



**Action plan for developing
victim-centred and trauma-informed
criminal justice systems**





RE-JUST

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This Action plan was prepared in connection with the project “Towards a more responsive victim-centred approach of the criminal justice system” (RE-JUST), which was implemented by the Association Pro Refugiu (Romania), the Center for the Study of Democracy (Bulgaria), SOLWODI Deutschland e.V. (Germany), the European Institute for Crime Prevention and Control, affiliated with the United Nations (HEUNI, Finland), and Dinamia S. Coop (Spain).

This Action plan has been produced with the financial support of the Justice Programme of the European Union. The contents of this publication are the sole responsibility of the authors and can in no way be taken to reflect the views of the European Commission

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Introduction

The present Action plan was developed in connection with the “*Towards a more responsive victim-centred approach of the criminal justice system*” RE-JUST-project¹ funded by the Justice Programme of the European Commission. The Action plan was written by experts from the Association Pro Refugiu (Romania), the Center for the Study of Democracy (Bulgaria), SOLWODI Deutschland e.V. (Germany), the European Institute for Crime Prevention and Control, affiliated with the United Nations (HEUNI, Finland) and Dinamia S. Coop. (Spain). The Action plan aims to give ideas and examples for developing victim-centred and trauma-informed criminal justice systems. The Action plan compiles concepts from research, reports, and past projects as well as examples of models and ways of working that have been developed and used by the partner organisations and the respective authors of each chapter. The Action plan combines knowledge and ideas from different disciplines, most notably law, criminology, and psychology. Each chapter is written by a particular expert and each chapter represent the author’s expertise and opinions.

The Action plan builds on the idea that the protection of victims should be understood and achieved on multiple fronts, via legislation, in criminal proceedings as well as in society. Taking a victim-centred approach to how the criminal justice system processes the needs of victims, means treating victims with care and respect and recognising the difficulties and challenges faced by those who have experienced crime. A key issue is that as long as practitioners consider violent crimes as a matter between the state and offenders, and not as one involving victims, it will remain difficult to give victims the important role in the proceedings that is in line with their needs and the interests of justice.

Victims of crime should be protected against repeat victimisation, they should be granted access to justice, and it should be made possible for them to participate in the criminal proceedings, in line with Article 47 of the EU Charter of Fundamental Rights. The way in which victims are treated cannot be improved through legislative reforms alone. The protection of the rights of victims should be implemented effectively at the practical level. An effective way to meet the needs of victims is to create and use tools in order to provide legal, social, psychological, and financial support to victims in order to ensure effective assistance. In this Action plan, we first discuss structural issues such as legislation and processes, including the importance of cooperation between the criminal justice system and assistance providers, and how to provide victims with information on their rights. Then, we move on to an understanding of what trauma is, how it is manifested in the criminal justice system and how criminal justice actors can in practice provide justice and support services in a trauma-informed manner.

The key legislative reforms to be undertaken in order to ensure victim-centred approaches are discussed in **Chapter 1**, written by *Miriana Ilcheva* from the *Center for the Study of Democracy*. The necessary coordination and referrals between the criminal justice system and victims support services are discussed in **Chapter 2**. This chapter also presents a detailed model for a step-by-step referral system. Chapter 2 was written by *Cristina Fernández, Javier Plaza* and *Elena Gómez* from

¹ www.prorefugio.fi/re-just. The project webpage contains reports from Bulgaria, Romania, Spain, Finland and Germany on the situation of victims of crime in each country, as well as a Compendium of European Best Practices developed in the course of the project.

Dinamia S. Coop. An important part of the multidisciplinary approach is that, at each step of the way, victims are informed of their rights and of available services. **Chapter 3**, written by *Katrin Lehmann* from *SOLWODI Deutschland e.V.*, presents numerous national and transnational examples of tools and channels for ensuring that victims receive information on their rights and on access to services.

In **Chapter 4** we move on to an understanding of the needs of victims from a trauma perspective. Chapter 4, written by *Gabriela Ionescu* from the *Pro Refugiu Association*, addresses aspects of psychological trauma. The chapter is designed to help professionals in the criminal justice system understand how a person's normal functioning may be affected by exposure to a traumatic event.

Reporting a crime to the relevant authority is the first step in the victim's journey in seeking to achieve justice through the criminal justice system. It is therefore important that the first interaction with the law enforcement, prosecutorial and judicial stakeholders should be a non-traumatising experience for the victim. This first contact sets the tone for the further criminal justice process and, in instances where the case does not go beyond the reporting or investigation stage, may represent the entire experience that the victim has with the system. Among the elements that will define whether or not the victim can develop trust in the process are: the way in which questions are asked during interviews and how other evidence is collected; the environment and atmosphere to which victims are exposed while reporting the crime; and whether comprehensive information on the process is provided. A victim-sensitive and trauma-informed approach is needed both during the investigation and the trial phase. Taking a trauma-informed approach means in practice that also judicial stakeholders conduct themselves in a trauma-informed manner, including by using trauma-informed communication techniques. These are discussed in **Chapter 5**, written by *Anja Wells* from *SOLWODI Deutschland e.V.*

Finally, providing criminal justice professionals with basic knowledge on trauma is an important step in building victim-centred and trauma-informed criminal justice systems. Training on trauma should provide professionals with practical skills in encountering traumatised victims. **Chapter 6**, written by *Inka Lilja* from *HEUNI*, presents a model training curriculum with building blocks for organising one to two-day training on trauma for criminal justice professionals.

We hope that policy makers and criminal justice professional can use this Action plan as a source for ideas and practical examples, and that it will enable them to use tools for developing more victim-centred and trauma-informed criminal justice systems.

1. Reforming legislation to ensure victim-centred and trauma-informed approaches

The legislation in different countries related to victims of crime takes different approaches towards the rights of victims, and upholds them to a different extent. The Victims' Rights Directive of 2012 and the Guidelines for its implementation by DG Justice of the European Commission² give some leeway to countries in transposing and implementing the instrument by legislative and non-legislative measures. This, combined with the particularities of the criminal justice systems of the different Member States, results in a fragmented national legislative environment, where even the Directive Implementation Report of 2020, which can be seen to have a fairly general nature, identifies a considerable amount of deficiencies. A number of infringement procedures, including against Germany,³ Bulgaria and Finland,⁴ have been launched at different points in time, which indicates the determination of the EU institutions to improve transposition and implementation in the Member States. However, more political will is still needed for proper practical implementation, which goes beyond formal compliance.

The **implementation report of 2020**⁵ has documented a number of deficiencies in the way different Member States define 'victims', and in the right of victims to support and protection, especially in the case of the families of deceased victims. Regarding access to information, weaknesses were found in the active support that has been provided to victims, in the communication of information in a language that is accessible and that is adapted to their individual characteristics, and in the provision of information from the first contact with the competent authority, on the development of criminal proceedings and on protection measures in case the perpetrator is released or absconds. The transposition of the right to translation and interpretation, inherently linked to the status of foreign victims, is also seen as highly problematic. Procedural rights are deemed relatively well transposed, potentially because of the different roles victims have in national systems. However, regarding the access to general and specialised services, it is noted that many Member States limit access to such services to victims of domestic violence and human trafficking. Protection measures do not seem to be available for all victims and/or do not include measures against emotional or mental suffering. The extent to which separate waiting rooms for victims and perpetrators are available is also seen as problematic. Weaknesses are seen in the

² European Commission, DG Justice (2013), *DG Justice Guidance Document related to the transposition and implementation of Directive 2012/29/EU of the European Parliament and of the Council of 25 October 2012 establishing minimum standards on the rights, support and protection of victims of crime, and replacing Council Framework Decision 2001/220/JHA*, Brussels: European Commission

³ European Commission (2019), *July infringements package: key decisions*, https://ec.europa.eu/commission/presscorner/detail/en/inf_19_4251

⁴ European Commission (2020), *Report from the Commission to the European Parliament and the Council on the implementation of Directive 2012/29/EU of the European Parliament and of the Council of 25 October 2012 establishing minimum standards on the rights, support and protection of victims of crime, and replacing Council Framework Decision 2001/220/JHA*, <https://ec.europa.eu/transparency/regdoc/rep/1/2020/EN/COM-2020-188-F1-EN-MAIN-PART-1.PDF>

⁵ European Commission (2020) *Report from the Commission to the European Parliament and the Council on the implementation of Directive 2012/29/EU of the European Parliament and of the Council of 25 October 2012 establishing minimum standards on the rights, support and protection of victims of crime, and replacing Council Framework Decision 2001/220/JHA*, <https://ec.europa.eu/transparency/regdoc/rep/1/2020/EN/COM-2020-188-F1-EN-MAIN-PART-1.PDF>

prevention of re-traumatisation (also referred to as secondary victimisation),⁶ in terms of minimising medical examinations and victim interviews. In a number of Member States, individual assessment of specific needs is deemed to be lacking, or the relevant provisions have been transposed only in part.⁷

Based on those long-standing deficiencies found in the transposition and implementation of the 2012 Victims' Rights Directive, it could be concluded that Member States still need to make a number of amendments in their legislations as well as practical adjustments in their procedures, in order to adequately satisfy the needs of victims, maintain their integrity and avoid their re-traumatisation. To achieve those aims fully, Member States should avoid a piecemeal approach and should deal with the protection and support of victims in a holistic manner, as recommended by a number of EU and international standards. Such an effort may take a longer time and require a greater capacity, but would guarantee a much more wholesome response to the various needs of victims. A holistic reform of legislation and practice should start with a **plan that identifies the main legislative and practical areas where changes should be made, the actual changes to be undertaken as well as the indicators by which Member States should measure their success**. Changes should cover both actual criminal procedural norms and areas outside the criminal procedure, but related to it, in order to achieve overall consistency in the strategy for reform. The following is a framework model of how Member States should approach the reform of their laws and procedures in order to support and protect victims from further harm within the criminal process.

Regulating the victims' situation on a conceptual level

Firstly, to preserve the physical and psychological integrity of victims, and avoid their re-traumatisation, Member States should regulate the situation of victims on a **principle, conceptual level**. As one element, they should look at their **anti-discrimination provisions** to make sure the prohibition of discrimination covers all current forms and protected characteristics under international law, including article 21 of the EU Charter of Fundamental Rights. Failure to include such characteristics as sexual orientation and gender identity, or residence status, constitutes 'an open door' to all types of discriminatory acts, acts of violence to which criminal law would not be sufficiently and immediately sensitive, and to re-traumatisation on the part of institutions when working with victims within the criminal procedure. Perpetrators and institutions alike would not

⁶ A distinction has been made in the literature between "primary victims" (the direct victims of an offence) and "secondary victims" (those who are traumatized for example as a result of being a witness to a crime, or because someone close to them was the primary victim of a crime). The terms "primary victimisation" and "secondary victimisation" have been derived accordingly.

However, in victimology, the term "secondary victimisation" is widely used to refer to situations in which the victim is subjected to further harm, for example as a result of insensitive treatment by the police, prosecutors or judicial officials. The term is used in this way for example in the European Commission 2020 report on the implementation of the Victims' Rights Directive.

In order to avoid confusion, in the present Action plan the term "re-traumatisation" is used to refer to the latter situation, in which the victim is subjected to further harm as a result of "victim-blaming" and insensitive behaviours for example by criminal justice authorities and/or social service providers.

⁷ European Commission (2020), Report from the Commission to the European Parliament and the Council on the implementation of Directive 2012/29/EU of the European Parliament and of the Council of 25 October 2012 establishing minimum standards on the rights, support and protection of victims of crime, and replacing Council Framework Decision 2001/220/JHA, Brussels, 11.5.2020 COM(2020) 188 final.

perceive adequately the dimensions of discriminatory acts they (inadvertently) commit, and control and sanction mechanisms would not be able to respond in a timely manner. Support should also be given to the capacity of equality bodies, and cooperation should be established with human rights NGOs to make sure all types of discriminatory attitudes are properly identified and addressed by preventive activities as well as by criminal and administrative sanctions.

More generally, special attention should be given to strengthening the fundamental rights of victims also in connection with their interaction with the criminal justice system. They should be given all safeguards and remedies to protect their rights, including through complaints to human rights mechanisms (such as the Committee on the Elimination of Discrimination against Women, and the European Court of Human Rights), as well as sympathetic treatment by authorities, safeguarding their dignity. The system of judicial review of acts within the criminal procedure should be re-visited to allow for maximum access of citizens to court without at the same time overburdening the judicial system.

The importance of **safeguarding the dignity of victims** in their treatment should be clearly stated among the principles of work of the procedural authorities, both in the legislation on criminal procedure and in the basic legislation on the work of these authorities. Apart from being stipulated as a principle, it should also be expressly reflected during all steps of the criminal procedure and in all actions of the authorities, as it is sometimes difficult for professionals to gauge what the safeguarding of the dignity of victims would mean within the context of, for example, each investigative step. It should by no means be stipulated only in the code of ethics of the different professions, since the binding nature of such codes within the criminal proceedings can be questionable.

Another principle to be reaffirmed on a general as well as on a specific level, is the importance of taking the **gender perspective** into account **in all aspects of criminal procedure**, as well as in other supporting administrative and civil proceedings. This should stem from gender equality legislation, and should also be firmly rooted among the main principles of the criminal process. Express guidance to authorities, in legislation and in non-legislative manuals, is again recommended. Taking into account the gender perspective is related to, but still distinctly different from, safeguarding the dignity of victims. To cite the most common example, women and girls are over-represented among victims of gender-based violence and human trafficking.⁸ As such, they are also in extreme danger of re-traumatisation on the part of institutions.

Other principles regarding the situation of victims on a conceptual level have to do with the **holistic policies** and **coordination between criminal justice and support systems**. Victims should be given procedural safeguards for strengthening the protection of their rights and interests throughout the investigation and trial proceedings. The testimony of the victim is often the sole way in which the criminal liability of the alleged perpetrator is established. The harm suffered by victims often cannot be remedied solely by compensation by the state and indemnification by the perpetrator. Strengthening guarantees within criminal proceedings would ensure the equality of victims and suspects/accused before the law. Victims should also have an express right to be protected against contact with perpetrators while at the police station or in the court building. This right should be reflected in statutory acts concerning law enforcement, prosecution and the

⁸ See findings by, among others, UNODC, for example, UNODC (2020) Global Report on Trafficking in Persons 2020, https://www.unodc.org/documents/data-and-analysis/tip/2021/GLOTiP_2020_15jan_web.pdf

judiciary, since budgetary financial constraints often leave the victims sharing rooms and corridors with the perpetrators when they are waiting for their cases to be heard.⁹

Regulation related to the participation of victims in criminal proceedings

Secondly, on a more specific level, Member States should adopt an **overall regulation on the participation of victims in criminal proceedings and on their support**. A codification approach is recommended – one distinct document should be (further) developed to regulate both areas, or the provisions in question should at least be a separate, specific and extensive section of the criminal procedure law in order to ensure compliance by law enforcement personnel, prosecutors and the judiciary. To preserve the physical and mental integrity of victims, it is extremely important to regulate the two areas together, because according to leading EU and international standards (such as the 2012 Victims' Rights Directive, and the 1985 United Nations Basic Principles of Justice for Victims of Crime and Abuse of Power), high quality victim support is vital for the full participation by victims in the proceedings, and any (artificial) division would lead to a fragmented approach in contrast with what the standards stipulate. Victims are often the only 'gatekeepers' to a successful criminal process and criminal justice should function in a way that is inherently linked with the support infrastructure in the Member State in question.

Such a codification may also include provisions on State compensation to victims. However, financial and budget considerations have generally lead Member States, for example, to limit the number and types of crimes for which victims are to be compensated, and these limitations are often at odds with their other obligations towards victims. In any case, a common codified document should reaffirm the right to (advance) financial compensation from the state, covering also urgent expenses incurred by victims as part of their rehabilitation process.

