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VIVIEN - Victim Violence Educational Network
An educational project to improve the ability to assist women victims of violence

COLLECTION OF BEST TRAINING PATHS

Nadia Monacelli, Arianna Mori
Università di Parma

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BEFORE DEPARTURE

1. In the magnum sea of literature, the difficulty of capturing consistent information

At the beginning of this work, we aimed to take stock of what had already been studied and written on the topic of training for professionals involved in welcoming and caring for victims of violence. We were particularly interested in disabled victims, considering the criticality of this additional vulnerability. We then reviewed the existing literature on training of professionals working with – disable – women victims of violence.

Taken as a whole, the literature on domestic/intimate/gender-based violence (DIGV) is at present inestimable. We can find thousands of publications on all academic databases, reporting on research carried out in various disciplinary fields and in many countries around the world. Most of these publications begin, with few lexical variations, with the same statement, reminding the reader that "intimate partner violence (DIGV) is a serious global social and health problem". And, as a matter of fact, it is. According with the most comprehensive survey on violence against women at EU level, published by the EU Agency for Fundamental Rights (FRA) in 2014, the average lifetime prevalence of physical and/ or sexual violence by intimate partners in the 28 EU member states was 23%, with a range between 13% and 32%.

However, when we started to collect the material available in the databases, we soon realised that the topic of training courses, as well as their implementation and evaluation, were practically non-existent in this kind of literature, and absent on the topic of disabled victims. Overall, it was also noted that the European experience is virtually absent from the academic literature. We therefore directed our search towards the websites of previous EU-funded projects, but without any better results. The only database (the Daphne Toolkit) available is that



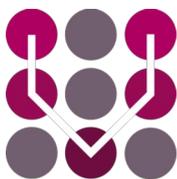
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for projects funded by the Daphne programme, but the collection is not complete and the documents available are few and unsystematic. Since it was not possible to find systematic documentation regarding the methodologies and evaluation of training courses and in particular those having as their focus women with disabilities, we considered the literature referred, in general, to the training needs of professionals involved in the reception and support of victims (disabled) of DIGV. What have we learned, then, from these publications? Firstly, in the vast majority of publications most attention is paid to health professionals. Considered to be the first professional contact point for people who have DIGV, health services and their staff are the main protagonists of the publications consulted. The other professional category to which particular attention is paid is law enforcement. Other professional categories, such as social workers or lawyers, are always associated with health care or police personnel when they are mentioned. It is important to note that health and police professionals are those who, by definition meet the victim at first contact, but neither the health care staff nor the policemen will be the medium- and long-term referents. This suggests that there is still a lot of attention to the first contact between the victim and the help system. Scholars are still concerned about whether and to what extent professionals are able to intercept the signs of violence, whether law enforcement agencies favour reporting, but we know almost nothing about what's supposed to happen to those who asked for help after this first step. Nevertheless, several authors have argued that specialised and long-term support should be strengthened, as well as interaction with the local service network and community leaders.

Another important point, obviously linked to the previous one, is the great reference made by all the authors to the still inevitable need to adequately and systematically train all health personnel and law enforcement agencies involved in victim assistance. The need for multidisciplinary or multi-professional training is strongly supported, however on a few



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occasions, studies call for specific training in relation to particular critical issues such as ethnic minorities, immigrant women and LGBT couples; only one of these studies refers to the need for training dedicated to the reception of disabled women.

One cannot help but be surprised: after decades of political speeches, regulatory reforms and developed projects, studies still complain about the lack of preparation and awareness of professionals involved in specific victim protection programs. From this research, these professionals, in fact, appear influenced by their prejudices, their fears and show a tendency to underestimate the seriousness of the consequences of IPV / DV.

Another important point to emphasise is the fact that most publications come from the richest and most industrialised nations. Of course, this is linked to the corresponding development of university systems. However, we cannot ignore the fact that it is usually in poorer and less urbanised countries, where the education system is weaker, that gender discrimination, and thus violence against women, has a greater impact on the population. At the same time, we know that many projects, funded by various international agencies, including the European Union, promote actions in those countries in favour of women and to combat gender-based violence. There are some reports related to these projects but, as we said at the beginning, it is not possible to have a systematic collection of them.

These failings are a regrettable missed opportunity, also in view of the intensity of migration flows from those very parts of the world. Having these documents could be valuable in order to better receive women from those countries.

At this point, it is clear that specific training for certain persons in particular contexts and in particular and impromptu projects is no longer an adequate response to the need to ensure access to support for any victim under any circumstances. In order to respond effectively to the need for protection, any professional who may come into contact with victims of violence as



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part of his or her work should be trained in a systematic way. In this perspective, some scholars suggest that IPV/DV training should be systematically included in training courses at professional or university level as an integral and compulsory part of training curricula.

2. Trained and untrained professionals: what skills distinguish them?

All these considerations led us to the need to identify the competences that differentiate professionals who have had previous training from those who have never participated in specific training on violence. The research was therefore specifically aimed at investigating the psychological precursors that can be the basis for building a supportive relationship with victims, regardless of the specific professional skills of the participants. This aim was pursued through the implementation of two studies.

The first study investigated, through questionnaire, attitudes, beliefs and representations of gender differences and relationships, as well as the meaning systems attributed to gender-based violence, in terms of: understanding the status of victim and aggressor, the needs of disabled victims and the risks of secondary victimisation.

In the second study, a projective interview was used, to measure more “implicit” dimensions like emotions, feelings and motivations that guide the professionals during their work with victims. Indeed, to know the way in which professionals implicitly and explicitly think, represent and organize meanings that are associate to violence is important given that this organization of meanings shape the way in which professionals enter in the relationship with victims. For all the psychosocial aspects, the principal interest was on the comparison between professionals who had already received a specific training on violence and their colleagues who had not received a specific training in recent time.

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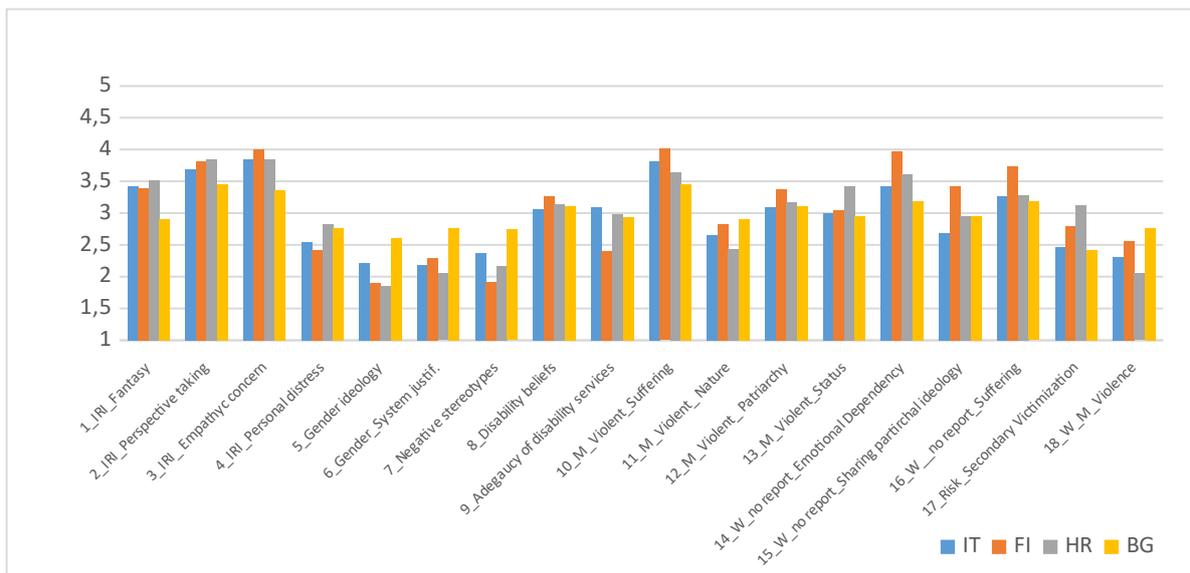
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THE QUESTIONNAIRE: STEREOTYPES, BELIEVES, ATTITUDES AND REPRESENTATIONS

From the analysis of the comparison between trained (TP) and untrained professionals (UTP) across the four countries involved in the project (Bulgaria, Croatia, Finland and Italy), some interesting results emerged.

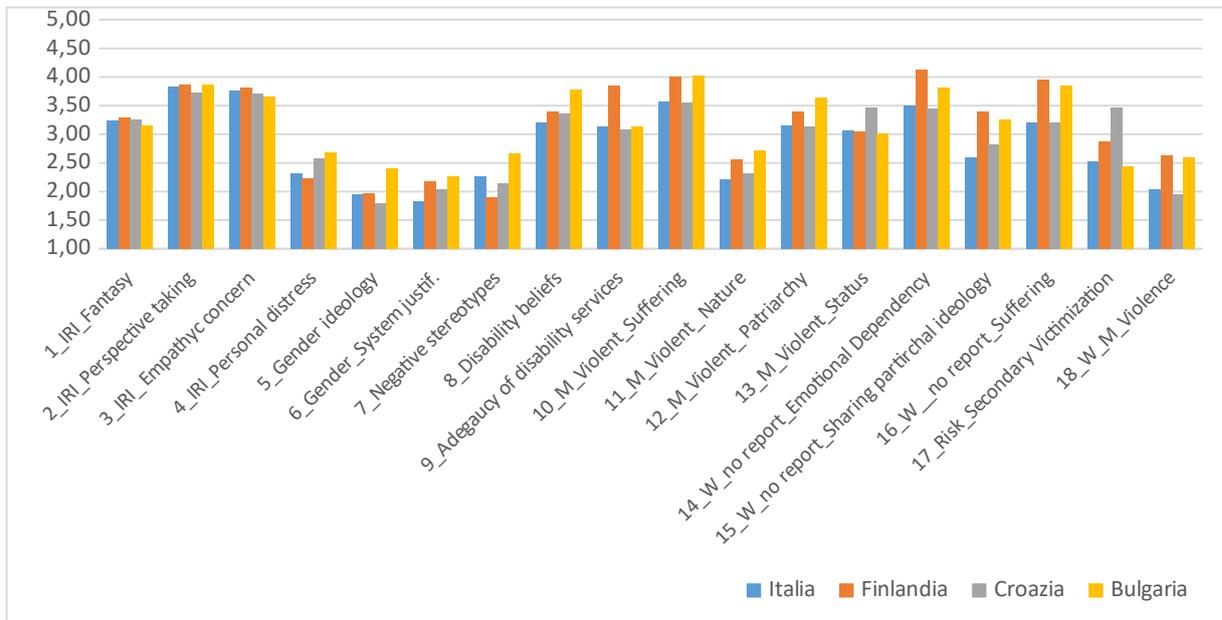
The comparison of the answers given respectively by the UTP (fig.1) and by the TP (fig.2) revealed substantially similar profiles across the 4 countries. In fact, looking at Figures 1 and 2 it appears that, with very few exceptions, the answers proposed by the participants of the different countries are all or above or below point 3 of the response scale: that is to say that, with respect to each dimension, the participants of the 4 countries all tend to agree or disagree. This first result seems to give credit to the European policies implemented in the last decades, since participants, whether trained or untrained, expressed a substantially shared understanding of gender-based violence, regardless of the socio-political histories and cultural backgrounds that may distinguish each individual nation.

Fig.1 Untrained Professionals (NFP): Response profiles in the 4 countries



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Fig.2 Trained Professionals (FP): Response profiles in the 4 countries



A consistent similarity also emerged from the comparison, regardless of the country of origin, between the responses of the TP and UTP: in particular, regarding the representations of gender roles, relationships and violence and in relation to the reasons that can explain male violence, mainly attributed to a previous state of suffering.

