react in all cases when there is suspicion or information that a child or pupil is exposed to violence, abuse and neglect, regardless of the perpetrator, the place where it happened, is happening or prepared:

• In situations of violence and abuse when the actors are children, i.e. pupils, the institution’s reaction depends on the form (physical, mental, sexual, social, digital technology abuse), intensity and frequency of violence, i.e. violence level defined by the Rules (the first, second and third level of violence), and could be resolved within the class (the first level), institution (the second level) and with inclusion of other systems, first of all social care system and the Police (the third level of violence).

• In case of suspected violence, abuse or neglect or information about family violence against a child or pupil, manager of the educational institution is under obligation to inform the Center for social work and the Police, who then proceed the information to the parent, in accordance with the Law;

• If it is suspected that the perpetrator of violence, abuse and neglect against a child and pupil is a third adult person (including an adult pupil), the manager is obliged to inform the parents of the child exposed to violence, abuse and neglect, competent Center for social work and the Police at the same time.

This approach indicates that the system clearly provides equal chance and possibility for girls to be protected from any form of violence, abuse and neglect, whether the perpetrators are their peers or adult persons, or they witness a family violence, and are therefore victims as well.

Measures and activities are initiated for all levels of violence and abuse. Operative protection plan (hereinafter: protection plan) is made for all children and pupils – participating in violence and abuse (those who suffer violence and neglect, perpetrators or witnesses). Measures and activities should be taken with participation of the child and pupil in accordance with his/her developing abilities. Protection plan also includes information on the measures the institution has undertaken on its own, in cooperation with other competent organizations and services or when other competent organizations and services conduct their own activities.

In case of a child who suffers violence of the third level, violence by adults or is a witness of family violence, in addition to providing information and inclusion of the Centre for social work/Police, a staff member (educator,
teacher or professional assistant) should undertake all necessary steps within the protection plan in order to secure conditions for emotional and social recovery of the child within his/her peer group/class, demonstrating understanding and offering the child/pupil a chance to express his/her capacities and abilities in accordance with the prevailing living circumstances of the child.

In order to ensure the best possible implementation of the adopted Law and the Rules, and to provide safe and encouraging environment for development of children and pupils, staff trainings are organized and carried out, programs are implemented (“School without Violence”, “Be a Man”; prevention of sexual violence, mediation and others); SOS line for reporting school violence is established (080-200-201); teams for crisis intervention are formed and trained; surveys are conducted (about prevalence of violence and school safety, gender-based violence and digital violence); activities have been underway on establishing links among all systems and reinforcing the education system to recognize family violence, new partnership relations with civil society, institutions and media are built.

For purpose of efficient and effective coordination, initiation, organization, monitoring and implementation of these and other activities in the field of protection of children from violence in the education system, Ministry of Education, Science and Technology Development, with the support of UNICEF, has established a Unit for violence prevention, starting on February 2012.

Other Ministries, Government, Non-Government and international organizations provide support and cooperation in the activities of this Unit, which is crucial for more efficient protection of children/pupils, both girls and boys.
Violence against women is the result of imbalance of power between women and men. UN CEDAW Committee General Recommendation 19 (1992) says that violence against women is discrimination within the meaning of article 1 of the Convention on the Elimination of All forms of Discrimination against Women (CEDAW) and should be considered a serious violation of women’s human rights. “The Convention in article 1 defines discrimination against women. The definition of discrimination includes gender-based violence, that is, violence that is directed against a woman because she is a woman or that affects women disproportionately. It includes acts that inflict physical, mental or sexual harm or suffering, threats of such acts, coercion and other deprivations of liberty. Gender-based violence may breach specific provisions of the Convention, regardless of whether those provisions expressly mention violence.”

United Nations Declaration on the Elimination of Violence against Women, 1993, defines key forms of violence against women specifying that such violence can be of physical, sexual or psychological nature and that it can occur: 1. within the family including battering, sexual abuse of female children in the household, dowry-related violence, marital rape, female genital mutilation and other traditional practices harmful to women, non-spousal violence; 2. within the general community including rape, sexual abuse, sexual harassment and intimidation at work; and 3. physical, sexual and psychological violence perpetrated or condoned by the State, wherever it occurs.

Violence against family members has specific characteristics in relation to the violence perpetrated outside of the family. Domestic violence always represents abuse of power and control over family members with less power or fewer resources. In the majority of societies, especially in traditional and patriarchal communities, men have significantly more power – not only physical, but economic and social power.

Violence in the family is domestic violence meaning “all acts of physical, sexual, psychological or economic violence that occur within the family or domestic unit or between former or current spouses or partners, whether or not the perpetrator shares or has shared the same residence with the victim”, as stated in Article 3 of the Council of Europe Convention on preventing and combating violence against women and domestic violence.
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