On the question of whether **regulation** should cover **all victims** or **specific groups** (such as the victims of gender-based violence, human trafficking, terrorism, hate crimes), the general community of victimised persons should be given a wide circle of rights, but the codification should also include rights that stem from the regulation of specific groups, such as rights that take into account the gender dimension (as in the case of victims of gender-based violence) and reflection periods (as in the case of trafficking victims). Only technical, procedural and infrastructure specifics of caring for distinct groups of victims, such as the specifics of shelters, gender-specific support and family-oriented support, should be regulated in separate acts.

In particular, the codification of the regulation on victims should set the main framework of the obligations of different authorities towards them, the right to referral to appropriate services, a coordination mechanism, and the basis of the work of the central and local support and protection authorities. The specifics of those, however, can be regulated in separate acts.

⁹ See, for example, FRA (2019) Proceedings that do justice for victims of violent crime, Part II, https://fra.europa.eu/sites/default/files/fra_uploads/fra-2019-justice-for-victims-of-violent-crime-part-2-proceedings_en.pdf

Provisions on specific issues concerning victims

Thirdly, Member States should enact specialised provisions on the specific issues of preserving the integrity of victims. A codified act on the general procedural rights of victims cannot fully regulate these issues. Legislation on emergency medical help and healthcare as a whole, social support and social services, pre-school and school education, etc., should be enacted to **regulate the obligations of the respective authorities** to identify victims, make an initial needs and risk assessment and refer victims of criminal acts to the appropriate authorities and services. The regulation of the obligations of those stakeholders who are outside the criminal justice system, is of key importance, since their link to the situation of victims is not always clear or deemed binding by their representatives. Consequently, delays and mistakes on their part could fatally slow down or hinder identification of victims and criminal proceedings against perpetrators, and lead to irreparable material and non-material harm for victims. The relationship between professional secrecy and the options for institutions to report on crime should also be regulated in an appropriate manner.

The **referral and the mechanism regulating referral** among institutions and organisations should also be subject to specific regulations. Such norms should take into account the great variety of modes of referral both geographically (national and transnational) and in terms of persons and services. By way of example, referral can take place both from criminal justice authorities to service providers, and vice versa, if providers have first done informal identification and need to refer victims to the appropriate authorities in order to launch criminal proceedings. Based on the experience with the well-known referral mechanisms for trafficking victims,¹⁰ such general mechanisms should contain detailed standard operative procedures in the health, social and educational area, and for modes of urgent, crisis or more long-term support. Identification, crisis intervention, treatment and reintegration of victims should be covered as the main stages.

Finally, the **institutional infrastructure for supporting and protecting victims** should be subject to specific regulations. It is recommended that this be concentrated in a specific authority – a service for victims, such as exists in, for example, Sweden and some other Member States. Its strategic management should be entrusted with an inter-institutional mechanism that coordinates with all interested parties working with victims in the criminal justice system or the provision of services, such as law enforcement, prosecutorial and judicial authorities, and health and social welfare authorities. On an operative level, a victim service should have its own management and administration, besides possibly seconded experts from other administrations, as well as local units in all major administrative centres. Further, more complex structure may be needed in states with a federal structure (such as in Germany). Central and local units should coordinate the activities and financing of victim support on the part of service providers, as well as coordinate the most complex individual criminal cases involving victims and requiring the highest level of cooperation among institutions concerned.

Last but not least, detailed primary and secondary legislation should be enacted on **initial and continuing training for all professionals concerned, on the rights of and support to victims** – law enforcement, prosecutorial and judicial authorities, and medical, social and educational professionals. It not only raises the awareness of the actors concerned, but also contributes to

¹⁰ See, for example, OSCE/ODIHR (2004), *National Referral Mechanisms, Joining Efforts to Protect the Rights of Trafficked Persons A Practical Handbook*, https://ec.europa.eu/anti-trafficking/sites/antitrafficking/files/joining_efforts_to_protect_the_rights_1.pdf

changing their views and attitude towards victims, minimises re-traumatisation and significantly improves the quality of the support they provide. The training should include the specifics of multidisciplinary and multi-institutional cooperation, a trauma-informed approach towards victims, as well as working in a multicultural environment. Training should be provided both through specialised courses and modules, and as part of more general programmes on protection against discrimination and human rights protection (see Chapter 6 of this Action plan for a model training curriculum as an example of training). Training on the rights of victims should be equal in volume and detail to that of training on the rights of accused persons and suspects, since the impact of criminal proceedings on the personal sphere of both groups is significant.

Detailed regulation should also be given on the **collection of statistics on victimisation in accordance with unified criteria among various authorities** – for example, types of crime in accordance with the Criminal Code, gender, age and vulnerabilities of the victim, and relationship to the alleged offender. A separate set of indicators should also be developed on the quality of services and legal aid provided. These indicators about victims should be part of the more general information systems on criminal justice and countering crime, in order to facilitate the development of improved policies on prevention and the response to crime.

Conclusions

Key legislative reforms to be undertaken to ensure human rights centred and trauma-informed approaches towards victims are described in the table below.

<i>What?</i>	<i>Where?</i>	<i>How?</i>
<i>Regulating the situation of victims on the conceptual level</i>	Anti-discrimination legislation, regulation of equality bodies	Provide a comprehensive list of discrimination grounds to ensure sufficient attention by equality bodies and the criminal justice system
	Constitutions / Fundamental laws, criminal procedural legislation	Strengthen fundamental rights for all participants in criminal procedure, e.g., defendants and victims, alike
	Criminal procedural legislation	Ensure treatment of victims, safeguarding their dignity at all procedural stages and steps
	Legislation on gender equality, criminal procedural legislation	Take into account the gender aspect of treating victims at all procedural stages and steps
	Criminal procedural legislation, statutory acts concerning victim support bodies	Holistic policies, coordination between criminal justice and support systems
<i>Overall regulation of the participation of</i>	Criminal procedural legislation or a separate act	Comprehensive codified regulation on the participation of victims in criminal proceedings and their

victims in criminal proceedings		support, possibly also including their right to compensation
	Criminal procedural legislation	Comprehensive set of rights for all victims of crime, including rights typical of specific groups (reflection period, gender aspects)
Regulation of specific issues concerning the situation of victims	Statutory regulation of medical help, social work, education, etc.	Specific obligations of various authorities towards victims
	Specific act/regulation	Referral and referral mechanisms for victims
	Specific act/regulation	Institutional infrastructure for victim support, at both national and local level
	Statutory acts on the police, the prosecutorial service, the judiciary, medical and social workers, etc.	Initial and continuing education and training on the rights of victims
	Statutory acts of on the police, the prosecutorial service, the judiciary, other authorities, statistical institutes, criminal procedural legislation	Collection of statistics in accordance with unified criteria

2. Multidisciplinary cooperation and referrals

Support services for victims of crime are essential to preserve the rights of victims, especially the right of access to the justice system, as established in the Victims' Rights Directive (2012/29/EU), which obliges EU Member States to ensure that "victims, in accordance with their needs, have access to confidential victim support services, free of charge, acting in the interests of the victims before, during and for an appropriate time after criminal proceedings" (art. 8).

Victims support services may be provided by public or private agents, but they should be part of an integrated and general structure so that a clear and defined referral system is established. This referral system requires the cooperation and coordination of a broad spectrum of stakeholders: on the one hand, the law enforcement agencies, prosecutors, lawyers, court clerks and judges, and on the other, service providers ranging from health (including emotional and psychological support), legal aid, accommodation centres, and shelters, to socio-economic support.

The existing comprehensive structure is primarily intended for victims of human trafficking or gender-based violence, resulting in national referral protocols available in a high number of Member States. However, certain groups of victims have been left very much unprotected and thus have serious difficulties in accessing not only support services but the entire justice system. This fact is highlighted in the EU Strategy on Victims' Rights (2020-2025)¹¹ which specifically mentions the case of irregular migrants (they usually do not report the crime to the police, as they fear being deported to their home country) and victims of crime committed in detention, as groups of victims which are in a situation of particular vulnerability. Therefore, an appropriate referral mechanism should allow for an inclusive strategy that responds to all victims, regardless of their circumstances or background. In this context the Strategy proposes:

"A targeted and integrated support to the most vulnerable victims that takes a holistic, multi-agency approach requires close cooperation of authorities with the relevant organisations and ethnic, religious and other minority communities. Under this strategy, the Commission will pay great attention to the promotion of such synergies. The main responsibility lies however with the Member States, who should set up the relevant structures and facilitate the necessary synergies between the authorities and the civil society. Other actors are also invited to strengthen their activities to support and protect the most vulnerable victims". (page 14)

The European Union Agency for Fundamental Rights (FRA) published in 2015 a research report on the support services for victims of crime across the European Union (EU),¹² highlighting some interesting findings regarding cooperation and referral mechanisms:

¹¹ The European Commission adopted on 24 June 2020 its first-ever [EU strategy on victims' rights \(2020-2025\)](#).

¹² [Victims of crime in the EU: the extent and nature of support for victims](#). FRA

https://fra.europa.eu/sites/default/files/fra-2015-victims-crime-eu-support_en_0.pdf

Country studies (2016) are available at: <https://fra.europa.eu/en/country-data/2016/country-studies-project-victim-support-services-eu-overview-and-assessment-victims>

“EU Member States must ensure that individual assessments are carried out by the victim’s first point of contact, typically the police or a victim support organisation. Victims should be referred in a timely fashion to specialised victim support services that are able to offer them the help and support they need” (page 15)

It is important to stress the need for expertise and specialisation in the support services when victims access the justice system. This would allow an optimal and individual evaluation from the very beginning which will minimise trauma and give coherence to the entire assistance process.

“Victim support should be organized in a manner that allows victims, as much as possible, to benefit from a relation of trust. The support system should avoid handing the victim over from one support provider to another, where unnecessary. In this respect it is important that victims can be accompanied to court proceedings by the same person who supports them before and after the trial phase, as required by Article 20 (c) of the Victims’ Directive”. (page 14)

It is highly recommended that support services for victims are coordinated in a way that public and private service providers contribute to establishing the better individual itinerary through aid resources for each victim. This continued supervision approach can only work with an adequate financing strategy that is monitored by the governmental instances.

“FRA stresses the responsibility of EU Member States to develop a comprehensive network of victim support services and to monitor support services’ performance, ensuring that they conform to designated standards while also respecting the independence of civil society. Such standards could form a basis on which to explore additional criteria that could be developed at national, regional and EU levels, as appropriate. Inspiration for a system of quality control for victim support services could also be drawn from the peer-review system used globally by National Human Rights Institutions (a self-accreditation system under the so-called Paris Principles). To this end, and taking these examples into account, Member States could consider establishing an accreditation system for victim support services.” (page 16)

The importance of obtaining relevant information from all the agencies and organisations participating in the assistance system, in order to monitor its effectiveness and the impact on the experience of victims, needs to be emphasised. Active listening and correction of harmful deviations should be part of the quality control of the assistance services provided to victims.

Key issues in a referral mechanism

a) Information about rights and the availability of support services

The first action needed for victims receiving legal aid and other types of support services during the early phases of the criminal procedure is to provide victims with sufficient and quality information about available services (see Chapter 3). The provision of information will ensure that victims are offered equal access to support services as soon as possible following the crime. This information should be provided by the first institution or person contacting the victim, usually a police officer. However, in most cases, the information provided during this mandatory step is not

sufficiently useful: the language used may be too technical; information about available support services may not be well organised, updated and described; and there may not be enough resources for the victim's personal assistance and guidance. For more information on trauma-informed communication channels, see Chapter 3.

b) Assessment of the needs of the victim

The second step is a **tailored needs assessment** that allows an understanding of the victim's profile and the services required as part of the referral system. In this context, it will be important to have baseline information for example on the following:

- The nature, causes and extent of the crime and violence suffered by the victim;
- The personal characteristics of the victim: gender, age, social, economic and cultural conditions, ethnicity, potential relationship between victim and the offender, etc.;
- The role, capacity and track record of the police, the prosecutorial service and the courts in responding to victims of crime; and
- The actual availability of supporting services (shelters, legal aid, health, psychosocial counselling, etc.) and the coordination between these services.

Once the needs assessment is performed, it is necessary to agree with the victim on his/her referral to the most appropriate services. It should be noted that there will be victims who need only some concrete services such as legal aid, while others will need more extensive emotional and practical support.

By discussing the victim's preferences and the professionals' recommendations with him or her, the victim will be guided in the process of understanding the assistance mechanisms available for his/her particular circumstances.

Having an **informed consent** form signed is a good practice, as it contributes to ensuring the victim's participation in his/her own process. This procedure helps victims to receive a full understanding of available resources, and a feasible itinerary can be developed as part of a more victim-centred system.

As the delivery model for victim support services moves forward, data management appears as a critical aspect to take into consideration in order to protect the privacy, health and security of victims of crime. This is especially the case with victims of gender-based violence and hate crimes, as well as with other victims who need to ensure that their names and addresses remain inaccessible to the offenders.

A secure data protection scheme is vital to ensure that contact details, the description of the crime and the victim's personal information are not shared with unauthorised people, especially within a referral system where one or more service providers can be involved.

c) Coordination between the service providers

Fostering the overall communication between law enforcement agents and other service providers is vital for the victims, since usually the police officers are the victim's first point of contact with the justice system.

Very often, crime victims are assisted by both public and private service providers whose staff does not always have the required expertise. In the same way, a single organisation cannot meet all the

different needs and expectations of victims. Therefore, **coordination and partnerships between the victim support services** is more likely to cover the entire base of victim-centred support.

Creating a referral mechanism that outlines the roles and responsibilities of the various service providers is critical in order to streamline the process of ensuring that a victim does not fall through the gaps as a result of lack of coordination among victim service providers. Moreover, a formal protocol and/or some kind of coordination mechanism will allow the professionals of different services to discuss openly the best referral options for different types of victims.

Mapping different actors as well as identifying potential partners and services to participate in the referral system, is therefore crucial in order to offer good itineraries for the victims. Public services (national, regional or local) and the services of appropriate NGOs should be included in such a referral mechanism, but it is important to highlight the need to assess their quality and level of competency, and to consider whether alliances/networks need to be built in order to extend the range of support available for victims, depending on the type of crimes suffered.

d) Follow-up on the victim

The referral system should clearly define the roles, responsibilities, and guidance / code of conduct on confidentiality and dignity to be followed by all the agents participating in the support services.

This process needs to be piloted with the support services on the ground and monitored on a daily basis, and re-evaluated and re-designed, if necessary, depending on the evolution of the legal procedures.

Most victims are alone in facing a complex itinerary among different service providers and legal practitioners (lawyers, prosecutors, investigating judges, psychologists, social workers, shelter staff, judicial agents) with long periods between stages, leaving them feeling confused and powerless. This results in a high dropout rate of the supporting services and consequently the loss of the capacity of victims to exercise their rights.

Therefore, a good follow-up on, and accessible assistance to, victims together with quality controls and qualitative surveys that glean the perceptions of victims and service providers are vital for the continued effectiveness of the referral system and services provided.

A model for a step-by-step referral mechanism

The following is a model for a step-by-step **referral strategy**, from the point when the victim accesses the justice system, to the enforcement of the sentence. See also the pictogram in page 17.

1. ACCESS TO THE JUSTICE SYSTEM AND THE PRE-TRIAL STAGE

At this stage, the police forces usually provide initial assistance, in which the victim's statement of the facts is the main element. The police bodies should coordinate with a **Coordination and Assistance Centre** as the first step in the assistance process to the person.

The centre, available every day of the year and 24/7 is a necessary point of reference from which to organise the network of available resources, avoiding the common “travel” of victims through the potential support services.

- It will include professionals from the public sector and independent professionals
- It will have a periodically updated catalogue of resources
- It will establish the necessary protocol for counselling on a case-by-case basis, using the network of specialised resources according to the characteristics of the victim.

Among the competences of the Coordination Centre is the coordination of the different support services, facilitating the arrangement of meeting spaces for the multidisciplinary study of cases.

The action of the Centre should be addressed to design an **action plan** for victims in order to get a well informed and personal itinerary for each person.

2. REFERRAL MECHANISM AND SUPPORT DURING THE COURT PROCEDURE

This stage includes assistance during the trial and the pronouncement of the judgment.

Support services focus on **psychological support** for the victim, who is coping with reliving traumatic events and with being in the proximity of the perpetrator.