Participants therefore tend to attribute male violence to contingent and individual circumstances (previous suffering) rather than to cultural and social explanation systems. This tendency is also reflected in the participants' beliefs about the reasons why women do not systematically report violence. Again, participants were more likely to attribute women's reluctance to individual aspects, resulting from their status as victims, and less to factors related to power and the difference in status between men and women (e.g., patriarchy). Noteworthy is the result on the dimension of assessing the risk of secondary victimisation. With the only



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exception of the Croatian TP, all the others trained and untrained participants countries tend not to recognise this risk. In other words, they do not consider that the victim of violence risks being re-victimised as a consequence of reckless interventions proposed by the operators.

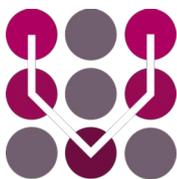
TP, on the other hand, differ from their untrained colleagues in expressing a more equal gender ideology and delegitimising the asymmetry and inequality of gender relations more than UTP. They are also slightly better equipped to deal with personal distress than untrained professionals.

Another difference between TP and UTP appeared in relation to the issue of disability and the adequacy of dedicated services. TP seemed to be more aware of the risk of victimisation of women with disabilities and evaluated existing services more positively than UTP. Considering the whole sample, there was also a slight difference between the trained and untrained participants on secondary victimisation. However, this difference is not very significant as none of them recognise this topic as a main issue in interventions for victims of violence.

THE PROJECTIVE INTERVIEW: EMOTIONS, IDENTIFICATION AND ATTRIBUTIONS

The projective interview method consists of a set of techniques aimed at developing a deeper understanding of behaviour in specific situations. These techniques, developed in the field of clinical psychology, allow participants to 'project' their thoughts into someone or something other than themselves. A major advantage of Projective Interviewing is that it leads participants to reactivate their past experiences. It allows them to access and report emotions and motivations that may not emerge when interviewing techniques that trigger more rational responses are used.

The procedure used in this context consisted of the selection of three short video sequences (total duration: 4 minutes 30 seconds) presenting an alleged victim of violence, welcomed by



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different professionals. The first clip shows two detectives (a man and a woman) welcoming the (still alleged) rape victim shortly after the (alleged) event. The second clip shows the reception of the same rape victim by a social worker working in a specialised centre. In front of the clearly disoriented and shocked victim, the social worker recites a perfect and detailed list of all services available in the centre. In the third clip, the woman detective accompanies the victim home and tries to provide her with the necessary support. In particular, the detective decides to provide the woman with her personal telephone number. After each clip, the professionals were asked the following questions:

- 1) List three emotions (3 emotions referred to you and 3 emotions referred to the victim) that you experienced while observing this scene. Which is the strongest and why?
- 2) In your opinion, are the operators' behaviours adequate or inadequate for the purpose of welcoming the victim and why?
- 3) Do you find common points or differences between your way of working with women victims of violence and the protagonists of these videos? Which ones?

The overall results reveal that, in all three situations (clips), the FPs and PNFs expressed significantly more emotions related to themselves than to the victim. In particular, for the first clip, the terms most frequently used to describe themselves were sadness, anger and empathy, whereas those referring to the victim were shock, suffering and traumatised. The comparative analysis between TP and UTP reveals that empathy and frustration characterise the corpus of words related to the self-proposed by TP while helplessness and sorrow characterise those proposed by UTP. No distinctions appear between the corpora of words produced by TP and UTP in relation to the emotions attributed to the victim.



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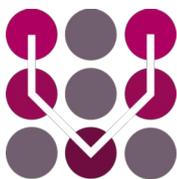
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The first observation concerns the use of the term empathy. The assignment was to describe emotions felt, but empathy is not an emotion, it is the ability that allows us to access the emotions of others. In other words, UT say they "feel or understand how the victim feels" - they are empathic - but they do not say, or cannot say, exactly what they feel. PFs also describe themselves as angry and frustrated. Therefore, it seems that training has activated professionals to be empathic, even if they do not always experience it. However, the tools and competences they have acquired seem to be insufficient to reassure them that interventions can be implemented to calm their anger as it breeds a state of frustration.

In the first clip, the emotions referred to by the victim are, compared to the other two, the most numerous (confusion, shock, fragility, pain, suffering, loneliness, etc.). We note that none of the interviewees described the victim as willing to be helped and to cooperate with the police, as evidenced by her behaviour.

In the second clip, in front of the very protocollar social worker, the professionals attribute many emotions to the self (satisfaction, empathy, sadness, compassion, anger, relief, hope, etc.) and basically only the emotion of confusion to the victim. The responses of the TP are characterised by the terms satisfaction, anxiety and contentment, while those of the UTP by pity and acceptance. There is no difference between the responses of TP and UTP in describing the victim.

It is worth dwelling on this result. In this clip, the social worker recites a series of information without making any effort to make it accessible to the person in front of her. The victim appears stunned and bewildered by the proposed discourse. Promises are made, but no one asks her what she might need at the moment. It is evident that the feeling of satisfaction expressed by the participants, and in particular by the TP, cannot derive from the effectiveness of the intervention of the helper. It is much more likely that this sense of satisfaction



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corresponds instead to the satisfaction of the professional's needs: to appease the urgency to intervene and therefore her own "anger" (the one expressed in the first clip). The practitioner's doing appears to take priority over the actual consequences of this action.

Finally, in the third clip, when the female detective accompanies the victim to her home and the victim appears to be in a state of profound loneliness in spite of the promises previously made by the social worker, the TP describe themselves as anxious and sad, while astonishment characterises the UTPs' responses.

Faced with the policewoman's choice to leave her private telephone number, the professionals are rather strict in judging it inappropriate.

Also in this case there are no differences between the answers proposed by the TP and the UTP in describing the emotions attributed to the victim, which mainly concern the sense of loneliness and shame.

These results lead us to reflect on the discrepancy between intentions and actions that often characterises aid relationships. Professionals seem to be much more attentive to their own feelings and needs than to those of the victim. In fact, regardless of their previous training, they are much more able to describe themselves than to describe the victim. While TP and UTP differ to some extent in describing the self, they do not differ in describing the victim.

3. Detecting some good practices throughout Europe

As already mentioned, taking into account the extensive literature on the topic of women victims of violence on the one hand and on disability on the other hand, we expected to have access to substantial information on women with disabilities who are victims of violence and on the consequent training of professionals for them. Based on this literature we should have selected the critical issues, challenges and needs that specify these trainings. Unfortunately, as



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we noted above, the literature addressing the issue of how to train professionals to support victims of violence is underrepresented and the literature considering women with disabilities is practically non-existent. The project also planned to collect information from the websites of the European institutions dedicated to violence against women and/or women with disabilities. But also in this case, the results of the first research appeared to be unfruitful and very confusing.

We turned, then, directly to the "Wave Network" and to the EDF (European Disability Forum). Both the Office Administrator of the first and the Human Right Officer of the second informed us that they have no specific projects or programs on this issue. Both of them, however, suggested that we get in touch with some centres located in different European countries. At this point, we have proceeded on two levels. On the one hand, we got in touch with the indicated centres and/or searched for information about them. On the other hand, we attempted a systematic search for online training material on the subject. The only very valuable data bank, despite not being immediately identifiable, is The Daphne Toolkit which archived projects funded between 1997 and 2014.

For the following years we proceeded in a somewhat more random way by looking for material produced in the framework of more recent projects and available on the net. Finally, we consulted the two reports produced by GREVIO for two of the partner countries of this project (the only ones available). The aim was to see how much the topic of our interest was considered in those documents.

At least as far as we could find, a substantial dichotomy could be observed at European level between institutions and programmes dedicated to gender-based violence on the one hand and disability on the other hand. In fact, as previously described, it has been possible to find only few realities that deal mainly with gender-based violence that organize or participate in projects



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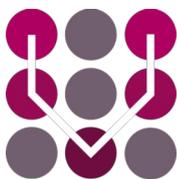
aimed at disabled women or implement training for operators on this issue. As we have seen, even in the pages of GREVIO's reports, **disability is mentioned in a few lines** and mostly together with other conditions of vulnerability.

The 5 projects identified in the Daphne database are mostly aimed at **working directly with women and girls** (or young people in general) with disabilities, for, ultimately, a one-to-one intervention. Only a part of the training in these projects marginally involves adults.

Explorations of websites dedicated to gender-based violence show that they are designed for native and non-disabled women. Therefore, a first important need emerges: existing websites for women victims of violence should be enriched with information available in forms accessible to different forms of disabilities and in the non-native languages most represented in the community. Every disabled woman in need should immediately and easily find all necessary information to get help and protection. Dedicated centres should juxtapose ordinary modes of communication with facilitated modes such as, for example, facilitated reading systems, audio guides, videos with explanations in sign language. Another limitation that constitutes an obstacle to seeking help is that the information available on websites is often only offered in the native language. A disabled woman may be a victim of violence and an immigrant, with a limited command of the language of the country: conditions must be put in place so that this woman can also find a way to request the necessary help.

Specialised centres. As the pandemic did not allow us to visit the identified European Centres, we reached them by web call or telephone.

The questions we asked the contact persons/members of the centres also included a description of the training courses they offer to their operators. The information given below is therefore that provided by the contact persons of the associations who accepted the interview.



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ASSOCIAZIONE DIFFERENZA DONNA (ROME)

<https://www.differenzadonna.org/>

Differenza Donna (DD), since its establishment in 1989, has been committed to "fight violence in Italy and in every other country, convinced that women can only be a great social resource when their rights and dignity are fully respected". DD's mission is to support every woman to become economically independent, influential, rich in dignity and wisdom. As a strategic tool of intervention, DD has chosen shelter houses, conceived as places of protection, empowerment and life redesign for women and their children who are victims of violence. DD has long been committed to combating violence against women with disabilities, having for over six years a specialised division dedicated to this issue. In recent years, DD has been working on projects and initiatives to raise awareness among social services staff, who are too often deeply prejudiced against people with disabilities. At the same time, the association has also dedicated itself to raising the awareness of women and girls with disabilities, having found that many of them are not aware of the existence and functions of Anti-Violence Centres and Refugee Houses or that, in some cases, they cannot reach them or ask for help on their own.

The Association has also created the National Observatory on Violence Against Women with Disabilities to collect and present data on this phenomenon every year in November. Data collection is carried out through questionnaires, projects and specific focuses. The elaboration of the results allows a better understanding of the mechanisms of violence, developing reflections that will make the tools to fight violence more effective. According to DD, it is particularly important to collect the testimonies of survivors, to understand what cultural barriers, stereotypes and prejudices they encountered when reporting violence. The Observatory also aims to make an important contribution to a cultural change that leads to a



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new way of thinking about social policies: a systematic and scientific approach to data collection and analysis is indispensable in order to more effectively design and implement gender policy interventions and to monitor their impact on quality of life. One of the objectives is also to be a tool for dialogue and networking among the realities involved in this issue, favouring comparison, exchange of information and collaboration.

The intervention and training methodology proposed by DD is rooted in feminist thought and is based on three main elements: self-awareness, starting from oneself, centrality of bodies. The proposed training courses can be developed at different levels:

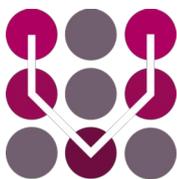
- Training to their member, the future activists, the women that will work in centers;
- Training to the women who want to know better the phenomenon of gender violence and that will be the voluntaries in their centers;
- Training to other Anti-Violence Centers;
- Training to professionals, public bodies, companies or other associations (example: doctors, nurses, psychologists, police...).

The training for future activists lasts 9 months, once a week for 3 hours and at the end of the training there is a month of internship next to the senior workers.

Training for volunteers lasts 3 months, once a week for a full day (6 hours).

Trainings for other centres or professionals are agreed with the requesting institutions according to the needs of the situation.