- The victim can use the right to be accompanied during the proceedings by a person he/she trusts.

- Victims, together with the legal counsellor, review the next steps in the process and the expected outcome. It is important that psychological support services manage these expectations in order to avoid the final outcome being experienced as a total personal failure.

- Support services need to be available to the victim in order to mitigate the frustration caused by the long waiting periods during procedures, so that he or she does not consider dropping out of the process.

- Support services should ensure that all **mechanisms and guarantees are put in place in court to preserve the safety and integrity of victims**, not forgetting the importance of a victim-friendly court environment.

3. REFERRAL MECHANISM AND SUPPORT AFTER THE TRIAL

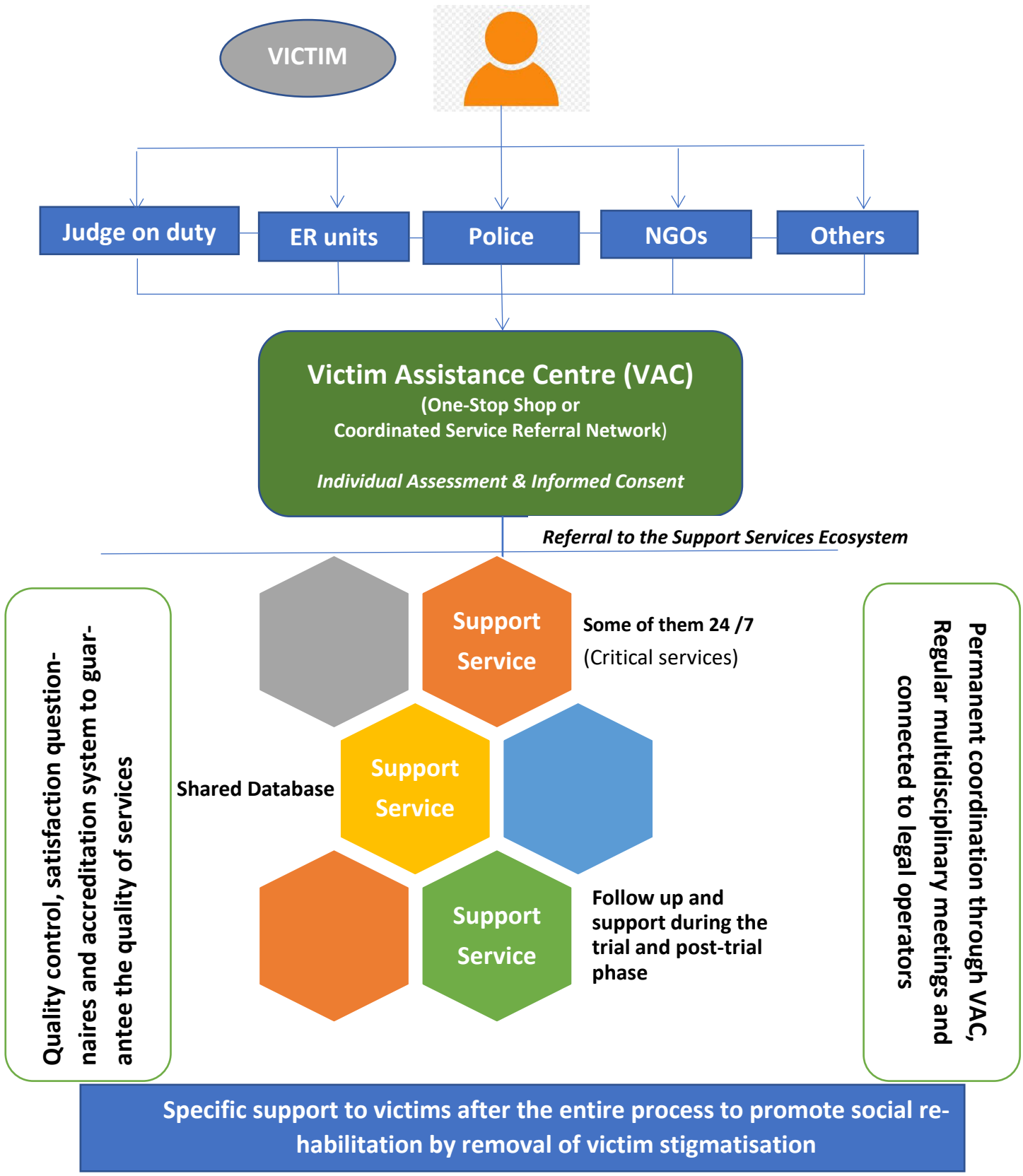
This stage includes the coordination of assistance regarding the follow-up to the victims' experience once the court's judgment is reached, in order to facilitate the understanding by the victim of the implications of the judgment.

- A **suitable communication system** between the support services (Coordination Centre) and the victim is vital. Knowing the causes of an unfavourable judgment, if any, and digesting it, is part of the strategy to overcome the trauma. Otherwise, the victim could face re-traumatisation.

- **Specific services** available to assist the victim in providing her/him with the relevant information about the offender, regarding for example the potential release of the offender from prison on furlough or parole, and other legal issues concerning the offender's prison regime.

- **Continuous legal support** to monitor the enforcement of the judgment in respect of the financial compensation and other remedial measures. It is highly recommended to put in place a mechanism for automatic and expedited compensation payment to the victims instead of having to initiate separate procedures for it.

Given that very often perpetrators have very limited means, urgent steps should be taken to set up a suitable protocol of precautionary measures from the beginning. This could alleviate the unresolved issue of delayed and low amounts of compensation that only contribute to further re-traumatisation.



Transnational referral mechanisms across the European Union

The mobility of persons between the different Member States is a fact that, although currently limited by the situation of the pandemic, is becoming increasingly important. This mobility also applies to crime victims, who need to be protected and who need to access the different support services, regardless of the EU Member State in which they are located.

In May 2020, a multi-country referral mechanism for victim support was launched by Victim Support Europe (VSE) to assist cross-border victims. The mechanism is a web-based platform that allows civil society organisations across the world to safely refer victims to a victim support service in another country in cross-border cases.¹³

Several transnational referral mechanisms focusing on victims of trafficking in persons have been established, due to the high mobility and transfer of this type of victims between EU Member States, for example from Romania to Spain and vice versa. Different specialised platforms and NGOs have multiplied their efforts to improve information and support one another in providing assistance to these victims. One of the main problems is the return of the victims to their countries of origin, and how to prevent them from falling back into the networks of traffickers. In this context, coordination among legal operators and support services is essential.

Although it is true that such transnational referral mechanisms have been developed in the field of trafficking in persons, other categories of victims remain somewhat unprotected without proper referral mechanisms. Examples are victims of gender-based violence, irregular migrants, and victims of hate crimes. In particular, foreign unaccompanied minors crossing Europe for example from Spain to Germany or Sweden remain completely unprotected until they reach their final destination. Support services are barely able to track their migration paths, the attention that they receive, the trauma they incur, and which of their rights have been violated.

A transnational referral mechanism should be based on a guideline, including all relevant tools and technical checklists necessary for the establishment and management of a comprehensive referral mechanism to support victims of crime, especially women, girl and boy survivors of gender-based violence, foreign unaccompanied minors, victims of hate crimes, etc. Further, it is extremely urgent that the right of these victims to international protection be recognised, regardless of the Member State in which they are found. This transnational referral mechanism should be regulated by the EU and implemented by the Member States.

¹³ <https://victimsupport.eu/news/victim-support-europe-launches-a-cross-national-referral-system-to-harmonise-responses-to-cross-border-victimization/>

Conclusions

Some of the suggested tools might be available in some Member States at the present time, while they are missing in others. Public authorities and responsible operators of the justice system should ensure the availability of the following:

1. A Victim Assistance Centre (VAC) as a central referral point used by police officers, prosecutors, public defenders, judges on duty, emergency units and other first contact points for victims, to coordinate all kinds of victim support services (public and private) and to refer victims. This referral point will ensure that victims have different options in accessing justice systems, helping to build trust and minimising the reluctance of victims to go to the police. The VAC will provide the police with a first and comprehensive referral point for victims. It will also make sure that the individual assessment of the victim is done at the first point of contact, either by the police or by the VAC.

2. A shared database, with the consent and participation of victims, confidential and connected with other official databases, helping professionals from support services to share information and coordinate with one another, ensuring victims can rely on a personal profile in which the itinerary is set up, avoiding the potential loss of the victim's case information when shifting from one stage to the next.

3. An accreditation system for support services, with criteria defined by public authorities and participation by victim support organisations (private/public resources and victims) in order to ensure the quality of victim services.

4. A quality system to regularly monitor the performance and fitness of the victim support services, ensuring victims can evaluate their own experience and check periodically that support services work according to the defined standards and criteria.

5. Specific support services for victims available 24/7. This will prevent a gap of critical hours for the victim, between contacting the police about a crime and receiving assistance from specialised support services.

6. Protocols to ensure victims are accompanied to court proceedings by the same person who supports them before and after the trial phase, as required by article 20(c) of the Victims' Rights Directive.

7. Follow-up and continuous support before the trial phase, to minimise the risk of dropping out of the procedure and therefore out of the support services.

8. Specific legal and psychological support post-trial to help fully understand the court judgment outcome.

9. Specific psychological support upon the release of the offender, and coordination of the support services with probation services.

10. Specific support to victims after the entire process, to help social rehabilitation by removal of victim stigmatisation.

3. Ensuring access to information for victims of crime

The right to access to justice can only be claimed if victims are aware of their rights and support and assistance can be provided. Chapter 2, Article 3, of the Victims' Rights Directive provides that Member States shall take measures to provide information and support to crime victims. However, provision of information alone is not sufficient. Victims of crime have the **right to understand and to be understood**. The information should be transmitted to the victims in an appropriate manner. In order to be able to reach all types of crime victims, factors such as disabilities and languages should be taken into account.

Disabilities, language barriers or other personal characteristics can affect the ability to **understand** the information which is given out. Language skills, age, maturity, intellectual and emotional abilities, literacy and possible mental or physical impairments should also be taken into account, especially if disabilities are reasons for difficulties in understanding and communication (Recital no. 21 et seq. of the Victims' Rights Directive). For this reason, Member States should develop and make available effective methods of communication and information provision. The information may be adapted according to the specific needs and personal circumstances of the victim and the nature of the crime. The information should be provided with the help of various media. Similarly, attention should be paid to good **understanding**. For this purpose, it is helpful to use simple language.

Examples of communication channels

As mentioned above, the EU Victims' Rights Directive stipulates that different methods and media should be used to provide information so that a broad mass of crime victims can be reached. There are several information channels available, which can broadly be divided into **oral, written and audiovisual information**.

Increasingly, digital methods are being used to provide access to information and services. Directive (EU) 2016/2102 of the European Parliament and of the Council of 26 October 2016 on the accessibility of the websites and mobile applications of public sector bodies addresses accessible access to these digital resources. Websites and mobile applications should be designed in such a way that people with disabilities in particular can use them without barriers. Overall, the aim is to create wider access to services. This is intended to support citizens in realising their rights. Digital accessibility comprises four principles: access should be perceptible, operable, understandable, and robust (EU Directive 2016/2102, recital 11; 37).

Since the implementation of the EU Victims' Rights Directive, various transnational projects have been carried out by different Member States working on the implementation of appropriate information resources for victims. In the following, national and transnational information projects are presented, which could be easily implemented by judicial authorities in every Member State to inform victims and facilitate access to their rights.

Oral communication channels

Legal counselling / Legal assistance

A long-term stable trust-based relationship between professionals and victims is important to give victims an overview and understanding of all their rights and obligations and enable them to safely navigate through the legal system. It is important that rights and responsibilities are understood and legal counselling is arranged if needed. Similarly, roles should be explained and whether the counselling centre is a governmental or non-governmental organisation. Making their own decisions could support the autonomy of victims and counteract feelings of powerlessness (Witkind & Robjant 2018: 3; 10-11). Throughout the legal counselling, referrals should also be made to other support services. (see Chapter 2)

A good example of consulting is “*The Municipal Victim Assistance Service (S.A.V.)*” of the Fuenlabrada local police service in the Region of Madrid, Spain. The services of the S.A.V. can be used free of charge by any victim of crime. The professionals of the S.A.V. work closely with the local police and the other local stakeholders. The legal assistance provided covers support during all phases of the criminal process. Thus, the victim is advised and informed in detail about all important issues, such as court proceedings, protective measures, trauma and compensation (Berbec et al. 2020: 20).

Legal counselling should also be provided to crime victims in spheres outside of the traditional criminal justice system.

For example, for female asylum seekers who are victims of gender-based violence, a reception centre is often the first place of contact with the authorities. This would provide the first opportunity to receive information about a crime and follow up on it. Therefore, the response and action of the staff are of great importance. Here, it is just as important to involve other agencies in early counselling, as it is to involve medical professionals in initial health screenings. To be able to help themselves, victims need to be supported and counselled as early as possible. NGOs play a major role in identifying violence and providing immediate and long-term support to female asylum seekers who have been victims of violence. Therefore, there should be sufficient resources for NGOs to provide such specialised services, and it should be ensured that the organisations providing assistance have the right to provide support and assistance to potential victims in camps or reception centres (Lilja et al. 2020; Lilja 2019).

Telephone hotlines

Anonymous support and the provision of information over the telephone should be available in different languages. General victim counselling should be offered 365 days a year, around the clock. Also, relatives and friends of the victim should be able to obtain advice anonymously and free of charge. In Germany, for example, there is a *Hilfetelefon – Gewalt gegen Frauen*¹⁴ a help hotline for female victims of domestic violence that offers continuous telephone counselling and referral, if necessary (Bundesamt für Familie und zivilgesellschaftliche Aufgaben n.d.).

¹⁴ “Telephone hotline – Violence against Women”; <https://hilfetelefon.de/>

Another example is Bulgaria's National Legal Aid Bureau (NLAB), which offers a hotline, the National Primary Legal Aid Telephone Line (NPLATL), for disadvantaged individuals. Via NPLATL, any person can receive free legal advice. Only the cost of the telephone call needs to be paid. Some law firms have also begun to use practices similar to the NPLATL (Berbec et al. 2020: 4).

Interpretation

Fluency in languages is a key skill for victim-centred support. Therefore, language barriers and language issues should be considered. Many foreign victims are unable to speak or understand the local language. Therefore, a qualified and culturally skilled interpreter should be available at all stages. Law enforcement, prosecutors, victim assistance providers, and victim advocates should have a list of trained interpreters and have straightforward access to them on short notice. The necessity of and the resulting legal entitlement to translations are laid down in the EU Directive on the right to interpretation and translation in criminal proceedings (Directive 2010/64/EU).

An interpreter should be consulted, even if the victim is fluent in the official language. The presence of an interpreter can be an extra challenge for the victim, especially when it comes to difficult and sensitive topics (Witkin & Robjant 2018: 11, 12). Here it is important that trained interpreters are used (see Chapter 3).

Written communication channels

Online counselling

Online counselling, for example as offered by the *Stiftung Opferhilfe Niedersachsen*¹⁵ (Foundation for Victim Assistance) in Germany, can be conducted regardless of the time and location. Due to the fact that the victim remains anonymous, topics that are unpleasant for the person can be addressed more easily. There is enough time to formulate questions. Waiting times for a personal appointment can be bypassed. In the best case, the counsellors have additional qualifications for online counselling.

Websites

One website for victims has been developed in connection with the "Infovictims" project, which was co-financed by the European Commission under the Directorate General Justice, and is currently in its third version. The aim of this project is the elaboration and the elaboration and continues up-dating of information for victims of crime. A website¹⁶ has been developed that provides comprehensive and easy-to-understand information on the criminal procedure, as well as helpful contacts, forms and explanations about the participants in the process. A poster which offers a simple and clear way to raise awareness and provide information about rights was also created. The information is tailored to each country and available in the given national language and in English. Information is provided on criminal proceedings, the people involved and the rights of victims, in easy-to-understand language. In addition, there is an introduction to the topic of trauma. Information is also provided on national, free help hotlines. Addresses and contacts of important

¹⁵ <https://www.opferhilfe.niedersachsen.de/nano.cms/online-beratung>

¹⁶ <http://www.infovictims.com/com/>

contact persons are also provided. The website is clearly and simply structured (Victim Support Europe 2020).