The contents of the training are: analysis of the phenomenon of violence against women, what violence means, analysis of data on gender-based violence, multiple discrimination, intersectionality, laws.



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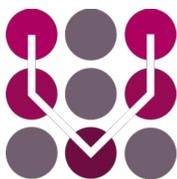
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Concerning staff training, the objective is to give the ability to assess the case of violence by putting it in the socio-political and cultural context.

Trainers are members of the association with different professional backgrounds, such as lawyers, psychologists, social workers. Usually, trainers are the most experienced members of staff, but to ensure that competences are transferred within the association, each senior trainer is supported by a junior figure.

The training is face-to-face, workshop-based and experiential. A lot of work is done on concrete and real experiences and stories. As Rosalba Taddeini (head of the Differenza Donna Observatory on violence against women with disabilities) said, the assumption is: 'if you feel that you too could be a victim of gender-based violence, you have a very different response than thinking that gender-based violence can happen to a generic person who is far from your perspective and feeling; if you can make that story feel a little bit yours, a little bit close to you, that trainees feel part of it and respond'.

During the training it is important to give information about "difference". Every woman is the bearer of her uniqueness and of her existential differences at the same time, such as those arising from being a migrant woman, a trafficked woman or a woman with disabilities. According to DD, for example, it is absolutely necessary for a practitioner to be aware of the fact that, in all likelihood, during her education and growth the disabled woman will have been led to think and represent herself first as a disabled woman and only in a subordinate way as a citizen. Society's expectations of her, the expectations she may have of society, her role as a woman, her place as a citizen will have been derived, first and foremost, from her disability. If the operators are not deeply aware of these premises, they risk, as unfortunately happens very often, to reproduce exclusion and marginalisation: instead of talking directly with the woman,



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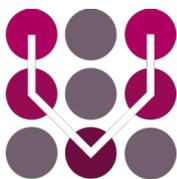
they shift the communication and interface only with the people who accompany and assist her. The woman becomes the object of others' discourse, her speech is disqualified and she is confirmed in the fact that she cannot be nor be considered a subject of right in all respects.

Before starting to work on disabilities, the members of the association did an internal training focused on their own bodies, starting from and sharing their personal experience. The members are women with different stories and situations (disability, migration, victims of rape, genital mutilation) and they share their experiences. Difference is their wealth, as the name "Difference Woman" says.

All trainings are fee-paying. Funding can come from private individuals (women who want to become workers or volunteers of the association), from associations, companies or public bodies for training in those realities. At the end of the training each trainee receives a certificate of participation. Before the COVID pandemic all trainings were in person, during the COVID block all trainings were transferred online. At the time of the interview (summer 2020), trainings were mixed: part was online and part in person.

Usually, when professionals are employed by an institution, they attend training during their regular working hours. As far as possible, their participation is voluntary, but it may happen that they are "mandated" by their institution.

The role of the network of professionals is particularly important in cases of disability: doctors, nurses, psychologists, police, social workers. Without a network, women with disabilities cannot get to the anti-violence centre to ask for help. There is a problem of accessibility, but as Taddeini said, 'it is not physical accessibility but mental accessibility'. It means that if a woman with disabilities is considered by social services, for example, 'a disabled person' and not 'a woman', the specific gender-based violence is underestimated and the woman encounters further victimisation. For example - an example used during the training



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to focus on accessibility - the association found out through research in a small town that a girl with Down's syndrome had had 13 abortions in 13 years.

It is clear that in this case the disability completely concealed the girl who bore it: the family, the social worker, the health care personnel, none of them bothered to ask about this girl's experiences, who her sexual partners were or, whether these relationships were voluntary or suffered. No one had ever stopped to think that 13 abortions in 13 years could hide serious violence. No one had ever thought that this woman, this 'woman', not this 'disabled', but 'this woman' perhaps had some inherent problem of sexual exploitation or, perhaps, abuse in the family.

Training for institutions or associations is only the first phase of DD's project. DD aims to develop, starting from the training, stable channels of contact and communication over time in order to allow trained operators to easily turn to DD whenever they find themselves in difficulty in the management of a case. DD offers support in identifying the most appropriate intervention strategies and facilitates the activation of the service network.

NINLIL (WIEN)

<https://www.ninlil.at/zeitlupe/index.html>

<https://www.ninlil.at/kraftwerk/index.html>

Ninlil is a counselling organization for women with disabilities. They have two areas of work, one does peer-counselling (*Zeitlupe*), and the other one (*Kraftwerk*) is specialized in sexual violence against women with learning disabilities.

So, they are a specialized counselling center for women with disabilities who have experienced violence. *Zeitlupe* is the first peer counselling center by and for women with disabilities in Vienna aimed at encouraging other women with disabilities to realize their



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wishes, needs and dreams. They usually consult women and girls with disabilities, friends or relatives and individuals or teams from the everyday life of women with disabilities (e.g. caregivers, supporters, personal assistants, etc.). Inside the area *Kraftwerk* a lot of empowerment seminars were organized. The goal of the Ninlil seminars is the prevention of violence against women with learning difficulties or multiple disabilities, based on the strong belief that violence can only be stopped, if these women develop more self-determination in their everyday life. Their experiences, needs, and desires are the focus of these seminars. The organization includes the views and opinions of these women in its planning process by: (1) using feedback-sheets from the seminars as a starting point for developing new seminars or deciding which seminars will be offered again; and (2) collecting direct and indirect feedback to find new topics. The various approaches enable the participants to have individually structured empowerment experiences. Further, the seminars are kept small, each with up to just seven participants and two seminar leaders, so that every woman, regardless of her disability, has plenty of time and space for discussion. The website, although only in German, is designed to be used for women with disabilities. In the "help" section, in fact, it is possible to find all the indications to access the areas of the site itself, through facilitated commands of the pc keyboard.

Ninlil's employees organize trainings for professionals once or twice a year. The target group of their trainings are professionals who work in institutions for women with disabilities, but they also do such trainings for women who work in counseling for women victims of violence and women with disabilities.

Trainings last one to two days and have a theoretical and practical part. The theoretical part consists of defining violence, specifically sexual violence, explaining the meaning and different phases of sexual violence, instructing professionals on how to help women to stop sexual



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violence during the initial phases, and teaching them about different ways to empower women with disabilities during their day-to-day life. The second, much bigger and much more important part of the training, consists of analyzing real-life cases and discussing topics suggested by stakeholders. An important activity of this part of the training is practicing problem-solving of analyzed cases. That's the part where professionals actually learn to recognize cases of violence against women and to act efficiently and appropriately. Ninlil's employees are aware of the importance of theoretical education, and that's why all of their trainings have a theoretical part, but they strongly believe that practical exercises and solving real-life cases are much more effective tools in trainings for women with disabilities who are victims of violence and professionals who work with them. Trainings are held by professionals who work for the Organization, and after attending the trainings, attendees are qualified to be multipliers.

Ninlil's trainings have various purposes, depending on who are the beneficiaries of the trainings. If beneficiaries are professionals who work with women with disabilities who are victims of violence, the main focus of the training is to teach professionals to recognize women's behaviors that can be connected to experiences of violence and to learn to react appropriately and efficiently.

On the other hand, if trainings are meant for women with disabilities, their concept is different. Trainings for women with disabilities or specifically women with learning disabilities are created and organized in a way to empower these women and teach them to deal with real-life situations.

When trainings are organized for women with disabilities, they are free of charge. In other situations, when they're meant for professionals, the price varies depending on Ninlil's budget



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and the attendee's budget. After attending the trainings, the stakeholders get an informal certificate. Most of trainings are founded by the City of Wien or the State.

The biggest issue about the training's organization is the insufficient attendance of professionals, which sometimes make it impossible to carry out trainings. Many professionals who work in the mentioned field are often overloaded with their everyday work, and getting an additional education about violence seems unnecessary to them. Apart from being overloaded with work, many professionals are also not aware of the issue of sexual violence against women with learning disabilities or other relevant topics concerning these women, and think that they don't need additional education in that field. Their opinion usually changes during trainings and they leave the training satisfied with the knowledge and experience they gained during trainings.

However, Ninlil employees found a great solution to this issue by cooperating with the school that educates operators who work in relevant fields. Ninlil managed to achieve cooperation with the mentioned school, and that cooperation gives Ninlil the possibility to organize one or two trainings or seminars per year, on which they can briefly present their work and the topic of violence against women with disabilities.

Ninlil's employees tend to hold their training sessions in person because in such a delicate topic every element of communication is important. These trainings are not just about sharing information, but also about getting in touch with inner feelings and experiencing practical exercises.

Ninlil's employees have not found a solution in case of a future lockdown caused by the COVID-19 pandemic. If possible and needed, they would like to find bigger spaces for their trainings.



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Elisabeth Udl, the woman who's responsible for the work of the entire organization, continued organizing trainings in person. From the beginning of the COVID-19 pandemic, since the time when the interview with Elisabeth was held, she already organized workshops for students regarding the topic of sexual violence against women with disabilities. Those workshops were held in person, but in comply with all the prescribed epidemiologic measures. Elisabeth and other Ninlil's employees believe that if trainings are organized in an online form, they lose too much context.

FUNDACIÓN CERMI MUJERES (MADRID)

<http://www.fundacioncermimujeres.es/en>

The Foundation is a non-profit organization whose main objective is to favor the conditions for women and girls with disabilities, as well as women and mothers who assist persons with disabilities, to enjoy fully and on equal terms all the human rights and fundamental freedoms. The Foundation was born in 2014 from the concern expressed by a large part of civil society organized around the gender inequality that also occurs in this sector of the population and the need to deepen knowledge and articulation of answers to these situations of discrimination. The Foundation defends the effective equality of women and girls with disabilities from a human rights perspective, applying the content of the Convention on the Rights of Persons with Disabilities, with special emphasis on the principles of non-discrimination, equal opportunities, inclusion in the community, independent life and positive action and in turn promoting the individual and collective empowerment of women and girls with disabilities. The Foundation aims to give continuity to training programs and promotion of the human rights of women and girls with disabilities, in the field of social organizations, public administrations and universities. The general objective of this program is to strengthen and develop the skills of



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motivated and committed students from various professional disciplines who wish to specialize in human rights, disability and gender equality issues, offering the opportunity to put into practice and develop their knowledge in a real working environment and facilitating their subsequent integration into the labor market. In addition to the university itself, these internships can be carried out in collaborative bodies, such as companies, institutions and public and private bodies at national and international level. Very interesting and useful is also the development of a digital library in order to promote the knowledge and documentary base related to the global reality of gender and disability. The goal of the foundation is that everyone, regardless of disability, age or access to the web by unconventional technologies, can navigate the pages of this website without encountering difficulties of access. To this end, a number of features have been implemented that allow people to access all web content more easily such as the visual characteristics of the portal (font type, font and background color, etc.), font size, clear content structure. Website is available in Spanish and English.

CERMI Women's Foundation offers permanent training possibilities on-line and sporadic face-to-face courses. They offer women and girls with disabilities and mothers of children with disabilities at grassroots level training on their human rights and fundamental freedoms. They also offer training to relatives of people with disabilities and professionals working in organizations of persons with disabilities.

Thirdly, they offer specialist training for professionals active in different sectors, for instance law enforcement officials, social services, healthcare staff, professionals working in violence against women, etc.

Finally, they provide training and expert advice, among others, to public authorities (local governments, regions and national governments), public-sector bodies and universities. Some of the courses are offered through a dedicated platform and some are face-to-face courses.



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Currently and due to the pandemic, all our courses are provided on Zoom or other similar on-line platforms.

The trainers are the Executive Vice-President, the co-ordinator, the gender specialist, the senior consultant, the legal counsel, members of the Board of Trustees and other experts (both providing their time and services pro bono).

With reference to the trainees, since the outbreak of the pandemic their courses are open to a wider audience. At present they have participants from an average of 15 countries on their courses and courses for women and girls with disabilities are now open to all women from Ibero-America.

Regarding duration, their shortest courses last two hours, some are six hours. Normally courses are organized in two-hour sessions.

Generally, they offer courses every week. Courses for women and girls with disabilities take place every fortnight. All courses are free, however, their courses for specific professionals are often paid by the body contracting their services.

One shared example of the training scheme

To give just one example, they are organizing a course in partnership with the Spanish Royal Board on Disability which will run during October and November. This course involves six two-hour sessions and focuses on the human rights of women and girls with disabilities in CEDAW, the CRPD, the Beijing Platform for Action, the SDGs, the Istanbul Convention and through individual complaints to UN treaty bodies thanks to optional protocols.

The two-hour sessions are organized as follows:

30 minutes – keynote speech

30 minutes – questions and answers



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30 minutes – panel of experts

30 minutes – questions and answers

They fund the training through calls for proposals issued by public- and private-sector funding bodies.

After the end of the training course, trainees get a certificate if they run the courses in partnership with other bodies which can issue certificates. The Foundation have applied for official recognition as a training center because they cannot issue certificates in the name of the Foundation as yet.

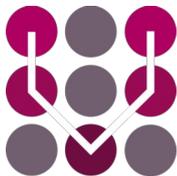
The experts from the system are motivated via social media to join such trainings. Participants from previous courses are motivated to return.

In some case trainees become multipliers in their working environment but this depends on the type of course. For instance, following the courses for women and girls with disabilities the trainees normally encourage other women and girls with disabilities and mothers of children with disabilities to attend.

FEMMES POUR LE DIRE, FEMMES POUR AGIR (PARIS)

<http://fdfa.fr/>

FDFA brings together mainly women with disabilities, whatever their singularity, but also men with disabilities and able-bodied women and men who share the same goals. It is a small association composed of 2 employees and a few volunteers. It was founded in 2003 by Maudy Piot, and was born as an association against the double discrimination (gender and disability) suffered by women with disabilities, for the promotion of their place in society and for their protection.



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In 2010, FDFFA organized a conference on "Disability and violence", at the end of which a questionnaire was given to the public. The results showed that 36% of women able-bodied stated that they had suffered some form of violence (not only IPV), compared to 70% of those with disabilities. The women of the association started to work on the topic, looking for information on the relationship between women/disability/violence. They realized that there was no official data available and that, at that time, the only institutional document, that mentioned the specific issue of violence suffered by women with disabilities was a resolution of the European Parliament, which stated that about 80 % of women with disabilities in Europe had been victims of violence or mistreatment.

After 5 years, the FDFFA has succeeded in launching a specific line of listening on violence which offers both listening and, for those who so wish, a legal, psychological and social assistance.

Since 2015, the service has been operating three half days a week. The reduction in hours is due to the fact that the service works thanks to voluntary work. With this availability, the two people employed can still guarantee the service. The most stable volunteers are women who have already retired. These women guarantee good constancy over time. Younger women, still of working age, are obviously subject to inevitable changes such as starting a new job, changing jobs, becoming pregnant, etc.

Selection and training of volunteers: the volunteers come mainly from the medical and health sector, but this is not a request of the association. For the FDFFA, the indispensable qualities that aspiring volunteers must have are "benevolence" and their ability to listen. According to the FDFFA, people must already possess these basic skills, without which further training or practice would be useless. For example, some psychologists and psychiatrists, who may have the necessary skills for this activity, have been more inclined to make a diagnosis



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than to listen. This orientation is an important barrier to welcoming women who ask for help and the possibility of maintaining contact based on trust.

The training takes place in 4 or 6 days with the following structure:

1. day: ½ day: Disability and different forms of disability

½ day: Focus on psychological disability. They do not deal with psychiatric disability because they do not receive appeals from these people. In these cases, it is the third parties who call.

2. day: Violence and psychological trauma.

3. day: Legal fundamentals: With regard to legal training, the FDFA has changed the content and objectives of training over time. Over the course of time, it has become apparent that through training could lead to false hopes for the women in care. For example, proposing to the woman a list of all the possibilities that arise without being able to define the limits and conditions for implementation may lead the victim to imagine strategies that will ultimately prove impractical. Instead, it is necessary for the volunteers to be able to give more "practical" information, knowing how to distinguish, for example, the modalities and consequences of an alert rather than a complaint and knowing which judge intervenes at a given moment in the process and with what purposes.

4. day: Techniques and difficulties of telephone listening.

The contents of the other two days may vary depending on the circumstances. In general, the topics concern.

5. day: Sexual assaults and "reporting" techniques

6. day: Knowledge of the resources available on the territory in order to orientate in the most effective way possible the women who ask for help.



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At the end of the training, the volunteers take part in the listening sessions together with the experienced operator.

The time of accompaniment varies greatly from person to person and also depends on how the first interventions are carried out. If the first listening sessions are particularly difficult, it is likely that the volunteer will need a longer period of time before she will be able to handle the calls independently.

Training takes place in a network with other associations. The training days are conducted by associations specialising in the topics of the various days and FDFFA in turn offers training of its own specific competence to the other associations.

In the coming months FDFFA will activate a website entirely dedicated to violence against women with disabilities, which will also serve as a documentation centre.

In 2019, FDFFA published a report on its 2018 listening activities. The document is full of information, not only on the number of calls, but on the types of people calling, the needs they express and the proposals made to them. (<http://fdfa.fr/wp-content/uploads/2018/06/Rapport-annuel-Ecoute-Violences-2018.pdf>)

4. Project re-organization due to the covid-19 pandemic

The emergency situation of the pandemic COVID-19 resulted in numerous changes to the project activities planned at the beginning. It was in fact necessary to ask the EU for an extension of the project because many activities were affected by restrictions and lockdown in the European Countries to limit the spread of the pandemic. Obviously, the activities that were most affected by the restrictions were all those that involved direct face-to-face contact. It was therefore necessary to think about what changes to make to training sessions, travel abroad, visits in presence and meetings.



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Most scheduled activities have been delayed and partners spent time to reorganize them and to understand the possibility, in each Country, to do part of the actions in person or not. It was also not possible to reorganize everything in a single moment nor to make long-term plans, because the restrictions changed very often, depending on the course of contagions. It was therefore necessary to be very flexible in the action and made a continuous update between the partners with respect to the progress of the work in each Country.

The main changes are related to the following activities:

1) Due to the impossibility of travelling abroad, visits to "best practices" (those centers that had been identified as excellences in Europe regarding the reception of women with disabilities who are victims of violence), were replaced by online interviews. Four of these institutions were selected and each partner had the task of contacting one of them and conducting an interview. The interview was previously created ad hoc by UNIPR. Each partner then proceeded to write a report.

2) Training and supervision sessions already underway in all countries have been temporarily interrupted. Resumed and reorganized when and where possible in presence, respecting the health indications, or totally or partially replaced with online meetings through the use of FAD programs. Especially for sessions based on active, functional and bodily activities in close proximity to others, characteristic of the SAMK and in part of GIOLLI/ACAV methods.

3) International Training and Final Conference have been converted to online mode. The Final Conference was originally planned in Bulgaria, but for some organizational difficulties, the consortium proposed to move it to Italy, especially because the situation of spread of pandemic had seemed, at one point, to come worst in Bulgaria. In the end, however, given the



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number of infections throughout Europe, it was decided to organize everything online, to avoid movement of people and close contacts.

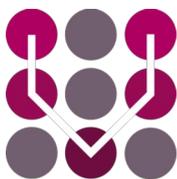
4) Master or Course about Gender Violence and Classes at University in Finland and Italy were transformed in online course.

With respect to the individual experiences, each partner has expressed its own difficulty in carrying out the project in this uncertain period and in managing all the critical issues.

Every partner highlighted the difficulty with respect to the participation of professionals in the proposed activities (some training sessions and post-test data collection). In fact, most professionals (healthcare professions and social workers) were overloaded at the time of the pandemic of COVID-19. In Bulgaria also the police were fully engaged with the public protests.

However, the restrictions due to the pandemic appear not to have resulted solely in obstacles or in negative consequences for training pathways. In fact, as pointed out by the Italian partners (ACAV and GIOLLI), the reorganization of activities provided them some resources. For example, during the Covid pandemic they were able to conduct supervision team meetings not only during training moments but in dedicated “spaces” with online platform. Participants seem to have really appreciated the possibility of being able to meet each other during this very stressful time. These online meetings were a moment to continue to work on the group, to see each other's and to continue to discuss about cases but also about their personal experiences.

As Dr. Arianna Gatti (ACAV) said: facing a relationship with a woman which is a victim is stressful, it's a stressful kind of relationship because a lot of emotions are in circle between the woman and who is trying to help her. So a part from the normal stress and the normal emotions



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due to the relationship, we also had the stress of the pandemic. All the relationship changed from a mode face-to-face to a digital one, which was another element of stress for everyone.

So, during this period of time they try to give the multipliers also other “instruments” for their work, for example they talked about basic communication issues translated into the digital mode like: *how can you express your emotions with a webcam? How can I be inside the relationship even if I'm not there and not present? It takes a lot of time to connect, sometimes we do have connection problems so how can I still be there?* This period of time was in a way an opportunity to change their training and be present with the multipliers either way.

TRAINING COURSES IMPLEMENTED

The main characteristics of the training courses conducted by the 4 project partners (Italy, Finland, Croatia and Bulgaria) will be described below. The contents are derived from documents produced by the partners themselves and from various moments of discussion and exchange on the subject. So, what follows, represents the point of view of the trainers themselves.

1. Italian Training of Giolli Cooperativa Sociale and The Antiviolence Center of Parma (ACAV)

Italian training organized by GIOLLI and ACAV was composed of 7 meetings, each lasting 1 day (8 hours), from October 2019 to February 2020, once a month. Then there was a stop due to the pandemic and then the last 2 meetings in January 2021.



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The group was composed of 25 participants, including: police, health, social, educational, judicial system. While family doctors, pediatricians and judges were absent.

Participants were recruited through prior knowledge, and through managers. They were people well known by ACAV, so it was very easy to involve them.

The trainers consider some key elements for the success of the proposed training course.

The first element was represented by the attitude of the trainers in using two educational methods: maieutic and enhancing. Maieutic means “to give question instead answers” and is an approach that allows to create a good atmosphere, a good group, to valorize both the group and the individual experiences. Enhancing means to valorize the experiences of the participants, instead of judging, not saying to trainees “this is wrong and this is not good” or “you had to do it better”. Both methods are not routinely used in trainings for professionals on gender-based violence issues.

Concerning the specific method GIOLLI and ACAV used a kind of *meta-method*, that is a method under construction and not well defined. As Dr. Roberto Mazzini (GIOLLI) said, they didn't have a structured approach: GIOLLI was expert in Theatre of the oppressed and ACAV was expert his own methodology, but the combination of the two approaches was a new experience for them. They invented, in some way, the method during the process; they didn't have a kind of preparation completed from the beginning but they structured the interaction between the two approaches step by step.

The key points that, in their opinion, emerged from the process and are characteristics of their method are many:

1) *Alternation in the management of the group*: so GIOLLI and ACAV based on the specific skills work, in the same day, alternatively on the group. So there was a sort of



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combination, in which they tried to combine the two approaches, each one with the specific competences. Sometimes happily, sometimes maybe less happily but they think it was fruitful anyway for both and for the participants too.

2) *Participatory approach*: they try all the time to use something that involves the participants actively by doing, by using exercises, role playing, Forum Theatre, questions and metaphors, that is the opposite of the approach “lessons and slides”. They sometimes used lessons and slides but the majority of the time participatory methods were used. They tried to **improve competences instead of giving information**. The professionals were expert, already trained many times so they didn't need information but they need to connect the information with their behaviour. The problem, challenge many times is: “I have a clear idea in my head but I can't apply it in the reality”.