On the website of the German victim assistance provider *Weisser Ring* (White Ring),¹⁷ audio files are offered, which explain the counselling work of the telephone helpline for victims.

On the website¹⁸ of the German *Polizeiliche Kriminalprävention der Länder und des Bundes* (Police crime prevention by the federal states and the federation), different options for advice are offered, from references to telephone counselling to explanatory videos about victims' rights (see the section below on videos).

With the use of pictograms (see the section below on materials for illiterate victims), even more people can be reached. The alternative of figurative language is especially helpful for illiterate persons. In addition, alternative ways of communication can also be created if the nationally used script is not understood (for example, Cyrillic, Latin and Arabic script). Videos or a function that reads the content of the pages could also be helpful.

Mobile applications (apps)

People with smartphones can get advice on their rights and opportunities by using mobile applications. One example that can be mentioned is the “domstolsguiden” app (Guide to Courts) that is used in Sweden. This app gives an insight into the courtrooms and the roles of the relevant participants during the process. It also includes videos that show how a court proceeding works. It contains a "court finder" with information on opening hours, directions and contacts (FRA 2014: 2).

Brochures

On the website of the *Bundesministerium der Justiz und Verbraucherschutz (BMJV)* (German Federal Ministry of Justice and Consumer Protection), brochures are offered for free download or order. These brochures are tailored to the needs of different target groups, such as the Guide to Criminal Proceedings for Juvenile Witnesses, or *die Opferfibel* (the Victim Primer)¹⁹ - information on criminal proceedings for those affected by criminal offences (Bundesministerium der Justiz und Verbraucherschutz 2021).

Materials for illiterate crime victims

Criminal justice stakeholders may come across crime victims who are illiterate or barely literate. In such cases, it is important to provide understandable information. In the *Co-creating a counselling method for refugee women GBV victims* (CCM-GBV) project,²⁰ the development of flyers²¹ with pictograms proved helpful in informing GBV victims about their rights (Lilja 2019: 51-

¹⁷ <https://weisser-ring.de/hilfe-fuer-opfer/opfer-telefon>

¹⁸ <https://www.polizei-beratung.de/opferinformationen/>

¹⁹ https://www.bmjb.de/SharedDocs/Publikationen/DE/Opferfibel.pdf?__blob=publicationFile&v=19

²⁰ <https://www.solwodi.de/seite/492994/eu-project-rec-ccm-gbv.html>

²¹ <https://www.solwodi.de/seite/353264/eu-projekt-rec-ccm-gbv.html>

52). This could be adapted as best practice to inform victims about victim rights during the criminal proceedings.

Audio-visual methods

Nowadays, audiovisual tools are among the most used and appealing methods of gathering information, tools that are used especially by young people. New technologies open new possibilities for reaching victims. Therefore, it is important to use these tools for awareness-raising and to enhance the participation of victims (Victim Support Europe 2020).

Videos

The website of *Polizeiliche Kriminalprävention der Länder und des Bundes* offers explanatory videos. These videos explain the possible risks of becoming a victim, the steps involved in filing a complaint and in the criminal proceedings, and provide detailed information about victims' rights (Polizeiliche Kriminalprävention der Länder und des Bundes n.d.).

Information for deaf crime victims

For a first orientation after a crime, the victim support organisation *Weisser Ring* (White Ring) Austria offers an information video²² with the support of pictures and translation into sign language. Additionally, there is information about further support possibilities.

²² <https://www.youtube.com/watch?v=ptrHz7W6tz4>

4. Defining the concept of psychological trauma

This chapter addresses aspects of psychological trauma and is designed to help professionals in the criminal justice system understand how a person's normal functioning may be affected by exposure to a traumatic event. This chapter does not address psychological trauma in an exhaustive way, but rather focuses on the main elements that may be relevant in the context of this publication.

The concept of psychological trauma

The concept of psychological trauma is quite complex and there is no standard definition that can cover the full meaning of this phenomenon. Most often, trauma is referred to as the unique individual experience of an event or enduring conditions that are deeply distressing, that overwhelm the individual's ability to cope, and that sometimes takes the form of loss of control over parts of one's mind. The circumstances of the event(s) commonly include abuse of power, helplessness, betrayal of trust, confusion, entrapment, pain, and/or loss of something or someone very important in one's life.

The German psychologists Fischer and Riedesser (1999) describe psychological trauma as “a vital experience of discrepancy between threatening situation factors and individual coping possibilities, which is accompanied by feelings of helplessness and defenceless abandonment and thus causes an ongoing disruption of one's understanding of the self and the world”.

Psychological trauma can occur after exposure to a one-time, multiple, or long-lasting repetitive event. The likely impact of a traumatic event is often determined by a variety of factors, including individual, relational, social and contextual variables, all of which contribute to the development of trauma. Some individuals have significant protective factors that promote resilience in the face of exposure to trauma and will display a recovery trajectory and return to their usual level of functioning in a few months without the need for formal mental health interventions. Others, in turn, experience significant distress and difficulty recovering that leads to the development of chronic mental health problems. That means that two different individuals can experience the same stress factor or situation which is mostly related as trauma, and one can be intensively traumatised while the other remains unscathed.

According to the *Diagnostic and Statistical Manual of Mental Disorders (DSM 5)*,²³ the risk factors for the development of chronic mental health disorders include pre-existing mental health problems, severity of trauma exposure, childhood adversity, genetic and physiological factors, lack of social support and life stressors.

²³ The *Diagnostic and Statistical Manual of Mental Disorders, 5th edition (DSM 5)* is the standard handbook used by clinicians and psychiatrists to diagnose psychiatric illnesses. Published by the American Psychiatric Association (APA), the DSM 5 covers all categories of mental health disorders for both adults and children.

Traumatic events and situations

A traumatic event is defined as an event that lies outside of the realm of regular expectations and poses a threat of serious injury or death to oneself or others, and elicits intense stress.

Traumatic events may share certain characteristics, but their emotional impact on a person can differ and a thorough understanding of the specific characteristics of the event and the nature of the person's exposure to that event is essential. Fischer and Riedesser (1999) state that "in a dialectical view of the concept of situation, situational factors are always connected with the subject who lives and acts".

DSM 5 offers some elements to consider an event as traumatic for persons older than six years:

- Exposure to actual or threatened death.
- Serious injury.
- Sexual violence.
- Witnessing, in person, the event(s) as it occurred to others.
- Learning that the traumatic event(s) occurred to a close family member or close friend.

In cases of actual or threatened death of a family member or friend, the event(s) must have been violent or accidental.

- Experiencing repeated or extreme exposure to aversive details of the traumatic event(s) (e.g., first responders collecting human remains; police officers repeatedly exposed to details of child abuse) [APA, 2103].

The impact of trauma

When subjected to a traumatic event, the brain's defence system activates and creates a stress response that causes an alteration in the normal functioning of the mind and body. The immediate reactions of survivors in the aftermath of trauma are quite complicated and are affected by the nature and meaning of the traumatic event, the accessibility of natural supports and healers, previous and current life stress, their coping and life skills and those of immediate family, and the responses of the larger community in which they live. Although reactions range in severity, even the most acute responses are natural responses to manage trauma, and therefore they are not a sign of psychopathology.

The wound produced by the traumatic event is a complex mixture of reactions affecting several domains of the human psyche: physical, emotional, cognitive and behavioural. Most of the reactions are often normal responses to trauma, although they can be distressing to experience. Such responses are not necessary signs of mental illness, nor do they indicate a mental disorder. Traumatic stress-related disorders comprise a specific constellation of symptoms and criteria.

1. The physical level. Common physical symptoms include: hyperarousal (exaggerated and immediate reactions to normal stimuli; sometimes, hyperarousal can produce overreactions to situations perceived as dangerous when, in fact, the circumstances are safe), numbness of general

responsibility (physical or mental), somatic complaints (somatisation occurs when emotional distress is expressed through bodily symptoms or dysfunctions), sleep disturbances, tremors, crying, loss of appetite leading to weight loss, fatigue/exhaustion, neurovegetative manifestations: palpitations, tachycardia, hyperhidrosis, pallor, decreased immune system (hence the increased frequency of various diseases); there may be chaotic and disorganised reactions, catatonia, stupor, motor blockages, loss of sphincter control, etc.

The neurobiology of trauma

Trauma's effect on the brain has become of increasing interest to researchers. With the advances over the last decade in the field of neuroimaging, scientists are better able to document and understand the structural, biochemical, and functional condition of individuals who have experienced trauma. What is currently known is that exposure to trauma leads to a cascade of (neuro)biological changes and stress responses which include: changes in limbic system functioning, hypothalamic–pituitary–adrenal axis activity changes with variable cortisol levels, and neurotransmitter-related dysregulation of arousal and endogenous opioid systems. These changes in brain structure and physiology are thought to affect memory, learning, the ability to regulate affect, social development, and even moral development.

When the individual is experiencing a traumatic event or extreme fear, the amygdala (a structure in the brain responsible for detecting threats) is activated. It responds by sending out an alarm to multiple body systems to prepare for defence. The sympathetic nervous system jumps into action, stimulating the release of adrenaline and noradrenaline and stress hormones that prepare the body for a *fight* (defence) or *flight* (run/escape) response. If these responses are not possible, or only partially possible, other neurochemical processes set in and the body might go into states of *flop* (bodily collapse - loss of consciousness, total disorientation), *fawn* (a befriend/submit attitude) or *freeze* (temporary numbness/immobilisation of the body). At the same time, the functioning of the prefrontal cortex (which is the decision/choice-making part of the brain that is responsible for rational thinking, planning effective responses, remembering important information, etc.), is impaired, and thus the individual's ability to make decisions (such as to ask for help) decreases or stops. [for discussions, see Pole (2007), Metzger, Gilbertson (2005).]

Traumatic events overwhelm the brain's capacity to process information, and therefore *"memories are encoded differently during a traumatic event. The brain does not encode memories in chronological order, there are gaps in memory, and whatever the "fear circuitry" in the brain focused attention on during the assault is more likely to be encoded into memory than peripheral details. For example, a survivor may have a very clear memory of the smell of the perpetrator's cologne, but not have any memory of what the room looked like. Contextual information (e.g. the layout of a room) and time-sequence information (e.g., the order in which sexual acts occurred) are often poorly encoded. Again, this is not a conscious choice a survivor is making about what to focus on or remember during an assault; it is a common impact on the brain when the "fear circuitry" survival response kicks in"* [Jim Hopper, 2015].

2. The emotional level. Trauma is an individual experience, and thus the emotional reactions to trauma can vary greatly and are significantly influenced by the person's characteristics and

history. The reactions tend to evoke two emotional extremes: the individual feels either too much emotion (is overwhelmed) or too little emotion (is numb). Emotional numbness has the function of avoiding an emotional flood that the person could not cope with, in contrast to an “emotional storm” in which the person is overwhelmed by emotions such as fears, horror, various anxieties, phobias, depression, despair, hopelessness, helplessness, melancholy, regret, loneliness, sadness, anger, hatred, guilt, disapproval, failure and existential emptiness; various forms of emotional cleavage, difficulties in regulation, management and emotional control.

3. The cognitive level. Traumatic experiences can affect and alter cognitive networks that process information about perception, meaning and action responses toward executing goals.

The most common effects that occur refer to intrusive thoughts and memories: experiencing, without warning or desire, thoughts and memories associated with the trauma – flashbacks (the reliving of the traumatic event as if it were actually happening at that moment), memories, nightmares (these intrusions have a role in facilitating the integration of trauma in the personality structure), ruminations, blaming, catastrophising thoughts, the tendency to forget, to repress, to deny, to stop feeling pain, depersonalisation, derealisation, splitting, suicidal thoughts. These intrusive thoughts and memories can easily trigger strong emotional and behavioural reactions, as if the trauma was recurring in the present. The intrusive thoughts and memories can come rapidly, referred to as *flooding*, and can be disruptive at the time of their occurrence.

Trauma challenges the fundamental, yet unarticulated, assumptions about the world and oneself (i.e., worldviews) that allow for healthy human functioning. The most important assumptions include beliefs in a just, benevolent, predictable world in which the individual possesses competence and worth. The worldview’s primary function is to provide the individual with meaning, self-esteem, and the illusion of invulnerability.

According to the “shattered assumptions theory” (Janoff-Bulman 1992), when individuals experience an event that damages their worldview, they no longer perceive the world as benevolent and predictable or themselves as competent and invulnerable. The subsequent state of defenceless, terrifying, and confusing awareness of personal vulnerability gives rise to anxiety and physiological reactivity.

Following a trauma, the individual may experience errors of perception regarding what is happening, of one's own responsibility in the traumatic situation (either over-responsibility and self-blame, or the elimination of any responsibility or participation), erroneous attributions of causes and explanations of the traumatic event.

A cognitive distortion relevant in the frame of this publication is “idealisation”, which is based on inaccurate rationalisations, idealisations, or justifications of the perpetrator’s behaviour, particularly if the perpetrator is an emotionally significant person / a caregiver.

4. The behavioural level. People may engage in behaviours to manage the distressing aspects of the traumatic experience, such as avoidance, self-medicating (e.g., alcohol abuse), compulsive (e.g., overeating), high-risk and/or self-injurious behaviours, and/or they may become chaotic, give up some activities or social life. Others may try to gain control over their experiences by being

aggressive or subconsciously re-enacting aspects of the trauma (trauma survivors repetitively relive and recreate a past trauma in their present lives in an attempt to master them and to heal from it).

The phases of trauma responses

Individuals affected by a crisis / traumatic event experience reactions that may change over time. Gerald Caplan (1964) was the first to describe the main stages of a crisis reaction. The contributions of later theorists have been based on Caplan's work and have basically consisted of a restatement of the phases that he identified [for discussions, see Lindemann, 1944, Herman, 1997; Yassen & Harvey, 1998]. According to most researchers, the crisis reactions follow four distinct phases:

Phase 1. The shock. In this phase the individual is confronted by a problem that poses a threat to his/her homeostatic state. Faced with this threat, and feelings of increased tension, the person, in an effort to lower the level of anxiety (fear), will employ various defence mechanisms, such as compensation (using extra effort), rationalisation (reasoning), and denial. Changes are being produced in the perception of time and space, new perceptions appear, such as the tunnelling effect, derealisation and depersonalisation experiences. If the individual's coping mechanisms works, there will be no crisis; if the coping mechanisms do not work (they are ineffective), a crisis will occur.

Phase 2. Escalation. If the problem persists and the usual defensive response fails, anxiety continues to rise to serious levels, causing extreme discomfort. The person becomes disorganised and has difficulty thinking, sleeping, and functioning. Trial-and-error efforts are initiated to solve the problem and restore emotional equilibrium.

Phase 3. The active crisis. In this phase the person's inner resources and supports are inadequate. The person has a short attention span, ruminates ("goes on" about it), and wonders what they did or how they could have avoided the trauma. Their behaviour is impulsive and unproductive. Relationships with others suffer; they view others in terms of how they can help to solve the problem. The person feels like they are losing their mind and that frightens them.

Phase 4. Personality disorganisation. If the problem is not resolved and continues, new coping skills are ineffective, anxiety may overwhelm individuals and lead to be a major breakdown in the individual's mental and social functioning. This could include serious disorganisation, confusion, depression, or violence against themselves, such as suicide.

While other authors have proposed slightly varying stages, there are commonalities in understanding that crises are time-limited, have a beginning, middle and end, and that intervention early in a crisis can produce stabilisation and a return to the pre-crisis state.

Trauma-related psychological disorders

Trauma comprises a range of reactions from normal (as mentioned above) to warranting a diagnosis of a trauma-related mental disorder. Most people who experience trauma have no long-lasting disabling effects, but for some, the symptoms of trauma are more severe and last longer. The most common diagnoses associated with trauma (and the ones which are relevant in this Action plan) are: Acute Stress Disorder (ASD), Posttraumatic Stress Disorder (PTSD), Complex Trauma and Secondary traumatic stress / Vicarious traumatisation (the last two are not officially defined as mental disorders).