3) *Focus on the globality body, mind, emotion*: they tried to move all these three levels, not only the brain but also emotions and body, in an alternation of cognitive and emotional work.

4) *Inductive method*: this is a method that starts from experiences and arrives to more general reflections. They started many times from the experience of participants and instead of bringing to them trainers' experience, they started exploring, questioning, demanding the experience of the participants themselves. They used questions like: “*what do you think?*”, “*how do you feel?*”, “*what did you experience in your work?*”.

5) *Attention to both the emotional aspect of the group and the individual*: they paid specific attention to this aspect, by giving voice to the emotions, through the use of exercises. There



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was more work on participants, in order to explore their emotions and their capacity of being empathetic in the relationship with the victim.

The use of Theatre of the Oppressed in training programs

Italian partners used the Theatre of the Oppressed, believing it to be a suitable approach to the advanced training of operators, because it helps to develop not only knowledge but above all skills and stimulates the change of erroneous attitudes.

The reasons are many and based on the characteristics of theater in general and that of Augusto Boal specifically.

As for the theater in general, it offers training many exercises that are useful to create a relaxed and creative atmosphere, to share emotions, to develop sensory and perceptual skills, to become more aware of verbal and non-verbal communication.

All this can strengthen the communicative-relational skills of the operator who welcomes the woman victim of violence and increase her awareness of the here and now.

Some theater works on the "presence" or the acute perception of what is happening in each moment, trying to "put in brackets" the rationality.

Other exercises develop creativity, which in more everyday terms, means flexibility in responses, the ability to proceed into the unknown without fear, trust in one's own intuition. It seemed to trainers a useful dimension for the operator who relates to the victim, with the help of protocols, but without them becoming cages or closures of communication.

The theater also works on the characters, so participants experience the possibility of being other, but also to identify with roles never experienced, thus giving the opportunity to see things from another point of view and feel the emotions that we might experience in



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a given situation, even if fictitious.

What does the Theatre of the Oppressed add to this?

The key idea is the staging of the situation-problem, through an aesthetic translation of the same that goes beyond the simple reproduction by role-play. It is about representing the mechanisms even hidden and not to faithfully reproduce the appearances of reality.

When the group enacts a story, the process leads to choose a shared story; here there is the transition from "I" to "we" and the recognition of a common problem and common goal. All this increases the likelihood of greater group cohesion, which in turn allows for greater openness in recognizing one's own limitations and stereotypes, without which one cannot proceed to change attitudes.

We then move on to the staging, researching the problematic mechanisms through a group search, maieutically guided by the Jolly. This research increases the critical consciousness, the awareness of the complexity of situations, going beyond painting the world in black and white.

The third part is the representation in front of the rest of the group or another audience. In this phase, the viewer can recognize his or her own problem in the story and, taking advantage of the emotional-cognitive distancing from it, analyze it with greater breadth and depth.

Finally, the audience can satire on stage and replace a character to develop their own idea of a solution. At this stage, creativity and tactical and strategic skills, critical and productive thinking, as well as emotional involvement and desire for change, come into play.

The fictitious situation of semi-reality as psycho-dramatists say, allows you to play with it by discovering new ways, safely, allows you to experiment, even recognizing their limits and



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acquisitions that are still missing.

But the show is also a ritual moment of group that strengthens cohesion and also can push to take collective or individual operational decisions. As we know from social psychology, decisions made in groups more easily provoke individual changes.

For all these reasons, the space of theater and Theatre of the Oppressed in the training of operators working on gender-based violence should be widely extended.

Phases:

The 7 meetings of training were characterized by 3 phases:

- From 1 to the end: this phase started from the first meeting in October but of course continued alongside the whole process. The group was created and was so strong that they asked to continue under the Covid emergency. It means to breakdown prejudices, because there are a lot of prejudices for example between a policeman and the social worker or between a doctor and a nurse. So the objective was to create this group by lowering fears and prejudices;
- From 2 to 4: the aim was to investigate the critical issues that emerge from the process itself, without a predefined order, strengthening the necessary skills.
- From 5 to 7: to prepare professionals for the role of multiplier and experimenting with the role within the group. Trainers tried to provide them with tools and tips and everything to play this role. At the end of the training there was a moment where multipliers could experiment, in the



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group, in a safe space the capacity of leading the group with some activities related to the topic. The last two meetings were also on the topics of sexuality, rape and disability.

Contents

There is not a structured way. They started from one moment then they jumped to other content because this content seems to them very important for the group in that moment of the process.

1) The first meeting was characterized by gaming of knowledge, emotional sharing and exercise based on body images about a relationship between a woman and the violent man. Then there was a very important reflection about institutions because professionals belonged to different institutions. As Dr. Mazzini said, gender issue and violence issue are pertinent to each institution. Let's think about the police and school: how do they imagine violence? Police use violence while schools condemn violence, violence at school is not allowed, in police yes. There is also a gender issue: in police is mainly a man institution while school is mainly a female institution. So, there was this important debate and then the sharing of personal experiences that help at creating the identity of the group.

2) The second meeting started with the presentation of the results of UNIPR research. Then trainers presented an exercise with photos about women, in order to bring out the image of a woman who suffers and to reflect on the concept of victim as passive, abused or survivor, that are three different concepts of the victim. Then was introduced the figure of the unpleasant victim: the victim that is not collaborative so: *how to do? How to manage? How to have productive and positive relationships if the woman is not collaborative?*



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Then followed an exercise about colors as a metaphor about the relationship between victim and operator and the presentation of an individual form to be filled by the participants related to a specific case of a welcoming to a victim of violence. Operators had to write about these themes: *my feelings, what happened next? How could I improve my behavior?* Then reflection and listening to others' and self-emotions. They also spoke about secondary victimization. Finally, they made an exercise about stress management called the "four elements"

3) The third meeting focused on Differenza Donna, an Organization in Rome, that is a pilot Organization in the issue of disabilities and violence. Rosalba Taddeini presented a video with two true stories, followed by a discussion. Differenza Donna presented their own experience, the story of their research and creation of a methodology (going to day centers and associations, making workshops to raise awareness of violence, itinerant desk). Then was introduced the concept of disabled people with a specificity on women that is not educated to the maternal and one role so the awareness of violence is very difficult to be reached by this kind of women, because they are not considered as really, as a true woman. So, there are a lot of questions about this situation and then slide about the disability vs handicap, intersectionality of this kind of violence and some data. Finally exercises on empathy and metaphoric exercise about victims and violent people and then a story was told and staged and we created the Forum Theatre.

What is Forum Theatre?

Forum theatre is a scene with a problem not solved. Trainers do not teach people how to behave but they present people a problem and ask them to solve it by their own ideas or opinions. Then people enter the scene, one by one enter the scene, trying to



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solve the problem with their abilities. There is no judgement about this but there is a discussion about how to improve this intervention. So, every time the person comes and brings a little brick to create this kind of strategy to face the problem. So, Forum Theatre is an open session in which people can discuss but by acting, not only reflecting but also acting, so this implies the concept of *globality mind emotion and body*: people are invited with body, mind and emotion to solve the problem.

4) The 4th meeting was introduced by a relaxation exercise based on observation with the senses. Then trainers presented another important topic: the silence of the victim. What to do when the victim is silent? How to manage this event? How to deal with this? Topic that came out in the previous meeting. Then an empathy exercise (sculptor-clay), to feel the victim and Forum-Theater again with a scene prepared by ACAV on the unpleasant victim. They played it and professionals entered the scene, trying to have a positive relation with this kind of victim. Then the exercise of “the rainbow of emotions” in which they tried to create, by body images, a feeling of both the victim and the professional that try to solve the problem. Finally, there was a discussion about the specific needs of teachers because school is a specific venue where violence is not visible but indirectly, they can have an idea about the family in which violence can happen. At the end participants expressed the specific needs to be trained and then there was a positioning line about the desire to act as a multiplier. Trainer proposed questions like: *Do you want to be a multiplier? How much desire do you have about this?* They ask them to put themselves in a line and they did it. Then the finally mindfulness exercises.

5) This meeting was divided into two parts: in the morning they had another emotional exercise and then they made an exercise to invite people to identify themselves as a victim. They



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try to create this kind of capacity to identify ourselves as a victim and then to make an exercise in pairs: one was an operator and the other one was the victim; they played the welcoming of the relationship that could be in this case created.

The second part was about net creation: first they created four different places where there were four different institutions and one person (the victim) passed through the 4 institutions.

In this way trainers made visible the procedure used and the attitudes in different institutions. This is another point that emerged from the process, is not so well known by each institution what is done in the other ones, so that was a way to make visible what was not visible.

Then a moment with slides by ACAV on: types of violence, difference between violence and conflict, Walker's cycle of violence, exposition of the ACAV methodology on the welcoming of the victim. Finally, a discussion on the role of the multiplier and feasibility for each institution.

6-7) These last two meetings were also on the topics of sexuality, rape and disability.

2. Finnish training of SAMK (Satakunta University of Applied Sciences) - SomeBody® method

An important goal of the Finnish training, called SomeBody®, is to gain a feel for the professionals' own body awareness, emotional and social skills and, through this, increase their competence to confront victims of violence and use tools that enhance body awareness, emotional and social skills. The method consisted in the orientation days, focused on the tools of psychosocial guidance and psychophysical physiotherapy and their combination on: body awareness, self-image, breathing, relaxation and social interaction. The theoretical background and contents of SomeBody® method were principally based on: movement, breathing,



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relaxation, touch, personal space, body image, feelings and social interaction; professional guidance which promotes body awareness skills.

The training qualifies as a SomeBody® instructor and includes: 5 ½ training days (7 hours per day), practical group activity 8-10 times, written planning and impact assessment planning, implementation and written reporting. In particular, they organized two training groups, hence 12 meetings.

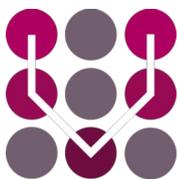
The participants have face-to-face education and after the third meeting they can start planning and implementing the SomeBody® group activity. The group implementation is done in pairs. After a 10-time group activity, the activities are evaluated.

The group was composed of 27 participants: workers from mothers and child homes and shelters, juvenile home and Girls' House. The recruitment of people was done through contact with The Federation of Mother and child homes and Shelters, The Finnish Federation of Settlement Houses, Federation of Mothers and Child Homes and Shelters Pori and Federation Settlementti Tampere. Via these connections they got participants also from Girls' House Helsinki and Girls' House Turku.

Training is based on three principles:

- 1) You can guide creditably the things you are willing to experience, face and do by yourself.
- 2) The key insights and skills needed to provide high-quality guidance for SomeBody® groups come through doing, experience and exercise (requires commitment and presence).
- 3) Start your own guiding after the 3-4th day of training.

Functional tools and tools based on experience are utilized in the training. The main idea of the training days is to give personal experience in applying tools related to SomeBody®



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method. Participants will also plan and initiate their own group guidance process, in which they will apply tools connected to Somebody® method to their work and evaluate their implementation.

This method aims to develop many skills in participants. Identification and understanding of bodily experiences, body movement and related feelings, thoughts and social activities. Knowing, identifying and guiding exercises that promote body awareness, awareness skills and social skills as part of supporting the well-being of children and adolescents. Planning, implementing and evaluating the Somebody® group activity.