Acute Stress Disorder (ASD) is a mental health condition that can occur immediately after a traumatic event, and it represents a normal response to stress. The essential element is the development of characteristic symptoms lasting three days to four weeks, following exposure to the traumatic event, that cause significant levels of distress. Most individuals who have acute stress reactions never develop further impairment or PTSD. There are common symptoms between PTSD and ASD, and untreated ASD is a possible predisposing factor to PTSD. Common symptoms include intrusion, a negative mood, dissociation, avoidance, and arousal [APA, 2013].

Posttraumatic Stress Disorder (PTSD) describes a chronic pathological response to traumatic events, characterised by intrusive memories (nightmares, flashbacks), anxiety, negative cognition and mood, and sometimes dissociation etc., symptoms that can be quite debilitating over time. For a PTSD diagnosis, the duration of the disturbance must last more than one month following the traumatic event, but for some people there can be a delay of months or even years before symptoms appear. Some persons may have minimal symptoms after a trauma but then experience a crisis later in life. Trauma symptoms can appear suddenly, even without conscious memory of the original trauma or without any overt provocation [APA, 2013].

Complex trauma. When individuals experience multiple traumas, prolonged and repeated trauma during childhood, or repetitive trauma in the context of significant interpersonal relationships, their reactions to trauma have unique characteristics (Herman, 1992). This unique constellation of reactions, called complex traumatic stress, is not recognised diagnostically in the DSM-5, but theoretical discussions and research have begun to highlight the similarities and differences in symptoms of posttraumatic stress versus complex traumatic stress.

Vicarious traumatisation (VT) and Secondary Traumatic Stress (STS) are frequently used interchangeably to refer to the indirect trauma that can occur when people are exposed to difficult or disturbing images and stories second-hand. The term Vicarious traumatisation (VT) was coined by Pearlman and Saakvitne (1995) to describe the profound shift in worldview that occurs in helping professionals when they work with individuals who have experienced trauma. The symptoms often mirror those of PTSD. VT/STS can occur in professionals who work in high-stress and trauma-exposed fields (child abuse investigators, prosecutors, judges, therapists, health care professionals, animal shelter workers and many others) but it can also affect civilians who do not work in high-trauma fields but are deeply impacted by stories that they are directly exposed to.

With adequate treatment and support, positive psychological changes after trauma are also possible. People may acknowledge their difficulties and see themselves as survivors rather than

victims of unfortunate experiences. These can include building resilience, the development of effective coping skills, and the development of a sense of self-efficacy. Some people may undergo post-traumatic growth, forging stronger relationships, redefining their relationship with new meaning and/or spiritual purpose, and gaining a deeper appreciation for life.

5. Trauma-sensitive communication

The preceding chapter explained how trauma has an impact on victims of crime. It is therefore decisive that a trauma-informed approach is taken to avoid *re-traumatisation*. Taking a trauma-informed approach means that the prevalence of trauma is realised, it is recognised how trauma affects crime victims, and criminal justice stakeholders know how to engage with traumatised victims. A trauma-informed approach should be followed throughout the entire criminal proceeding, from investigation up to the court ruling (OVC 2020; Haskell & Randall 2019: 25). Stakeholders can realise this approach by implementing trauma-informed communication techniques and by behaving in a trauma-informed manner. In this chapter, we first present interview techniques and give practical examples of how to ask trauma-sensitive questions. This is followed by guidelines on how to behave towards victims of crime in a trauma-sensitive manner.

Trauma-informed interview techniques

Research in the field of psychological trauma and its impact on memory shows that if a victim is interviewed in a stressful way – e.g., the interviewer is not compassionate, the victim's narrative is interrupted by the interviewer, the victim's statements are doubted by the interviewer - victims are often not able to recall important information about the crime that they had experienced. Trauma-informed communication therefore aims at contributing to the victim's immediate and long-term emotional health by laying a solid foundation for a successful interview by acknowledging the victim's trauma. What is decisive in this that the victim can take control of the flow of communication and the narrative of the crime that he or she has experienced (Haskell & Randall 2019: 23; Human Rights Watch 2013: 7).

Victims are interviewed throughout the entire criminal proceeding: during the interrogation by the police and prosecutors, and then in court. In all phases, it is important to remember that interviews are never one-off events, but usually consist of a first interview, further interviews and a final interview. It is advisable to follow the PEACE Model summarising the steps to take in each phase of the interview process – the preparation phase, starting the interview, closing the interview etc. (see Annex 1). There are several issues interviewers should bear in mind in the first, further and final interviews, as mentioned below:

1. **The first interview:** Interviews should take place without unjustified delay. They should be kept to a minimum and professionals who are trained for the purpose (Arts. 20, 23(2) EU Victims' Rights Directive) should carry out the interviewing. Although the exigencies of criminal procedure may force a different approach, a trauma-informed interview process requires that during the **first interview** by, e.g., the police, the police officer should be brief, meaning that only a limited amount of information should be taken during the initial interview. Here it is important to assess, what information is needed immediately and what information can wait. The first interview should focus on any safety or medical concerns, collect just enough information to establish the elements of the crime, identify potential witnesses and suspect(s), identify and secure evidence and identify the next steps. It is very important that the professional introduces him/herself, stating what his/her profession is and what role he/she plays in the given

situation. During the interview, the stakeholders should take appropriate time to explain to the victim the legal procedures, and the role of other key stakeholders and legal professionals with whom the victim will come into contact at different stages of the entire legal process. The better prepared the victim is for each stage of the case, the more comfortable he/she will feel, and the better he/she will be able to present his/her experience.

2. **Further interviews:** A **second interview** should take place at the earliest after two full nights of sleep, which gives the memory enough time to consolidate and transfer the information about the criminal act. In the course of the **further interviewing** of victim-witnesses, criminal justice stakeholders should focus on central details which victims are more often and more easily able to recall.

3. **The final interview:** The **final interview** should be held in a structured and timely manner. In this, it is important to summarise the key points made by the victim witness as a means of checking the evidence he/she has provided, using the words of the victim and enabling the victim to correct any mistakes that might have been made. It is also a proven best practice to allow time during the closure for the victim to ask questions which he/she may have. Victims should also be asked if the interview process was acceptable to them, whether they fully understood it and whether they experienced any problems that they wish to discuss. Try to end the interview in a positive way, for example by acknowledging the victim's strength and courage in talking about those negative experiences and in taking part in the criminal proceedings (Haskell & Randall 2019: 26-29; Berbec et al. 2017: 28-29; IOM 2018: 41; Human Rights Watch 2013: 11).

Having to describe traumatic experiences will almost invariably trigger traumatic symptoms. While there is no easy solution, it is important that professionals follow **trauma-sensitive interview techniques** that seek to ensure that the account provided by the victim is as accurate as possible and not the product of suggestibility.²⁴ Standard interrogation practices, in which victims are asked to repeat their narrative from different points in the narrative (e.g., beginning to report on the crime sequence backwards), asking suggestive questions, testing narratives etc. should be avoided. Should the victim not speak a language that the criminal justice professional can understand very well, it is important to engage a competent interpreter who has been trained in trauma-informed interpreting skills (see Chapter 3) (IOM 2018: 40; Haskell & Randall 2019: 25; Berbec et al. 2017: 29). Questions should be **short and simple**, avoiding technical language. Questions should be **asked one at a time**. There are four types of questions which interviewers should use. During the interview, the focus should be on the first two types of questions (IOM 2018; Haskell & Randall 2019; Witkin & Robjant 2018):

1. **Open-ended questions:** The interviewer should at all times enable the victim to express what he/she experienced rather than just what he/she does, and does not, remember. Capturing the trauma as well as sensory and peripheral details of the event can count as compelling evidence. This type of questions allows victim witnesses to freely provide information about the criminal act without the interviewer being suggestive. Examples of this type of questions are:

- Can you tell me more about ...?
- Can you explain that to me some more?
- Can you recall anything else about the (situation)?

²⁴ "Suggestibility occurs when the victim-witness provides answers that reflect the answers he/she thinks the interviewer wishes to hear. The risk of suggestibility should always be avoided" (IOM 2018: 40).

2. Specific questions: These types of questions aim at focusing on specific events and gathering additional information to clarify any ambiguities. Specific questions are usually posed through the five W-questions: where, what, when, who, why? Examples of such questions can be:

- What are you able to tell me about your experience? / What are you able to remember (with your six senses)? / What can't you forget?
- Where would you like to begin?
- What were your reactions to this experience? / What do you remember feeling physically/emotionally?



“Why” questions should be phrased carefully, as they to some degree can cause blame or accusation. For example: “Why didn’t you escape when you had the opportunity?” Suitable alternatives for this question could, e.g., be “What prevented you from escaping?” or “Was there anything that prevented you from leaving?” (IOM 2018: 40).

3. Closed questions: Should the posing of open-ended or specific questions not lead to evidential details or the clarification of a specific point, it is advisable to use closed questions to which the victim responds "yes" or "no". Asking closed questions can be risky, as victims might feel tempted to guess an answer, as they are led by the given question(s). An example could be "Have you experienced sexual violence?"

4. Leading questions: This type of questions should be chosen as a last resort, as such questions can cause suggestibility and/or an inaccurate recall of the event. Leading questions are, e.g.: “He took all of your money, didn’t he?” The risk can be averted to some degree if the questions are asked in a form such as: “Did he hurt you at any time?” or “What do you recall hearing?”

Checklist 1 summarises some further communication aspects that should be taken into account when interviewing victim-witnesses.²⁵

Checklist 1 – Enabling trauma-informed communication

1. Provide a calm, consistent and welcoming environment: Provide the interview room with small comforts such as drinks and tissues. Also provide for childcare, if necessary.

2. Follow basic listening skills: Interrupting the victim during narratives should be avoided, as interruptions can impede memory retrieval. Let the victim-witness complete his/her narrative and listen carefully to what he/she has to say (see Annex 2).

3. Be present in the moment: As crime victims often have recurring memories of what has happened to them, it is important to bring the person back to the “here and now”. Here it can be helpful for criminal justice stakeholders to have some grounding exercises in mind (see Annex 3).

4. Never leave the interview room without explaining why the professional is leaving the room and informing the victims of what is going to happen next.

²⁵ Haskell & Randall 2019; Berbec et al. 2017; IOM 2018; Human Rights Watch 2013.

5. Take pauses: If the victim becomes overwhelmed with emotions during the interview, it is necessary to take a break and /or consider ending the interview earlier.

6. Enable the victim to be interviewed by the same interviewer: Repeated contacts with different interviewing professionals should be avoided, as the multiple recounting of the victim's narrative to different persons can be re-traumatising.

7. Victim-blaming language should be avoided: Questions and assumptions such as "Why did you ...?" should not be used.

Trauma-informed ways of working

The attitude of specialists can lead to re-traumatisation, by sending signals that deepen the victimisation caused by an offender and reinforcing the victim's depersonalisation. It is therefore crucial that criminal justice stakeholders adopt a trauma-informed attitude.²⁶ A trauma-informed approach can be promoted by, but is not limited to, the following principles:²⁷

1. "Do no harm": This ethical principle should guide all interview actions. Harm of any kind should be avoided, e.g., by avoiding unnecessary interviews during investigation, prosecution or trial and avoiding unnecessary questioning concerning the victims' private life (Art. 23(3c) EU Victims' Rights Directive).

2. Be respectful and patient: Interviewers should acknowledge that disclosure is a process and not a one-time event. In many instances, the fear of not being believed creates a profound barrier for victims to disclose criminal experiences (e.g., in the case of sexual violence). It is therefore decisive that interviewers receive disclosures respectfully and patiently at all times.

3. Be empathetic: Emotional competency in interviews requires developing essential social skills to calm and empower victims, so that they are able to provide more accurate, coherent, consistent and persuasive narratives. Emotionally competent interviewers, for example, listen to the victims, tolerate what they are saying, imagine that their story is true, etc. Avoid body language, expressions or comments that might indicate that the professional is considering the victim's experiences shocking or disgusting. An empathetic interviewer can at the same time be neutral!

4. Take a gender-sensitive approach: Ask at the beginning of the criminal proceedings if the victim would feel more comfortable talking to a police officer / legal professional of the same sex. But more important than the sex is that the professional has been trained in a trauma-sensitive manner. All stakeholders should be aware and respectful of the rights and special concerns as well as needs of women and girls.

5. Follow an age-sensitive approach: It is important to adapt the language to the age of the victim. It can also be helpful to provide for child-friendly equipment such as drawing materials

²⁶ FRA 2019: 89.

²⁷ IOM 2018; Rosell et al. 2018; Berbec et al. 2017; Haskell & Randall 2019; Human Rights Watch 2013; FRA 2017; OVC 2020; Witkin & Robjant 2018; Lilja 2019.

or toys that can demonstrate the crime experienced. The interview room should offer an overall calm and quiet environment, be painted in suitable colours, with enough light, etc.

6. Intercultural competence: If you are dealing with foreign victims and victims belonging to cultural/ethnic/religious minorities, it is also important to take a cultural-sensitive approach. This means that criminal justice stakeholders should have an understanding of how culture has an impact on trauma and the self-perception of being a crime victim. It is important that professionals understand that crime is committed by individuals, not by cultures, and that the professionals acquire basic knowledge of the victim's country of origin (e.g., religious practices, gender equality, etc.). If necessary, hire interpreters and cultural mediators. (see Annex 4)

6. Organising training on trauma for criminal justice professionals

Most professionals working in the criminal justice system are trained in law or in a related field. At first glance it seems irrelevant to expect legal professionals to understand trauma. However, criminal justice professionals should have a basic understanding of trauma, because trauma does play a role in the criminal justice process, irrespective of whether one understands it or not. Training on trauma would give professionals practical skills for encountering traumatised victims. Furthermore, for the criminal justice system to be truly trauma-informed, professionals need support in using these new skills, in particular, organisational processes that support trauma-informed ways of working. There may be many challenges on the way: legislation and procedural rules, deeply ingrained ways of working and communicating within the criminal justice system, organisational values and leadership, and lack of resources. These topics are discussed in the other chapters of this Action plan.

This chapter includes a model training curriculum with building blocks for organising a one to two-day training on trauma for criminal justice professionals. Any training based on this curriculum should be given by specialised trauma experts, who are able to deepen the topics described in the curriculum. Moreover, because legislation, processes, organisational structures as well as roles of professionals vary from country to country, training based on the curriculum should be modified to serve the audience and context in question. Finally, training on trauma should be included in the annual training programmes implemented at the local and national level for criminal justice professionals in order to enhance trauma-related skills throughout the criminal justice system.

Planning your training

In this section we will discuss how to plan an engaging, relevant and motivating learning experience. This includes thinking about who your trainees are, and how to design a learning experience that serves persons with different learning styles and enhances their skills. Moreover, as more and more training takes place online, this section also includes some tips on organising online training. The section relies heavily on the book “Design for How People Learn” by Julie Dirksen (2020) and on online materials made available by the Derek Bok Center for Teaching and Learning, at Harvard University.²⁸

Get to know your trainees: Understanding your trainees is an important part of designing a good learning experience. You need to know at least the following: 1) What do your trainees want? 2) What is their current skill level? and 3) How do they best learn new things? One way to get answers to these questions is to conduct a needs assessment survey before a training. A needs assessment could include background questions such as: How long have you worked in the field? What is your level of knowledge on trauma? Have you taken any courses on the topic? Furthermore, include questions that are designed to understand the needs of the trainees: Why do they want to learn about trauma? What kind of challenges are they facing in encountering traumatised persons and what do they want to learn? These questions will provide important insights into the practical

²⁸ <https://bokcenter.harvard.edu/online-resources>

challenges your trainees are facing. Moreover, reflecting upon the questions “why and what” can increase the motivation of the trainees to learn about the topic. You can also include among the needs assessment questions, what kind of learning methods your trainees would prefer (e.g., lectures, videos or case work) and modify your training plan based on each group’s preferences.