In fact, after completing the training, the professional will be able to:

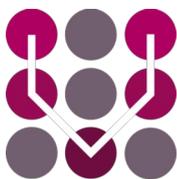
- specify and analyze information related to physical, mental and social functional ability in support of individual and group wellbeing
- specify and analyze how emotions and thoughts are connected with bodily experiences and movement, as well as social interactions and inclusion
- specify and analyze the most important tools of psychophysical guidance
- specify and analyze dialogical tools for psychosocial guidance related to the processing of bodily experiences

1st meeting:

- Themes: Orientation to Somebody® method and the training, self-image (physical me), body awareness, posture and movement awareness, interaction, relaxation

2nd meeting:

- Themes: Self-image (social me), body image, body image boundaries, breathing, feelings and social interaction, relaxation



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3rd meeting:

- Themes: Self-image (emotional me), body awareness, touch, feelings, relaxation. Presentation of the preliminary plan of SomeBody® group activity

- For the third day of training, each participant will consider the starting points, idea, main objectives, assessment methods and practical implementation of the SomeBody® group activity in their own operating environment. The main features of the implementation: meetings, main objectives of each time, main themes and ideas about exercises

4th meeting:

- Themes: Self-image (academic/cognitive me), breathing, voice, interaction

5th meeting:

- Themes: Complementary exercises, the summary of self-images, overview of the implementation and reporting of group activity

6th meeting:

- Themes: Presentation of SomeBody® group activities

An example of Somebody® exercise

Orientation: Orienting on yourself, moment, space and the others

“Sit on a chair and put your palms to rest on your thighs. The inhalation lifts the thumbs off the thigh and the exhalation relents them back to the thigh to rest. Sense a relenting sensation each time from the face, chest and the whole front of the body downwards. The movement of the thumbs is very small, the uplift is perhaps a millimetre or merely a vision of the thumb uplift. After a few repetitions, do the same with index fingers, then with middle fingers. Finally, make a lift with all your fingers at once and breathe a sigh of relief as you relent your fingers to rest.” (freely translated from the book Hengitys Virtaa by Minna Martin, 2016, p. 145)

Focus for a moment on listening to the sounds in the space, what sounds do you hear and



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find?

Now focus for a moment on looking at the colors in the space, what colors do you find?

Focus for a moment on looking at the shapes in the space, what shapes do you observe and see?

3. Croatian training of BaBe (Budi Aktivna Budi Emancipiran)

As described by the Croatian Partner, their approach is a little bit different than that of GIOLLI/ACAV and SAMK, they define their approach more “formal”. Their training lasted three days (6-8 hours per day): the first two days more theoretical and the last one more practical.

The group was composed of 25/30 participants including police officers, health workers, social workers, educational workers and professionals from the judicial system.

In the theoretical days, trainers were different professionals as experts of law and psychology and experts in working with violence against women.

They favored the use of the method of connection and open discussion in which participants met each other, talked, spoke, and socialized.

Participants are professionals from different fields, so very specialized in their job. What emerged was that, although they were very familiar with the specific tasks of their jobs, they showed little knowledge of the work of other professions. It was therefore necessary to start each training with explaining what does any field do. They described their work and also reported their issues and problems. To encourage discussion and confrontation among professionals, stimulus questions such as: “*Who am I?*”, “*What do I do?*”, “*What do I think about working with victims of violence?*”, “*What difficulties do I encounter?*”, “*What specific*



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difficulties during the pandemic?" were proposed. Croatian trainers try to teach all of them about the main methods about each professional field.

The third day was about practical exercises. The exercises were conducted primarily by psychologists, so the approach is more psychological, focused on the relation with victims. In this third day, the methodologies learned by GIOLLI were applied, namely the use of the techniques of maieutic and enhancing.

The key points were:

- Bringing professionals who work in different fields together
- Putting them in a less formal environment
- Giving them basic information about the procedure when working with women victims of violence
- Practical exercises on “How to approach women victims of violence?”, conducted by a psychologist
- Practical exercises on “What should we do in this situation?”, conducted by a lawyer
- Practicing case solving
- Practicing active listening
- Moderating panel discussions
- Making professionals write down the main issues of their cooperation and ways to improve the support system
- Particular attention to woman with disabilities and to elderly women.

Agenda of the training

1st DAY

- Lecture about the implementation of Istanbul Convention in Croatia



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- Lecture about the procedure in case of domestic violence/violence against women
- Launch break
- Case study/Problem solving exercises
- Panel discussion

2nd DAY

- Lecture about the psychological aspects of working WoV
- Lecture about the correct psychological approach to WoV
- Launch break
- Practical exercises on how to approach WoV
- Panel discussion

3rd DAY

- Practical exercises of active listening
- Writing down main issues of working with WoV
- Launch break
- Panel discussion moderated by an expert

They conducted basic, intermediate and advanced training and some sensitizations seminars. Finally, they also had a supervision meeting that went extremely well. Participants appreciated a lot this meeting because it was a moment in which to talk more informally, to exchange experiences with professionals from other fields about their issues and problems.

In the National Training, a less formal moment, they have tried to create a network between professionals, making them work together permanently, not only for the occasion of the



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training but for the future, so that they could more easily work together after the end of the course.

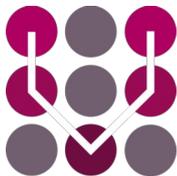
They had some problems getting people to the training because every professional (especially police officers and social workers) were full of work, especially because of the Covid situation. After their participation they were very satisfied about training and all of them want to continue the training, so we they have the same group of people every session.

4. Bulgarian training of Eyes on Four Paws Foundation (E4p) and Narodno chitalishte "Sv. Sv. Kiril i Methodij 1924"

The Bulgarian training aimed to prepare multipliers, to answer to their need of self-assessment of own stereotypes and prejudices. It was conducted by experts of Psychology and Disability issues, practitioners in working with VAW and inter-sector collaboration. This training was based on the basic principles of knowledge, direct experience, and enhancing of the group of participants. In order to keep in line with these basic principles, a variety of training methodologies were used, including short lecturing, open discussion, practicing and mutual learning.

The organizers/trainers identified the following phases and key points characterizing their training path:

- Bringing professionals who work in different fields together
- Establishing friendly and informal learning environment
- Providing basic information about the procedure when working with women victims of violence
- Practical exercise for active listening
- Providing basic information about the specifics of working with people with disabilities and specific problems of women and girls with disabilities



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- Presentation 'How to approach women with disabilities victims of violence?' prepared by a disabled trainer
- Practical exercise 'What should we do in a case where the victim of violence or feeling at risk of violence is a disabled woman?', conducted by a practitioner working with disabled people
 - Work in small groups on case solving
 - Moderating presentations of the small group work in the plenary
 - Encouraging professionals to describe the main challenges in their cooperation with other institutions and suggestions on how to improve the support system
 - Moderating plenary discussion

The training lasted 2 days (8 hours a day) and involved 23-27 participants including educational workers and psychologists, health workers (one of them still student), social workers in NGOs/ multipliers and lawyers. Police officers Instead, police officers were not present.

As described by partner, VIVIEN project in Bulgaria and the specific challenges they, as comparatively 'newcomers' in the field have faced are:

- Unwillingness of some institutions to send their staff to our trainings (they have their own training institutions)
- Hint of a kind of discrimination of an organization of disabled people as trainers
- Similar as COVID-19 took the time of our target group health workers, the lasting more than 6 months wave of civil protests took the time of the policemen
- Very shortened time for trainings due to significantly delayed International training of Multipliers done only at the beginning of the COVID-19 crisis



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- Lack of equipment for and expertise in running virtual trainings

Moreover, they traced the resources of this type of training in partners methods and their shared experience, in the project research and in the developing of global training tools for different professions.

Description of 2-full day activities of intermediate training

1st DAY

- Presentation of a summary of the good practices of the Italian, Finnish and Croatian partners from the previous International Training of Multipliers
 - Discussion on specific challenges when providing services to women with different disabilities. The importance of Active Listening.
 - Work in small groups – what you see as transferable to Bulgaria and why?
 - Practical exercises of active listening considering the specifics of different disabilities
 - Short presentation of the tool of Theatre of Oppressed and discussion to what extent the professionals and the services are prepared to serve disabled women and girls
 - Discussion on Forum theatre as educational tool
 - Workshop on the roles in the Theatre of Oppressed and its possible use in the training of professionals providing support to women with disabilities
 - Presentation about the procedure in case of domestic violence/violence against women and how different professionals and services are involved
 - Practical exercise ‘What should we advise and where should we direct to a disabled woman victim of violence or feeling at risk of violence?’
 - Case study session. Work in small groups on cases and problem solving



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- Moderating presentations of the small group work in the Plenary
- Closing plenary discussion

2nd DAY

- Presentation of Giolli's experience with Theatre of the Oppressed tool for raising the level of understanding of professionals about disability issues in cases of violence
- Discussion on what leads to Secondary Victimization
- Small groups work: what "stumbles" the professionals facing women with disability
- Presentation of the Finnish method of "Somebody" based on SAMK practice and the provided by the Finnish partner training materials
- Practical exercises on elements of "Somebody" based on SAMK training materials
- Plenary discussion on the possibilities to use "Somebody" in Bulgaria
- Presentation of Croatian experience and globally identified good training practices for different professionals based on Guidelines developed by the UN and WHO
- Work in small groups with work sheets based on global good practices guides
- Presentation in the plenary of the work of the small groups with discussions
- Presentation of a foreign good practice – Stay Safe East, the UK
- Session for describing the main challenges in the inter-sector collaboration with suggestions for improvement
- Session on self-assessment of level of preparedness to work with VAW and disabled
- Closing discussion moderated by a disability expert

Bulgarian partner chose to use, in their training, except the sample training materials provided from our partners from Italy, Croatia and Finland, also training materials and training



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guidelines from global organizations such as UN, UNICEF, WHO targeting specific professional groups as police, social workers, judiciary and teachers as well as to get our trainees acquainted with some foreign NGOs practices, identified by UNIPR in their desk research and other disability NGO such as Stay Safe East UK, recommended to us by the UK organizations identified for their good training practice by UNIPR.

Their presentation of the partners' methods and practices demonstrated during the International seminar for Multipliers in Bulgaria does not 'repeat' training as the trainees in their Intermediate training are predominantly teachers who were not involved in the previous seminar held at the beginning of the first wave of COVID-19, who were not encouraged to participate then due to fear not to transmit the new and unknown illness to their students. Thus, including these training materials in fact, they try to cover the gap in the training of the target group of the educators.

It's important to underline that educators in Bulgaria are also a very important target group, due to large minority of Roma students with disabled girls at risk of forced begging/stealing and forced early marriages. Through the participation though of single representatives of judiciary, health professions, NGOs we prepare multipliers to spread further their new knowledge in future trainings.

It is clear from the above description that the partners used very different methodologies from each other. However, it is possible to point out some similarities: for example, GIOLLI/ACAV and SAMK share the same attention on the aspect of working on the globality of body, mind and emotion and the attention paid to the groups' emotions. What also connects the work of all partners was the attempt to encourage the active discussion of the participants, the sharing of thoughts, emotions and difficulties encountered. Another common aspect can be



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traced back to having invited experts from different professional fields (psychology, health, law, disability, etc...) as trainers.

At the same time, however, very different aspects also emerge: for example, while SAMK is a very structured approach, with specific phases and specific exercises for each phase, the method of ACAV/GIOLLI created a sort of melting pot, of working in progress. They didn't start from a clear picture of their method but they try to combine both methodologies.

Another element that distinguishes the approaches is the importance given to theoretical aspects: while for the Italian partners theory is an element that comes afterwards, is not a key point, for Croatian partners was the starting point of the training.

5. New trainings- so what? post-hoc research

Measure of changes occurred in professionals after the training. In order to be able to evaluate the effectiveness of the training course, the participants were-administered the same questionnaire administered in the pre-test phase. In particular, the paper version was replaced with an online version translated in each native languages of partners, in order to make the compilation easier, due to the pandemic. On the other hand, it was not possible to administer the projective interview again, again because of delays, postponements and loss of participants due to the pandemic itself. In fact, as previously described, it caused many organizational problems for the project.