A few words on adult learning: Based on research, adults learn best when they have an internal motivation to learn. This means that an adult learner needs to know, “What’s in it for me?” The information you want to convey should be presented in a manner that helps the trainees understand the relevance it has for them. Adult learners also rely heavily on past experience to understand new ideas. You can support this tendency by giving your trainees “Aha! moments”, i.e. moments when a new topic connects with past knowledge. Adult learners are also eager to solve problems. This means that using cases or presenting dilemmas enhances their learning. Moreover, adult learners need to be in control of their learning. Deciding to attend training on trauma is naturally one aspect of being in control of one’s own learning. However, if trainees are obliged to participate, you can give them at least some feeling of control by asking their preferences and needs before a training session.

When designing training, keep in mind the popular learning theory that identifies four primary types of learners: visual, auditory, reading/writing, and kinesthetic learners. Each learning type responds best to a different method of teaching. Visual learners need visual representations (graphs, pictures, videos), auditory learners will remember information best by listening and reciting information back to you, while kinesthetic learners will be eager to participate in a hands-on activity. Try to cater a bit to all different learning styles.

Design a training session to have a learning curve that is not so easy that it bores the trainees, but not so difficult that it makes the trainees lose concentration. Learning cannot be a “constant uphill grind” in the sense of constantly giving learners more, and more, and more new information. People are not able to take it all in. Make sure to design those “Aha! moments”, when trainees feel that they get it or that there is something familiar in the content with which they can relate. Repetition is important. That is why you need to include recaps, reminders, discussion points, quizzes etc., that sum up the topics discussed. By encouraging trainees to regularly recall information they have recently learned, you are helping them to retain that information into long-term memory.

Learning a skill means practicing it in order to really master it. A skill such as “how to interview in a trauma-sensitive manner” does not become a skill by just following a lecture on the topic. Your trainees will need examples and possibilities for putting into practice what they have learned. This could be, e.g., a possibility to follow how an experienced interviewer conducts an interview, followed by their own practice, e.g., through mock interviews and feedback. Design the training programme to have space between sessions to allow the absorbing of new information, and possibly trying out new skills, before returning to the classroom. This is also recommended in the curriculum below.

Pre-assignment: Encourage the trainees to start their learning process before you meet in the classroom by asking them to complete a pre-assignment. One option is to ask the trainees to write short descriptions of cases/situations in which they have had to face traumatised persons. What kind of situations did they find challenging? What kind of solutions did they find? Why did they think the solution worked? What kind of information or skills did they think were missing, which would have helped them to solve these situations? You can ask the trainees to reflect and write for themselves to enhance their own learning process. Or, you can ask trainees to share these

reflections with you, and with their permission, use examples in the training (these can be integrated in particular in modules 2 and 3).

Create a safe space for the training sessions: Conversations during the training will become broader and deeper when everyone feels safe to speak their minds and admit their weak points. Training on trauma also deals with topics that will stir different feelings, and the training might even touch upon some trainees' unknown trauma-triggers. Therefore, take some steps to create a safe space. You can propose to a group, or jointly agree in the beginning of a training, on some "house rules". Additionally, reserve time in the beginning of the training for a round of introductions. Good ice breaker questions ideally also increase learning motivation. Ask your trainees, for example, why trauma training is important for them, why do they want to learn about trauma, or how trauma is relevant to their day-to-day work.²⁹

A model training curriculum

In this section we will introduce a model training curriculum on trauma for criminal justice professionals. The content of the curriculum relies heavily on the expertise of **the Helsinki Deaconess Foundation / Centre for Trauma Psychology**.³⁰

The model curriculum is composed of six modules, and each module has:

- 1) a learning goal,
- 2) a short description of the topics to be covered,
- 3) a description of training methods, and a proposal on how to modify the module to suit different target audiences, timeframes and online/offline learning environments,
- 4) additional resources to assist a trainer to prepare training sessions.

Ideally, training based on this curriculum is classroom-based training composed of two separate one-day sessions. It is ideal to have two separate sessions so that after the first session trainees can reflect on the information, and ideally practice their new skills, before returning to the second session. Spreading the curriculum over two days will give more space for deepening the topics, allowing discussion and the sharing of best practices. It is also possible to go through a briefer version of the curriculum in one day. Moreover, a short follow-up session is recommended to enhance the use of trauma skills. Face-to-face training is better suited for interaction and for creating networks for peer-to-peer support, but well-planned online training can also serve this purpose.

Any training based on this curriculum should be given by a trauma expert who is able to deepen the topics in the curriculum, give practical examples and answer questions. On some of the topics it is necessary to consult a legal expert on procedural law. If possible, consider engaging a peer-trainer, e.g., a prosecutor or a legal aid officer with a particular expertise in trauma. Peer-trainers have the benefit that they can understand their peers' practical challenges at work.

²⁹ <https://whatisessential.org/resources>

³⁰ <https://www.hdl.fi/en/support-and-action/immigrants/rehabilitation-for-torture-victims/>

MODULE 1: What is trauma?

Learning goal: After this module the trainees will understand what is meant by trauma and what are common symptoms of trauma, as well as understand that different people react differently to traumatic events.

Topics to be covered:

- Define trauma based on the diagnostic tool used in your national context. See also the section on additional materials.
- People will react to similar traumatic events differently. Not all people who experience a potentially traumatic event will become psychologically traumatised. Discuss protective factors, risk factors, and individual resilience.
- Separate an acute stress reaction caused by a single traumatic event, such as a single event of crime, from repetitive traumatising circumstances, such as domestic violence, incest, bullying or human trafficking.
- Explain that acute trauma is temporary, lasting from a few hours to days, but is nevertheless a severe condition. Describe symptoms, such as dissociative symptoms, vivid recollections of the traumatic event, avoidance of stimuli associated with the traumatic event, and a constant state of hyperarousal. The symptoms could also include partial or total loss of memory.
- Explain that people may experience a range of reactions after trauma, and most will recover from their symptoms over time. Those who continue to experience symptoms may be diagnosed with PTSD. You can share some national statistics or graphs on the number of people who experience traumatic events and trauma to show the prevalence.
- Describe symptoms of PTSD. Consider what is relevant from the perspective of a criminal justice professional to know about PTSD. Give an example of how a person suffering from PTSD might react, e.g., when reporting a crime or giving a statement in court.
- Explain that, out of all forms of trauma, childhood abuse tends to have the most complications with long-term effects, because it occurs during the most sensitive and critical stages of psychological development. Explain how and why this is the case (if time allows). Abuse during childhood is also a risk factor for becoming a victim of abuse or crime in adulthood.
- If a person lacks support and care, s/he usually learns to respond to abuse and threats through mechanical adaptation and by passive submission. This is common, e.g., among abused children and for victims of domestic violence. If violence is repetitive and relentless, a traumatised person is exposed to constant physiological dysregulation, i.e., extreme states of over- or under-arousal and physical immobility. These reactions often become established.

- Explain that as a result, it is very difficult for victims to act in situations where they would reasonably be expected to take action. A traumatised person may be able to act only in response to immediate danger. Submissive behaviour is the best guarantee of survival in certain situations. Automatic, unquestioned and thoughtless obedience to the perpetrator is appropriate for survival. Ask the trainees to reflect on the following: Can they identify this type of reaction in some cases in which they have been involved? Do they identify any problems when reflecting on the above information and some definitions of criminal acts? (e.g., consent in rape, domestic violence and submission to violence).

- Mention the concept of generational trauma, which means in short that psychological effects of trauma are being transferred from one generation to another. Generational trauma can have an impact on the way that individuals understand, cope with, and heal from trauma.

- Point out that the way other people react to traumatic events can also be traumatising. Based on research, the insensitive response of the criminal justice systems to victims can be re-traumatising. We will come back to this in the following modules.

- Ask trainees to reflect for five minutes on what they found to be the most important issues that they have learned. Discuss with a pair / in a group. Recap based on the work in pairs or by restating the types of trauma, that different people react differently, and have a different array of symptoms, or no symptoms. Stress why people undergoing constant abuse react in a certain way. Stress why the actions of professionals themselves can retraumatise or support a victim.

- End with a positive note, e.g., that support can be given to persons suffering from acute trauma and PTSD. Share from your own experience as a trauma expert or from research findings on successful trauma treatments.

Training methods: A lecture by a trauma expert. You could start the session by asking trainees to fill in a questionnaire with statements related to the above topics. This can be done either with the aim of understanding the level of knowledge of the trainees (an option is to include the statements in a pre-session needs assessment), and thus give you useful information to plan your lecture. The statements can also help the trainees to refresh their memory on the topic and/or or bring to light some misconceptions related to trauma, which can be discussed jointly.

Statements could be, e.g.

- ✓ All traumatic events lead to trauma (true/false)
- ✓ All people facing traumatic events react in a similar way (true/false)
- ✓ Traumatic events in childhood can have a more long-lasting effect on the brain than traumatic events in adulthood (true/false)

ONLINE TIP: Many online training tools allow you to prepare quizzes or questionnaires in advance for your online session. This can be an effective way to collect answers from trainees, and the additional bonus is that you can share the group's answers with one click. You could also compare the before-and-after class answers immediately with the group.

Modifications: The length of this theoretical part can vary depending on whether you have a one or two-day training and depending on the level of knowledge of the trainees. If you have limited

time, one option is to record this theoretical module, and request the trainees to watch the recording before a joint session. If you have a two-day training session, you could consider including a more detailed presentation and discussion on, e.g., some forms of repetitive traumatising circumstances, such as domestic violence, child sexual abuse or human trafficking (ask your trainees in the needs assessment which topics are most relevant for them).

Additional reading:

Bryant RA. Post-traumatic stress disorder: a state-of-the-art review of evidence and challenges. *World Psychiatry*. 2019 Oct; 18(3):259-269. <https://pubmed.ncbi.nlm.nih.gov/31496089/>

MODULE 2: Manifestations of trauma

Learning goal: After this module, trainees will have a more concrete understanding of how trauma can be manifested in a person's behaviour, how human memory functions, and how trauma can interrupt the memory process. Trainees will understand what trauma triggers are, and why these can be relevant during a criminal process.

Topics to be covered in this module:

- Mental and physical reactions during a traumatic event are "normal reactions to an abnormal situation". After trauma, the mind's alarm system can become over-sensitised and a person's survival protection mechanisms are triggered by (external or internal) perceived threats, even when the real threat has passed. These reactions can be very frightening and confusing. Explain what is meant by the "window of tolerance". Hyperarousal or passivity. Use infographics to explain the concepts
- Explain the fight-flight-freeze -reactions. Show a picture or a short video to explain these reactions (many are available online). Ask the trainees to reflect upon on how criminal justice system interprets for example situations in which a victim freezes during an attempted rape or attempted physical violence. Is this interpretation of a victim's behaviour trauma-informed? Can they think of other examples?
- Point out that the criminal justice process relies heavily on memory. Explain the basic functioning of the memory. Explain: encoding, storage, and retrieval of memories.
- Explain the difference between implicit and explicit memories. Use simple examples to explain the difference. Explain how trauma can affect implicit and explicit memories. Use pictures/short videos (many are available online). If time allows, ask the trainees to come up with examples of implicit and explicit memories, related either to their working role or to their day-to-day life.
- Explain different types of trauma triggers. Give examples. Many online videos and examples are available. Explain that trauma flashbacks can result in prolonged fear, anxiety, and feelings of helplessness. Central to this is the experience of not being able to control one's own

mind and body, when strong unpleasant memories, images, emotions, and sensations can be triggered at any time.

- Explain that it is not always possible to avoid triggers. Your presence as a professional, a question you pose, the memories you ask the victim to recall, or something in the courtroom setting, may also be a trigger. Traumatized persons can learn to identify triggers and also learn to use techniques to control them or the reactions they create. You can explain some basic techniques to help persons to cope with the triggers.

- Explain dissociation and that it can be manifested in various ways.

- Primary feelings aroused by trauma can be very mixed and confusing. Also secondary feelings after the traumatic event can be overwhelming and can influence behaviour and the psyche in many ways.

- Shame is a universal and a social feeling. Shame is aroused when a person feels that s/he has violated social/cultural norms or expectations. Shame causes avoidance and withdrawal and can also restrict social relationships. Shame impairs the integration of traumatic memory into one's own identity and one's own life story, which is a barrier to healing.

- Feeling ashamed of being abused is a common feeling among victims of violence, especially for victims of sexual violence. Shame not only influences the self, but also hinders the victims from talking about the violence and leaving the violent situation. The feelings of shame increase if victims are blamed or even stigmatized for the violence within their family or community, or by criminal justice actors through non-sensitive approaches / not believing their story, etc.

- Explain the feeling of self-hate and feelings of mental pollution and "physical pollution" as well as the symptoms. Remind the trainees that a professional should communicate in a manner that helps the client/victim to understand that s/he does not arise disgust in the professional.

- Self-blame is also common among victims of violence, in particular victims of sexual abuse and domestic violence. Self-blame is self-incrimination: a negative assessment of one's own specific behaviour. The victim thinks that "I have done something terrible". It differs from shame, in which one thinks, "I'm a horrible person".

- A traumatic event can also threaten a person's belief system. This is because a shocking event can crush the belief system because it happens unpredictably and randomly. The illusion of invulnerability disappears, and the person loses his/her sense of control.

- Recap: The effects of traumatic events on automatic survival reactions, on memory, emotions, beliefs, and the ability to function. End with repeating that everyone's experience and life story is unique. People react differently to similar experiences. An event that is traumatic to one person may not be traumatic to another. Not everyone is mentally symptomatic after a traumatic event. People also have different ways and means of coping.

Training methods: A lecture by a trauma expert using several examples, info graphs and short videos to demonstrate practical applications. Use time to find resources online in national languages. This module discusses topics that can be mentally burdening. It would be a good idea to end the session with a mental cleaning exercise, which is also a bridge to module 6.

Additional reading:

Refer to the Current Care Guidelines in your country. For English language reading, see The National Institute for Clinical Excellence Guideline for recognising, assessing and treating post-traumatic stress disorder in children, young people and adults. <https://www.nice.org.uk/guidance/ng116> and the Clinical Practice Guideline for the Treatment of Posttraumatic Stress Disorder (PTSD) in Adults <https://www.apa.org/ptsd-guideline>

There are many videos available online that explain how memory functions, and what kind of impact trauma can have on memory. See for example this excellent video: <https://www.youtube.com/watch?v=4-tcKYx24aA>

The following is a good infographic on how trauma impacts memory: <https://s3.amazonaws.com/nicabm-stealthseminar/Trauma2017/img/co/NICABM-InfoG-memory-systems.jpg>

MODULE 3: How is trauma visible in the criminal justice process?

Learning goal: After this module trainees understand from a trauma perspective why a person might react or behave in a certain manner, even if it seems counterproductive from the criminal justice perspective.

Topics to be included in the module:

- *Unwillingness by, or inability of, the victim to talk about traumatic events*, including unwillingness to report crime. Explanations from a trauma perspective: in the case of long-term abuse, victims can only think of ways to survive for the moment; they have difficulties in planning the future; their time perspective diminishes; their ability to function is limited; they have difficulties in remembering what has happened; implicit vs. explicit memories; difficulties in putting incidents into words; feelings of guilt and shame; defences; protecting the perpetrator; inability to differentiate between relevant and irrelevant; communication with the person conducting a hearing is perceived as scary or unpleasant. Give examples of the above.
- *Victim freezes or dissociates during a hearing and is not able to speak up / answer any questions*. Explanations from a trauma perspective (e.g., trauma triggers). What can be done to help the person? Give some examples from your experience of what can trigger trauma in a hearing / in a courtroom situation. Describe what can happen, how to identify that the victim is not feeling well, and what can be done to assist a person in that moment.

- *Inability to tell a coherent, detailed narrative in a timeline* as expected by the criminal justice process and/or changes in the narrative during a criminal process. Furthermore, a victim might be seen as unreliable if the narrative changes. From a trauma perspective, these reactions are understandable: trauma memories are different from other memories. Retracing memories from the implicit memory to explicit memory changes them. There may be a mixing of memories, an inability to differentiate between relevant and irrelevant, unwanted/painful reactions when trying to remember, and a traumatised person might therefore consciously or unconsciously try not to remember the events. Remembering is also a communicative process (the listeners have a role); shame; guilt.