A first and fundamental consideration to make is related to the small number of subjects that it was possible to reach in this second phase of the research. In fact, if the sample of subjects tested before the training was composed of 794 professionals, only 102 took part in this second evaluation. Of these 102, only few had actually completed the pre-test questionnaires provided



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by the project. This is a first result, very important, that allows us to highlight a major methodological problem related to the recruitment of the sample and the design of tools for monitoring and evaluating the outcomes of the training course.

In fact, this data leads us immediately to reflect on how important it is, right from the initial project phase, to work on methodological structuring. As described in the guidelines, it is necessary to be very rigorous a priori in the recruitment of the sample and in the engagement of the professionals involved and of the managers of the institutions of provenance of the selected professionals.

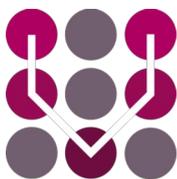
Despite the fact that these aspects had been given great consideration in the design phase of this project, implementation was very difficult. In fact, trainers struggled to apply the appropriate methodological strategies for monitoring data collection. All of this, as already widely described, was also influenced by the Covid pandemic.

Within projects of this type, it would therefore be necessary to plan and implement a "training" phase for the trainers themselves. In this way, they would be better able to implement useful strategies to guarantee the monitoring of the course itself.

The first result concerns the impossibility of adequately monitoring the course with reference to these aspects and therefore of giving continuity between before and after training.

As a consequence of this, it was not possible to make an analysis of comparison between pre-test and post-test, because of the small number of people who could be merged, i.e. who had actually completed the questionnaires both before and after the training. An analysis of this type on such a small sample would not have any statistical value.

The number of subjects is not sufficient, the samples are not representative, it is not possible to control either in terms of profession or in terms of nation of origin and there is no continuity with respect to the subjects involved.



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Thus, the only thing possible was a comparison between participants who had not yet participated in Vivien training (794) and those, albeit different, who had been part of it (102). We considered a time T1 (before vivien) as a sort of baseline. That was the existing, and now, what is it like? What direction do the investigated variables take in a group of professionals, after participating in vivien (T2) training?

It is important to note that, in describing the results, we will be referring to trends, to an idea of what direction the outcomes of participation in the training might take. Indeed, whether a hypothetical change is due to the training is debatable. However, what, without question, can be said is that, between T1 and T2 the training was there. In fact, the 794 participants had not participated in the training, while the 103 had.

Specifically, the mean scores obtained by participants before and after the training in the 8 dimensions of the questionnaire were compared.

The 8 dimensions considered in the questionnaire are as follows:

1-Empathy: ability to understand and respond adaptively to others' emotions (Spreng, McKinnon, Mar and Levine, 2009). We measured the cognitive dimension of empathy through *Perspective Taking* and *Fantasy* subscales and the affective dimension through *Empathic Concern* and *Personal Distress* subscales.

2-Gender ideology. Gender ideologies characterizes shared constructions of meaning and reality in a society and are generally conceptualized as "individuals' levels of support for a division of paid work and family responsibilities that is based on the belief in gendered separate spheres (Davis & Greenstein, 2009). The meaning is attributable to a "traditional" gender ideology, in which woman has a subordinate role with respect to man.



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3-Gender system justification. Gender system justification (GSJ) refers to the believe that differences between men and women in society are right, deserved and legitimate (Jost & Kay, 2005).

4-Negative stereotyping of women. This refers to the practice of ascribing to an individual woman or man specific attributes, characteristics or roles by reason only of her or his membership in the social group of women or men (OHCHR, 2019).

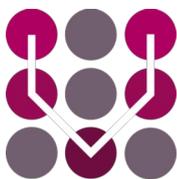
5-Beliefs on violence towards disabled women. This represents the operators' knowledge and believes concerning how to deal with specific needs of women with disabilities victims of violence, in particular the beliefs about why disabled women can suffer violence and the adequacy of services offered to disabled women victims of violence.

6-Motivations of male violence. We measured participants' belief on the motives that push men to use violence against women. Factor analysis on items revealed four motives: 1) male suffering/difficulty, 2) nature of man, 3) patriarchy and 4) status.

7-Motives for women's acceptance of violence. We also measured participants' belief about the motives that would women to accept/suffer violence from men. Factor analysis identified 3 factors: 1) female suffering/difficulty, 2) dependence and 3) patriarchy.

8-Beliefs about secondary victimization. Secondary victimization is the unresponsive treatment that victims of violence receive from social system personnel. It is the victim-blaming behaviours and practices engaged in by community service providers, which further the violent event, resulting in additional stress and trauma for victims (Campbell & Raja, 1999).

The values are shown in the tables below (Tabb. 1 and 2).



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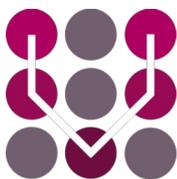
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Table 1. Mean scores and standard deviations of the 8 dimensions of the questionnaire before training (T1)

T1 (before VIVIEN training)			
	N	Mean	Standard deviation
Gender_ideology	794	2,069	0,605
Gender_SJ	794	2,247	0,683
Negative_stereotypes	794	2,238	0,529
Believes_disability	794	3,225	0,653
Adequacy of services for disability	794	2,870	0,642
Violence_M_suffering	792	3,747	0,648
Violence_M_Nature	791	2,628	0,845
Violence_M_Patrirchate	791	3,213	0,844
Violence_M_Status	791	3,124	0,767
Secondary_victimization	794	2,775	0,707
No_complaint_dependence	793	3,620	0,789
No_complaint_patriarchate	793	3,038	0,834
No_complaint_suffering	792	3,427	0,785
IRI_Fantasy	794	3,282	0,670
IRI_Perspective_Taking	794	3,737	0,503
IRI_Empathic_Concern	794	3,765	0,549
IRI_Personal_Distress	794	2,559	0,614



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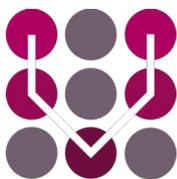
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Table 2. Mean scores and standard deviations of the 8 dimensions of the questionnaire after training (T2)

T2 (after VIVIEN training)			
	<i>N</i>	<i>Mean</i>	<i>Standard deviation</i>
Gender_ideology	102	1,849	0,503
Gender_SJ	102	1,795	0,557
Negative_stereotypes	102	2,310	0,585
Believes_disability	102	3,944	0,677
Adequacy of services for disability	102	3,203	0,561
Violence_M_suffering	102	3,850	0,642
Violence_M_Nature	102	2,139	0,812
Violence_M_Patrirchate	102	3,546	0,865
Violence_M_Status	102	3,461	0,785
Secondary_victimization	102	2,999	0,748
No_complaint_dependence	102	3,958	0,807
No_complaint_patriarchate	102	2,853	0,861
No_complaint_suffering	102	3,467	0,858
IRI_Fantasy	102	3,429	0,672
IRI_Perspective_Taking	102	3,854	0,455
IRI_Empathic_Concern	102	3,927	0,521
IRI_Personal_Distress	102	2,727	0,575





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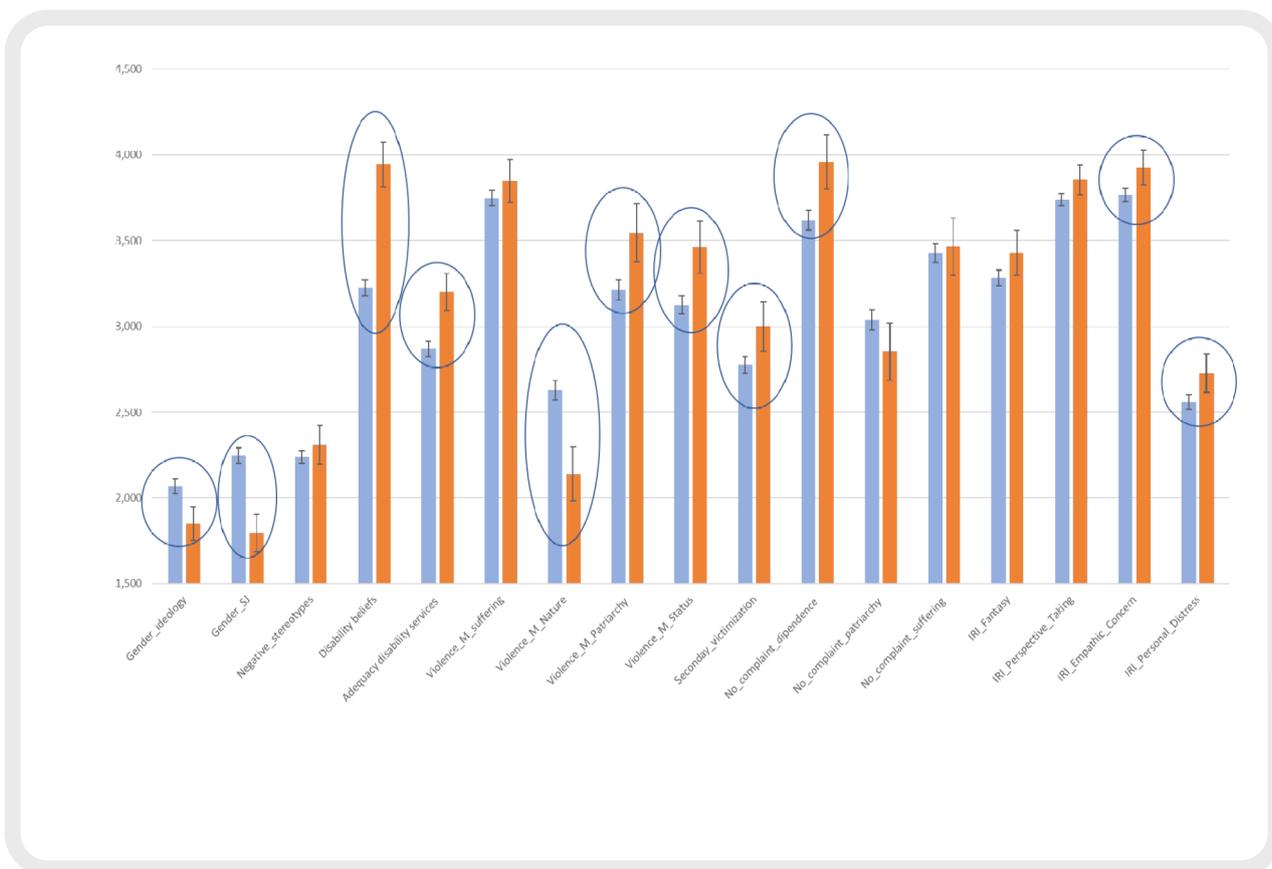
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Below (Graph. 1) we can observe a graphical representation of the comparison between the mean values, for each investigated variable, in the professionals before the VIVIEN training (blue) and after the VIVIEN training (orange).



Graphic 1. Mean scores of the 8 dimensions of the questionnaire at T1 and T2



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DISCUSSION

If the consequences observed were to be related to the training, this training seems to have had an effect on the variables being trained. In fact, it is possible to hypothesize that the training contributed to a change in the variables under investigation; we do not know to what extent, we do not know how strongly, but we can highlight how there were changes in the sample evaluated after the training, compared to that evaluated before the training.

Considering specifically the variables involved we can say that:

With respect to empathy, the scales referring to the emotional dimension of empathy (IRI_EC and IRI_PD) seem to have increased, rather than the cognitive one (IRI_FA and IRI_PT). More than the increase in the understanding of the emotional states of others, it seems that the "feeling" of the other's feelings has increased. This finding seems to confirm the effectiveness of the activities and methodology used within the training, which has provided an important focus on the understanding of the emotions of the victims by the operators but also and above all a work on their own emotional states.