- *Credibility of proof associated with the credibility of the witness/victim.* There can be an underlying assumption of an “ideal victim”, including an assumption of how people react to certain events. If a victim does not react in a stereotypical manner, e.g., is submissive, passive, or does not show any reaction (is numb while relating the event), this can be interpreted as indicating that the victim of the crime is not credible / the story is not credible. Explain these reactions from a trauma perspective.

- **IF you include the questioning exercise, do it before the next point.**

- *The criminal process can be re-traumatising.* From a trauma viewpoint, there is a built-in problem in the criminal process: the process is based on the presumption of innocence of the perpetrator, which means for example that police officers, prosecutors and judges need to “question” all facts of the case, including whether the incident took place at all. For a traumatised person, this can create a perception that professionals do not believe or that they doubt his/her story. Furthermore, victim-blaming is a phenomenon recognised in research. Criminal justice professionals might be non-sensitive to the “once in a lifetime” experiences that victims have of crime, just because for professionals such examples of crime are everyday occurrences. Explain why doubting / not believing is particularly painful/harmful for a traumatised person. However, much can be done to hear a victim in a sensitive manner.

- *Long processes can be harmful to victims,* since they cannot “move on” and process their trauma, but have to return to the events and possibly also re-encounter the perpetrator. On the other hand, for some victims, it might be beneficial that they have time to process trauma, e.g., in therapy and might have more strength to talk about the event and take part in a hearing a bit later. Also, long waiting times during a trial can be very stressful, for example when a victim has to wait outside a courtroom for long periods before being called in for the hearing. Are there any procedural possibilities to speed up the criminal process for traumatised victims? Or during the actual trial?

- It might be very difficult for a victim to understand that even though s/he has encountered a traumatising event, it does not necessarily lead to a conviction. This can be due to many issues, both substantive and procedural. From a trauma perspective, it would be important to explain to the victim the reasons for a decision not to prosecute or for an acquittal.

- End with a reminder that for the victim, healing from trauma often continues also after the process, and it should be made sure that a victim has all the information s/he needs on available support services throughout the criminal process and after (see Chapter 3).

Learning methods: In the beginning, you could ask trainees themselves to identify some of the main challenges caused by trauma in the criminal justice process. After the group / smaller groups have identified some of the challenges, you can collect them on a whiteboard, and walk the trainees through the examples from a trauma perspective. Most of the points discussed will be also a recap of modules 1 and 2.

Questioning/Listening exercise: Divide the group into pairs and give them instructions step by step. You should not reveal the whole exercise at once. PART 1) Ask everyone to think of a simple fact statement, such as “I ate a sandwich this morning”, “I go jogging every Tuesday”, “My grandmother lives in Germany”, “The sky is blue”. Give a few minutes for everyone to come up with their statement. Next ask the pairs to choose who will present his/her statement first. After they have decided, give the next instruction: “For the next two minutes, your partner will try to find some falsehood or discrepancy in your statement.” Invite the other to question the statement in every possible way: by asking for more details, by trying to catch the partner lying, by asking why the statement would make sense, etc. As the trainer, make sure to time the two minutes and let the trainees know when the time is up. (Online tip: many online tools allow you to automatically time pairs/subgroups.) Once the time is up, ask trainees to change roles and repeat the exercise with the other person’s statement. Repeat the instructions for the “investigator” and time the exercise. PART 2) Ask the same pairs to use the same statement but this time give the following instruction: “Now you are very interested in the statement and want to learn more about it. You don’t need to agree with the statement, but you are interested in the viewpoint of the other person”. Let the pairs know when the time is up, change roles and repeat. PART 3) Ask the trainees to reflect: “Was there a difference between discussion 1 and 2?”, “How did you FEEL during discussion 1 and 2?”, “Did the second discussion take a different turn from the first one?” Ask the trainees to share their thoughts with the group if they are willing to do so.

Modifications: If you have a two-day training with two separate sessions, you can give (voluntary) homework. Ask the trainees to keep a learning diary in which they reflect on the effects of trauma in the cases they are working on, and on their own best practices. The learning diary can be only for the trainees themselves, or you can ask the trainees to share their diary remarks with you, so that you can use examples from the diaries in Module 4. You can collect the diary entries using an online form / tool such as Google forms. Make sure that you do not collect any personal information, and emphasise to the trainees that they should not reveal any personal information nor personal attributes when describing cases.

One option for homework is to ask the trainees to read the article “The Impact of Trauma on Adult Sexual Assault Victims” mentioned in the additional readings. Alternatively, for those who are more practice-oriented, ask them to have a look at the IACP model questions for trauma-informed interviewing.

Additional readings:

Lacy, J. W., & Stark, C. (2013), The neuroscience of memory: implications for the courtroom. *Nature reviews. Neuroscience*, 14(9), 649–658. <https://doi.org/10.1038/nrn3563>

The following is an excellent, clearly written article that outlines some of the key findings from the body of knowledge of neuroscience, and applies them to the issue of sexual assault and its impacts on victims: *The Impact of Trauma on Adult Sexual Assault Victims* https://www.iustice.gc.ca/eng/rp-pr/jr/trauma/trauma_eng.pdf

The International Association of Chiefs of Police (IACP) tool for trauma-informed interviewing: <https://www.theiacp.org/resources/document/successful-trauma-informed-victim-interviewing>

MODULE 4: Using procedural safeguards to protect and support traumatised victims

Learning goal: After this module trainees understand which procedural safeguards are available to protect and support traumatised victims and how to make use of them. Trainees will share best practices and start to build trauma-informed skills.

Topics to be included:

- Any reflections or cases from the homework.
- First ask the trainees themselves to identify in a group/ smaller groups the procedural safeguards that would assist a traumatised person to cope with the process. Note these down on a whiteboard.
- Reporting crime is the first step in the criminal justice process and can already be a major step for a victim. Spaces for reporting crime should be safe and friendly. Ask the trainees how they perceive the available spaces at the police and situation for reporting crime. What could be improved from a trauma perspective?
- A crime victim should be informed of the support services available. Providing information in a trauma-informed manner includes giving the information in different formats (written, spoken) in an understandable language, and repeating the information, since a traumatised person might not be able to take in all the information at once. Although procedures differ in different countries, a good practice is to ask permission from a victim to pass his/her contact details on to an assistance provider, so that the assistance provider can contact him/her instead of the victim having to take action. Ask the trainees whether they are aware of different services available for victims of crime. What do they see as their role in providing information about victim support services? Do they see any possibilities for improving the provision of information?
- Is a personal assessment of a victim's need for special protection conducted during pre-investigation? Find out how the personal assessment for special protection is conducted, and whether there is any relevant national guidance/training on the topic. Ask the trainees whether in their opinion this process functions well. If not, what are the challenges? And how could they be overcome?
- From a victim's perspective, it would be beneficial to have one investigator throughout the investigation process. This is so that the victim does not need to repeat the story to different persons, and in an ideal case a relationship of trust can be formed with an investigator. It might be beneficial to have an investigator of the same gender as the victim, for example in sexual assaults and domestic violence cases. In the case of child victims, it would be beneficial to have

a specialised investigator. Are these safeguards available in legislation? What about in practice? What kind of experiences do trainees have? Do they have ideas for improvement?

- Spaces for interviewing a victim should be safe and friendly and also protect privacy. Child victims should be heard in spaces particularly designed for children. Is there an option for videotaping the pre-investigation interview and using video instead of hearing a victim in court if s/he does not feel comfortable being heard in court? What are the thoughts and experiences of the trainees on this? Check your national legislation.

- Traumatized victims might benefit from several interviews during a pre-investigation phase, since their situation and mental state can vary from day to day. Having a possibility to be interviewed several times in a row (by the same investigator) might also help the victim to build a more coherent narrative. Would the process and the practices allow for this? Would it be possible to give a victim some power over deciding when it is the “right moment” for him/her to be interviewed?

- If training legal aid officers/legal aid providers: Do they have a possibility to meet traumatized clients several times in order to build trust and to prepare a client for a hearing? It is important to explain to a victim what will happen in court, give a possibility to practice for the hearing, and ensure reference to victim support services, including to a support person. How does this take place in practice? Visiting a courtroom with a victim before a hearing can be helpful. Which professional would be in a position to arrange this? How could this be organized in practice? Any experiences? The Swedish Crime Victim Authority has produced a video of a mock trial.³¹ Would similar videos be useful? Do the trainees have other possible ideas for lowering the barrier for attending a trial?

- Discuss means for protecting a victim during a trial, including preventing accidental contact between victims and offenders in court premises by arranging separate doors and waiting areas for the victims and defendants, or by allowing a victim to be heard behind a screen or from a separate room, if the victim so wishes. Is there an option of using a video or audio connection to hear either the victim or the defendant? May a court hear a victim without the defendant present or order the hearing or the full trial to be kept behind closed doors? Special protection measures for child victims? What are the thoughts and experiences of the trainees on these means? Check your national legislation for available means.

- Discuss use of expert witnesses and written expert opinions. These can be used to enhance the credibility of a victim’s testimony in general (e.g., why s/he cannot remember details or tell a coherent story) or to give insights from a trauma perspective on why a victim reacted in a certain manner during the incident(s) (e.g., submission, passivity, freezing). Any thoughts, experiences and best practices from the trainees on using expert witnesses and written expert opinions?

- Is there a possibility to have breaks or even postpone a session to another day, if a victim is overwhelmed? Who can ask for a break or for a postponement? Who can identify if a victim is not feeling well during a trial?

³¹ <https://www.youtube.com/watch?v=JJaXVJ3lE4&feature=youtu.be>

- What happens after the trial? How can you make sure that the victim does not run into the defendant after the trial / outside the court premises? How does s/he get home? Could someone (such as a support person or a friend) accompany the victim home? When and how will a victim receive information on the judgment? Any best practices?

- From a trauma perspective, it is important to explain the reasons for a decision not to prosecute or for an acquittal. From a trauma perspective, it would be important to explicitly mention that what a victim has encountered was wrong even though there was no judgment in this case due to x and y. Also, it would be beneficial from the victim's healing perspective to receive feedback on his/her hearing, and on being courageous enough to come to the courtroom. You could ask the trainees to share examples of whether they as legal aid officers, prosecutors or judges have ways to explain the judgment in trauma-friendly terms. You could also ask the trainees to think of possible ways to give information and feedback within the limitations of the process.

Learning methods: A discussion should preferably be facilitated by a legal expert; ideally, a professional with a background similar to that of the trainees. Before preparing this module, check the procedural safeguards available in your national legislation. It is important to include the sharing of experiences and best practices in this module. You could ask the trainees to share their best practices in their homework / learning diary. Think of how you can/could collect and share the best practices presented so that the trainees can start to use these practices after the training. Return to the best practices, if you organise a follow-up session (see module 6).

ONLINE TIP: Some of the online tools have a digital whiteboard for collecting ideas during a training session or you could use an online tool such as Miro to collect and share best practices online.

Modifications: It is important to modify this module based on which group of professionals you are training, because different professionals are involved at different stages of the criminal justice process and have different roles and possibilities within the process. E.g., a legal aid officer would have more possibilities to discuss with and prepare a victim for an interview. A prosecutor usually does not meet a victim before entering a courtroom, but can still take into use some practices to engage the victim in a trauma-informed manner. A judge, in presiding over the trial, is able to manage the process, e.g., offer breaks or even postpone a session. A legal aid officer or a support person (if available) can arrange a debriefing session after a trial to explain and discuss the judgment. Prosecutors and judges could, e.g., think of the form and style of decisions.

MODULE 5 Trauma-informed ways of working

Learning goal: After this module, trainees will be able to develop trauma-informed methods for engaging with victims of crime.

Topics to be included:

- Define the trauma-informed approach: methods of working that are based upon an understanding of the harmful effects of traumatic experiences together with fundamental principles of compassion and respect. Even a short trauma-informed encounter can be meaningful.
- Principles of trauma-informed care: safety, choice, trustworthiness, empowerment. Give practical examples of what these mean in practice.
- Explain the basic principles of a safe space. Show pictures or give examples. Creating a safe place also includes ensuring that the conversation / interview situation is uninterrupted.
- Describe a structure for a trauma-informed meeting. Victims should be informed of the name and job title of each person present at a meeting and be provided with a simple explanation of their professional role. Find out if the gender of the participant in the meeting matters to the victim. Meet their wishes in this sense whenever possible. Inform the victim of the structure and aims of the meeting, avoid a 'formal interview' setting, and offer options at least for minor choices, such as where to sit. Mention that you may have to ask unpleasant questions and explain the reason for this. Make sure the victim understands what you are saying and that they are welcome to ask questions, including about the roles of the professional, at any time. Close a session by summarising, and clearly state what the next steps will be.
- Communication: Be present. Concentrate on the client/victim. Keep eye-contact. Observe the client – how is s/he doing? Observe your own bodily emotions. Start with small talk or ask "easy" questions that everyone is able to answer. Allow enough time for the victim's account, taking breaks if necessary. Traumatized persons should be reassured that they can take the time that they need to process their thoughts and to provide further detail or describe events in their own way. It is helpful to bear in mind that some people will prefer 'open' questions and speaking in an 'open-ended' manner, while others may feel more secure and able to manage communications within a short-form question and answer format. Keep in mind that victims are often unfamiliar with legal procedures and legal terms. Repeat in your own words what the client has said to make sure that you have understood. Ask the client/interpreter whether they have understood your points.
- Stay calm. Observe your own emotions. The victim's emotional stages may range from crying to aggression. Don't be provoked. Be attentive and present, stay in the moment and tolerate slowness. Tolerate uncomfortable feelings with your client / the victim and yourself. Inform the client that emotions in this situation are normal and that you have "seen it all". Explain some basic actions for bringing a person back to the "here and now" from hyperarousal or from passivity.

- Remember to inform a victim of the support measures available. Repeat this information several times during a meeting and/or provide it in different formats (written, oral).
- Ask the trainees to discuss in small groups what kind of good practices they have for encountering victims.
- The phrasing of questions during a victim interview is important. Depending on how a question is asked, it might be perceived by a victim as blaming them for their actions, or blaming them for their inability to recall something. Trauma-informed interview techniques can be used to reframe questions in a manner that helps victims retrieve memories about a traumatic event and assists professionals in gathering more information while making the victim feel more supported.³²
- Ask the trainees to discuss the list of questions in the IACP tool (see above footnote) in pairs or in small groups: How do they find these questions, how could they use them? You can also prepare a role play which would give trainees an opportunity to test the questions.
- Raise the following discussion point (in pairs or as a group): From a traumatised victim's perspective, do you think it is better to try to avoid pushing a victim to answer / to tell a story in a hearing, if it seems to be too painful, even if this might lead to not being able to build a case for prosecution or to a conviction? Or would it be better to push a bit to talk about the painful memories, if this increases the chances for a conviction? The answer depends on the case and requires balancing! You should not stop if at first you encounter difficulties, but try to ask the victim again from a different angle or give time. Explain that research has shown that crime victims want to be heard and want to actively take part in the process. Moreover, receiving "justice" in the form of a judgment can be relevant from a trauma-healing perspective. Furthermore, not being able to tell about the incident in the hearing, can leave a victim with the feeling that "I failed again".
- Raise a point on interpretation, if time allows: It is important to have a professional interpreter who is bound by ethical guidelines, one whom the victim feels s/he can work with; one who stays throughout the case and has personal qualities that help the victim feel safe to disclose sensitive materials. If possible, the preferences of the victim as to the gender of interpreter should be respected. In some cases, victims may feel uncomfortable or intimidated by people who are from their own culture or country of origin due to their previous traumatic experiences. Equally they may feel intimidated by people who are from a different cultural origin. It is best to work in line with the preferences of survivors as much as possible. What are the experiences and best practices of your trainees with regard to interpretation?

Training methods: A discussion facilitated by a trauma expert. Include pair work and time for discussion. The issue of interpretation usually raises many questions and a lot of discussion. You could consider spending more time on this topic and inviting an expert on the topic to present on the topic.

³² <https://www.theiacp.org/resources/document/successful-trauma-informed-victim-interviewing>

MODULE 6: Supporting the wellbeing of professionals

Learning goal: After this module, trainees understand why encountering traumatised persons can be mentally burdening and they will have learned some methods to cope with this burden.

Topics to be covered in this module:

- Explain re-traumatisation: working with persons in precarious situations, including those suffering from grief, loss and suffering, can be very consuming psychologically. Explain compassion fatigue and compassion satisfaction.
- Explain the mechanisms behind good and bad stress. Every person's own background factors such as their own weak points, even their own trauma-triggers, everyone's own automatic reactions. Mention warning signs, such as irritation, difficulty in sleeping / sleeping disorders, loss of sense of humour, constant tiredness, forgetting things, apathy, high blood pressure, constant headaches, becoming cynical, and lack of motivation.
- Tools for well-being: Recognise your own limitations, and your organisation's limitations, peer support, work / personal life balance, developing your professional skills, workplace counselling, self-reflection, creating routines, set your own limits, using relaxation techniques, healthy lifestyle.
- What does your employer do to support your well-being? Raise the topic of workplace counselling and/or supervision. Is it available? Should it be available and how could this be arranged? Other support offered by peers and supervisors? What else?
- It is important to develop a self-care plan. A good way to start is to take a self-reflection test on mental burden, for example the Professional Quality of Life Measure. The ProQoL measures Compassion Satisfaction and Compassion Fatigue. The test can be found in several languages at https://proqol.org/ProQoL_Test.html. On the page, there are also many other useful resources and links related to the topic of compassion fatigue and self-care. If you have time, take this test as a part of the training, and discuss the results.
- Be aware that there are some small habits one can easily adopt in order to increase the participants' well-being. An effective small step is to start to pay attention to mental hygiene between sessions. You can develop "mental cleaning routines" such as taking a walk or having a cup of water before the next session. Share some tools that you are using or that you are familiar with. If time allows, test some exercises together. Discuss how to create new habits for well-being.
- End the session by asking the trainees to spend 5-10 minutes writing down for themselves answers to the following questions: 1) What did you feel, learn, understand during the training? 2) What strengths did you find in yourself and in your ways of working and in your organisation ways of working? 3) What challenges did you recognise in your work / in your way of working in your organisation? Can these be changed? And if yes, how? 4) What happens after this training / once you return to your workplace? What will you take with you? Ask whether someone is willing to share some thoughts from the exercise.

- Leave some time to sum up the training and to discuss possible next steps.
- Collect feedback from the training.

Training methods: A discussion led by a trauma expert, including examples and practical exercises.

Additional resources:

The Center for Victims of Torture provides open access information and tools at their webpage on Professional Quality of Life Measure: <https://www.proqol.org/>

Self-care tools on mindfulness-based stress reduction are available at <https://palousemindfulness.com/> and resources on psychoeducation and relaxation techniques are available in several languages at <https://www.mielenterveysseurat.fi/turku/materiaalit/serenen-materiaalit/>

Collect feedback: Reserve time for collecting feedback (at the end of the session). Include in the feedback questions such as: Did the training meet your expectations? Did you learn something new? Did the training increase your professional skills? In which topics would you need more training? You could also ask the trainees to re-answer the statements/questions from module 1 (or from a needs-assessment) to see whether the trainees' level of understanding has increased. This will also allow you to report some change in the level of understanding as an impact of your training.

Propose a follow-up session: A short (1 to 2 hour) follow-up session allows the raising of questions or concerns that might have arisen after the training. It will also support creating a habit of using trauma-informed ways of working. You can also use a follow-up session to collect testimonies and to measure the impact of your training by including in the discussion questions such as: Have you used your new skills? How? Have they been useful and in what kind of situations? Have you taken on board any of the best practices presented? Have they been successful / not successful? What do you think you would need in order to be able to use them? Have you created new practices based on the knowledge you have learnt?

Towards trauma-informed organisations: Ideally the trainees will not only modify their own working methods but will also advocate for trauma-informed approaches in their organisations. This naturally takes time and commitment. At the end of the training or in the follow-up session, brainstorm how to support the trainees in becoming agents of change. This could be, e.g., forming a network of trauma-informed professionals. The network could advocate for more training on trauma, become trainers themselves or advocate for trauma-informed structures, processes and guidelines in their organisations.

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ANNEXES

Annex 1 – The PEACE Model

The table was created by the authors based on the detailed explanation provided by the IOM on conducting interviews with victims of human trafficking (VoT). This table is a helpful tool for criminal justice providers to be guided through all important steps of the interviewing process: **Preparation and Planning**; **Engaging and Explaining**; **Accounting**; and **Closure and Evaluation**. The authors have taken important parts of each interviewing step and have adapted it to apply to crime victims in general, while adding unique aspects to consider based on the Consortium’s practical work experience with victims of crime.

Preparation & Planning of the interview	<p>Preparation and planning (P) is a crucial first step in any interview process per the PEACE model. It is the key to a successful interview. Sufficient planning should therefore take place prior to conducting any interview. During the preparatory phase, the principle of “Do no harm” should guide all actions, and the best interests of the victim should take precedence. This means that an interview should not be conducted at a time or place that may put the victim at risk. Relevant police units and legal stakeholders should prepare as follows:</p> <ul style="list-style-type: none">• Select appropriate investigators for the interview. Gender considerations and child rights should be taken into account. Interviewers should also have extensive knowledge of the form of crime in question as well as be aware of the level of sensitivity and experience required when interacting with victims.• Include interpreters if required. Interpreters should be appropriately vetted prior to contracting for their services.• Analyse the information available. Analyse the evidence, victim profile and so forth.• Prepare points of evidence (e.g., the possibility to gather medical evidence (e.g., DNA)).• Prepare the venue. Ensure that the environment is safe, private, free from foreseeable distractions, secure and comfortable. If at all possible, the interview should take place in a neutral venue, especially during the initial phases when the victim may regard law enforcement premises as a threatening environment.• Brief the interview team. Inform the team of the nature of the case, the evidence and any information on the victim.• Do background research. Ensure that the interview team is aware of any cultural practices and/or nuances that need to be taken into account in order to ensure that the victim is comfortable. This may also aid in building rapport with the victim.• Ensure that enough time is set aside for the interview. Interviewing victims requires patience and understanding. Since victims are being asked to recall a traumatic experience, it is likely that it will take time for them to give their
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	account of events. Interviews of this nature may also require regular breaks, especially when dealing with children.
Engage and Explain	Having taken detailed measures to prepare for the evidential interview, the next step involves: <ul style="list-style-type: none"> • Engaging the victim by developing rapport; • Explaining the role, rights and responsibilities of being a victim-witness to the crime and seeking their consent to cooperate; and • Explaining how the interview will be conducted.
Account	The account step of the PEACE model incorporates two distinct elements: <ol style="list-style-type: none"> 1. The account or “free recall”; and 2. Questioning. <p>Account / Free Recall</p> <p>This is the key phase of the entire interview process. During this phase, victims recount their stories in their own words in an uninterrupted manner. At this point, the interview team is advised to selectively use very short prompts or words of encouragement, such as “go on” and “you are doing well”, to avoid any pauses or silence on the part of the victims from becoming oppressive.</p> <p>Questioning</p> <p>In this phase, questioning is used to expound upon evidential points that had been recounted by the victim during the “free recall”. The questions posed by the interviewer have to be very carefully framed so as to ensure that the account provided by the victim is as accurate as possible and is not the product of suggestibility.</p>
Closure	The interview process should end in a structured and timely manner, not abruptly. Summarise the key points made by the victim witness as a means of checking the evidence that he/she has provided, using the words of the victim and inviting the victim to correct any mistakes that may have been made. It is also good practice to allow time during closure for the victim to ask questions which he/she may have of the interview team and for the interview team to explain in detail the plans for the next steps. Victim-witnesses should also be asked in the closure stage of the PEACE interview model if the interview process was acceptable to them, whether they fully understood it and whether they experienced any problems that they wish to discuss.
Evaluation	In addition to evaluating the evidential materials gathered, it is pertinent that the performance of the interviewers and interview partners (e.g., interpreters) be evaluated. Evaluations should be done after each interview and not be left until the entire interview process is over. This will allow for the identification of investigative actions that need to be taken immediately as well as provide guidance on the evidential focus or structure of the next interview. The feedback received should form a part of the evaluation process.

Own table based on IOM’s (2018) description of the PEACE Model (Ibid.: 38- 41).

Annex 2 – Guidelines for active listening

When working with victims of crime, criminal justice professionals should be able to listen to victims carefully and reflect upon what they say. They should also demonstrate understanding of and empathy for what victims say, genuinely accepting their feelings and trusting their ability to find solutions for themselves. This Annex has been developed on the basis of Payoke's (2014) Guidelines for active listening in the context of VoT and has been adapted to crime victims in general.

When listening empathically, criminal justice stakeholders hear the victims' thoughts, beliefs, and feelings, in addition to their words. This involves actively listening and asking questions such as: Do I understand what he/she is saying? Does he/she understand me? What are the feelings that accompany what he/she is saying? What is the context in which his/her story is told? What is the client's frame of reference? Some guidelines for active listening during the criminal investigation include the following:

- Decide to listen and concentrate on the victim.
- Avoid distractions (looking away, looking at documents, glancing at watch)
- Do not confuse content and delivery – assume the victim has something important to say, even if he/she is having trouble saying it.
- Cultivate empathy with the victim – try to put yourself in his/her place.
- Use your imagination and enter the client's situation.
- Concentrate and try to imagine his/her frame of reference and point of view.
- Avoid time pressure, whenever possible.
- Do not interrupt – let the client finish what he/she is saying.
- Remember key phrases or use word associations to remember specific aspects of the victim's story.
- Observe the victim's intonation, pitch, volume and style of delivery.
- Pay attention to the victim's facial expressions and other nonverbal cues.
- Give the client time to re-evaluate, remember details, or correct errors and let him/her continue when ready.
- Use simple gestures or phrases to demonstrate listening.
- Ask questions that encourage thinking.
- Respond neutrally.
- Use paraphrasing or clarifying questions to confirm that you have understood his/her story correctly.
- Reflect upon what the victim has said before giving feedback.

Annex 3 – Grounding exercises

This Annex includes a list of four grounding exercises, which can be used during criminal investigations when the stakeholder experiences that a victim is having flashbacks. These exercises are taken from the Health and Human Rights Info (HHRI)'s Manual "Mental Health and Gender-Based Violence". HHRI is funded by the Norwegian NGO *Mental Health Project* and seeks to share information about mental health and human rights violations. This exercise was chosen, since in particular victims of GBV are often highly traumatised and the manual is available in several languages (English, Spanish, Russian, Arabic, Portuguese, Nepalese and Ukrainian). It is important to emphasise that ALL criminal justice stakeholders can use these tools throughout the criminal justice process, as these are decisive in following a trauma-sensitive approach during criminal proceedings.

Grounding Exercise 1 - Feeling the weight of your body (5 minutes) Source: HHRI 2016: 47

This exercise helps victims who are 'frozen' or numb to focus on the present. It activates muscles in the torso and legs, which gives a feeling of physical structure. When we are overwhelmed, our muscles often change from extreme tension to collapse; they shift from a state of active defence (fight and flight) to submission and become more than ordinarily relaxed (hypotonic). When we are in touch with our structure, it is easier to bear feelings. We can contain our experience and manage feelings of fragmentation (of being overwhelmed) better. Ask the victim to:

- Feel his/her feet on the ground. Pause for five seconds.
- Feel the weight of his/her legs. Hold for five seconds.
- Try stamping his/her feet carefully and slowly from left to right, left, right, left, right. He/she should feel his/her buttocks and thighs touching the seat of the chair. Hold for five seconds.
- Feel his/her back against the back of the chair.
- Stay like that and ask if he/she feels any difference.

Grounding Exercise 2 – Re-orienting to the present (10 minutes) Source: HHRI 2016: 158

This exercise is of help to victims in a 'freeze-mode', in which they feel numbed and frozen. The interviewer should assist the victim in using his/her senses to put himself or herself fully in the present and feel safe. Ask him/her to look round and name three things that they can see.

- Look at something (an object, a colour, etc.) Tell yourself what you are seeing.
- Name three things you hear. Listen to a sound (music, voices, other sounds). Tell yourself what you are hearing.
- Name three things you touch. Touch something (different textures, different objects). Tell yourself what you are touching.

Grounding Exercise 3 - 'Squeeze-hug' (5 minutes) Source: HHRI 2016: 159

This exercise calms survivors who are agitated. It can also help 'frozen' victims to concentrate on the here-and-now. Tell the victim to cross his/her arms in front of their body and draw them towards their chest. With his/her right hand, he/she should hold his/her left upper arm. With the left hand, he/she holds his/her right upper arm. Squeeze gently and pull the arms inwards. Hold the squeeze for a little while. He/she should hold the tension and release. Then squeeze for a little while again and release.

Grounding Exercise 4 - Counting breaths (4 minutes) Source: HHRI 2016: 160

Ask the victim to sit in a comfortable position with the spine straight and the head inclined slightly forward. Ask him/her to gently close his/her eyes and take a few deep breaths.

- To begin the exercise, he/she counts "one" to his-/herself as he/she exhales.
- The next time he/she exhales, he/she counts "two," and so on up to "five".
- Then begin a new cycle, counting "one" on the next exhalation.
- Repeat five times.

Never count higher than five and ask them to count only when he/she exhales. You will know his/her attention has wandered when you find him/her counting up to eight, twelve, etc.

Annex 4 – Do’s and don’ts in communicating across cultures

Engaging with foreign victims and/or victims with a migrant background or belonging to cultural and/or ethnic minorities, requires multicultural skills and cultural sensitivity. It is therefore important to follow these communication principles, which are taken from Payoke’s *Human Trafficking: What to Do? - A Practical Guide for Healthcare Providers, Law Enforcement, NGOs & Border Guards* (2014). The authors adapted these principles to apply to communication with victims of crime in general.

Do	Don’t
Build up awareness of other cultures. Learn about other cultures to understand how values may influence actions and behaviours.	Do not over-generalise or develop stereotypes about cultures based on your interactions with a few individuals.
Remember that while culture may shape the way a person acts or responds to various situations, culture alone does not determine the full person. Other factors influence the way people act, perceive events, or interpret situations.	Do not judge a victim’s culture through your own culture. Understand that there are differences, with no culture being superior or inferior.
Actively seek out opportunities to learn about other cultures. Do research, attend activities sponsored by various ethnic/cultural communities, talk to leaders of cultural groups, or learn some phrases in their languages.	Do not be ‘culturally blind’, assuming that we are all the same, with the same thought patterns and reactions to situations. Recognise that cultural differences do exist, and interpretations of situations may differ across cultures.
Know what appropriate behaviour and speech in cultures is different from your own. Learn about non-verbal cues that might be offensive or confusing to people of specific cultures and adapt your language to their needs.	Do not expect immediate acceptance by the victim of your culture and cultural values. Expect some resistance and confusion while the victim is making sense of everything.
Recognise that victims are in a culture not of their own and thus may feel a loss of their own identity. Understand the victim’s need to retain his/her cultural identity while integrating into your culture.	Do not underestimate the difficulty victims may have in adapting to your culture. Allow them time to move through normal cultural adaptation processes.
Respect all victims equally regardless of country of origin.	Do not treat people differently based on the culture they are from. Treat all victims with the same level of respect regardless of their backgrounds and cultures.
Treat each victim as an individual, whatever country or culture he/she comes from.	Do not make sweeping generalisations about people from various continents (Asians, Africans, Europeans). Remember that each continent is made up of individual countries, within which there are individual states, provinces, territories, regions, ethnicities, and cultural communities.
Listen actively and empathetically. Try to imagine yourself in the victim’s situation.	Don’t be afraid to ask the victim for more explanation if you don’t understand something. Make sure you get the information needed that will be of greatest assistance to the victim.