In relation to the increase in both emotional dimensions of empathy, some reflection is appropriate. When an aid professional is encouraged to be more empathetic and to take on the emotional point of view of the other, it is plausible that he or she will feel more involved in the emotional states of others, and will also feel a greater burden of affection and stress. This could be caused by a communicative paradox such as, "You have to empathize with the victim," but at the same time, "You are a professional, so you can't afford to feel bad". This paradox is generated within a communication in which the helping professional is told to be emotional and empathetic, recognizing the emotions and suffering of the other but without being too



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emotional, not getting too involved so as not to lose objectivity and objectivity. When on the other hand, it is known that the emotional load of the other increases the emotional load of the professional and the inadequate management of this paradox can increase the symptoms of stress, in terms of depersonalization of the other and emotional exhaustion.

These symptoms, if persistent over time and associated with other specific conditions, could, in some cases, lead to burnout syndrome.

This result is a bit like an "alarm bell" that suggests that the work on increasing the empathic abilities of professionals, fundamental for the creation and maintenance of an adequate helping relationship with the victim, cannot but consider also the management of the emotional load of the professional himself. Since the increase of empathic involvement with the victim inevitably increases the emotional stress of professionals, it is of fundamental importance that professionals are provided with individual and social tools and resources that help them to effectively manage and regulate their emotional experiences and the stress related to them. This aspect should therefore be taken into consideration during the planning stages of a training program and also with a view to suggesting what improvements can be made to the service itself. Only in this way will it be possible for operators, to effectively manage personal distress due to a greater acceptance of the other person's emotional experience.

Another variable on which the training seems to have had a significant influence is the awareness of violence against women with disabilities. In fact, the professionals who took part in the Vivien training seem to show a greater awareness of this phenomenon, together with an increase in the perception of the adequacy of services for disabled women victims of violence. It is plausible that having had direct experience with this issue, listening to the experiences of women with disabilities who are victims of violence and the stories of professionals, trying to



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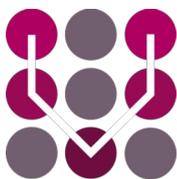
get involved in the first person in the management of this issue, has changed the awareness of different aspects of the issue itself.

The work of the trainers on the topic of secondary victimization also seems to have resulted in improvements. In fact, after the training, the professionals have significantly increased their awareness of the possibility that their actions may cause further harm to the woman victim of violence.

It also appears that gender ideology has decreased, meaning that professionals are less adherent to a traditional gender ideology, which assigns women a subordinate role to men. Coupled with this, lower scores were observed on justification of the system, indicating that professionals consider the social system within which they live to be less fair and equitable. In contrast, no significant difference occurred with respect to negative stereotypes.

With reference to explanations of male violence, there are no significant differences in the belief that men's violence is due to suffering during childhood, but the belief that men are violent by nature has decreased significantly, just as the belief that men use violence because of patriarchy has increased, i.e. because of a society that legitimizes male dominance and places men in a higher social status than women. The latter two aspects go hand in hand with the system justification: those who justify the system perceive patriarchy as just and males as having a higher status. Here, the decrease in justification of the system, thus claiming that the system is not fair, can lead people to believe that this system, which is not fair, characterized by patriarchy and status inequity, leads men to use violence.

Finally, with respect to the consideration of why women are victims there seems to have been less change, for example, negative stereotypes continue to be of the same intensity, as do the reasons why women experience violence or do not report. There was only evidence of an increase in the belief that women's failure to report is due to their dependence on men.



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With reference to the last-mentioned aspects, it seems to have increased, at least apparently, the awareness of gender inequity, or rather of the fact that some practices, particularly in this case violent behaviours, are related to the unequal relationship between genders. In particular, that violence is not due to individual characteristics (of a violent man by nature or with a history of suffering), but rather to an asymmetrical relationship of power between males and females, or to patriarchy that also legitimizes the use of force and violence by men on women.

6. Strengths and weaknesses of the trainings

The main strengths and weaknesses of the trainings expressed by the trainers, protagonists of the trainings themselves, will be presented below. First of all, the opinions expressed by the 4 partners of the project will be described and then those expressed by the referents of the European best practices that deal with training for operators on the issue of violence against women with disabilities.

TRAINING PARTNER VIVIEN: STRENGTHS

Italy

The Italian partners identified the following aspects as positive elements of their training:

- *The composition of the group*: the fact of working with a multi-professional group, i.e. composed of professionals belonging to different professional categories has allowed an exchange, a knowledge of each other's work, greater credibility and the creation of strong personal relationships.



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- *The presence of an expert:* the presence of Rosalba Taddeini (Differenza Donna) was fundamental. She brought an expert opinion on the theme "disability and violence".
- *Use of a mixed training method:* the combination of the ACAV and Giolli methods increased participation and resulted in a good balance between information and training, between content and emotional aspects.
- *The competence of trainers:* Dr. Roberto Mazzini (GIOLLI) stresses the importance of the competence of ACAV trainers in dealing with issues such as secondary victimization and empathy, "unpleasant" victims and stress of the operator, starting from them and not from an apriori "should be".
- *The flexibility:* the path has been very flexible because it has followed the evolution of the group, without being too fixed in a pre-established program.
- *The intensity of the training course:* the monthly intensive structure (8 hours) has allowed to arrive from the daily, to enter in the formative atmosphere, to dive in the cases and to come out closing the open wounds.
- *The variety of stimuli:* the activities proposed in the training were very different from each other: slides, role play, anti-stress exercises, exercises on skills, Theater-Forum, metaphors, etc.
- *The resilience of the group over time:* despite the numerous problems related to the pandemic that led to slowdowns and schedule changes, there was almost no abandonment of the group by professionals.
- *The accompaniment to the role of multiplier:* the role of multiplier was discovered gradually, even by the trainers themselves. It was not imposed, but gradually understood and chosen by a significant part of the group.
- *The adaptability:* trainers have been able to adjust the course from presential to virtual due to the pandemic, even at the request of the group itself.



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- *The possibility to work on the network*: trainers had the opportunity to work on the network, on the local network. Trainers said that having physically people from different organisation in just one room was an opportunity to enlarge and reinforce the network in presence. Everybody had the opportunity to know each other in person, which doesn't happened so often during training on this issue.

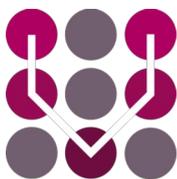
- *The active participation*: almost all participants, though at varying levels of depth, showed active participation. Dr. Arianna Gatti said that participation was great in each appointment of the training. This impression was confirmed even during the Covid period because they wanted to continue, it was from them the request to continue to see each other's and to stay in contact.

- *The activation of the multipliers*: they competently led the 6 sectorial seminars, demonstrating motivation, passion, and capability.

- *Good collective preparation of the training days*: the atmosphere during the training was positive, with relaxed times and ability to find mediations and agreements, facilitated by the harmony of methods between Giolli and ACAV.

Finland

The Finnish partners stated that everyone who went to the training was enthusiastic about the working method. During training, participants realized the possibilities of using the method in client work of those who have experienced violence, both as sought in peer group work, and also in individual client work as part of their own work. The trainers felt that the subject matter and the utilization of body awareness was perceived to be important among the participants. The participants committed to the training days and thought about how to include learned lessons into their work. They started to influence on their work so that the lessons learned could



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be part of the organization's tools for later (e.g., supply of services) when confronting those who have experienced violence.

Croatia

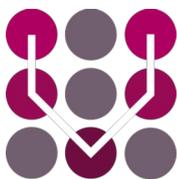
Croatian partners listed the following strengths:

- 1) Informal environment;
- 2) Opportunity for professionals from different fields to exchange opinions and hear experiences from other sectors;
- 3) Practices of legal, psychological approach and active listening;
- 4) Engaged discussion led by an expert.

Bulgaria

The Bulgarian partners state the following:

- 1) Creating safe informal environment for sharing opinions and experience among professionals from different fields;
- 2) Opportunity to learn more about innovative for Bulgaria tools and methods to be used in the training of different professionals in the field of VAW;
- 3) Ensuring space to practice active listening and different approaches to VAW and to cases with different disabilities;
- 4) Participation in lot of discussions moderated by an expert.



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WEAKNESSES

Italy

One of the difficulties involved choosing which professionals to include within the group. The Italian partners would have wanted suitable people to "multiply", coming from the various sectors in a balanced way. It was not easy to arrive at the final group, which in any case had some gaps, such as the absence of doctors and pediatricians. Another critical issue was the lack of work with managers to support the role of the multipliers and the difficult communication with the managers of the Services that, at times, did not facilitate participation. The pandemic certainly determined the loss of a third of the group and caused only partial presence of some professionals. Finally, the setting available for conducting meetings was large but unwelcoming, characterized, at times, by some organizational problems as well.

Finland

In some of the participants' organizations or workplaces, it was not easy to implement the learning gained in the training and specifically the initiation of their own group-shaped activities. The structures of the work did not support the group-shaped application of new competencies created through the training in all places. Instead, however, all participants reported that they can also apply the learned knowledge when doing individual client work. The method is new and has not previously been applied to that particular target group, and this produced the need to narrate and describe the method more accurately so that enthusiastic participants go along. It was easier to engage people in the second training when there was experience of the method and its training with explicitly those who have encountered violence.

Croatia

Most people who work with victims of violence are overwhelmed with work and many professionals are not interested in additional training.



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Bulgaria

Most professionals from VIVIEN target groups are overloaded at the time of the pandemic of COVID-19 (health and social workers) and in Bulgaria also the police workers are fully engaged with the public protests lasting months till recently.

As the both Bulgarian partners are not specifically working in the field of VAW but focused on disability issues and wellbeing of vulnerable groups, they do not have as the other partners from Italy, Croatia and Finland their “usual clients” or established training connections with the target groups and have each time to go for permissions and approvals through state ministries and central institutions at a time of civil protests against the government which puts overload also on the institutions.

Many professionals do not show interest in additional training and even when the authorities declare support to the training they propose, the professionals could be only “encouraged” to participate but not obliged to do it.

STRENGTHS AND WEAKNESSES OF THE TRAININGS (EUROPEAN BEST PRACTICES)

NINLIL (WIEN)

Many attendees of Ninlil’s trainings are professionals who are overloaded with work and are often not aware of the issue of sexual violence against women with learning disabilities or think that they don’t need that kind of education. At a beginning of each training, most of the professionals are skeptical about the need and quality of such trainings. Also, many of them start with the preposition that the topic of the training does not concern them or their work. As said before, getting people into training is the main issue of training’s organization, and the described skepticism is the reason of it.



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During the trainings, specifically during the case-study part, almost all attendees change their opinions and discover that they can benefit from these trainings by getting more knowledge on that specific topic and other, correlated topics.

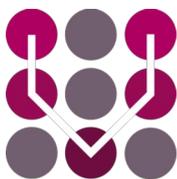
As trainings go by, professionals start learning and being interested in the topic. They often acknowledge that they've found themselves in situations to which the knowledge they gained during training is applicable. By learning and listening about the topic, professionals start to recognize situations of violence against women they've witnessed in the past, privately or professionally. After recognizing situations of violence against women from their past experiences, professionals tend to share their stories and discuss about the problem and possible solutions.

During training, professionals gain the skill of recognizing different kinds of women's behaviors that can be connected to experiences of violence. Professionals who work with grown-up women with disabilities, or specifically with women with learning disabilities, for a long time, often tend to lose sight of women's behaviors that can be connected to experiences of violence, and blame the victim's disability for her improper or unusual behavior.

Acknowledging that some behaviors are consequences of previous traumas, helps professionals to improve their approach to women with disabilities. This kind of realization is also helpful during their day-to-day work.

Evaluations of trainings are always extremely positive and professionals leave the training satisfied with the experience they had. During trainings they often gain a new, different point of view that can be implemented in their work and, also, in their personal life.

Trainings could be improved in fewer ways, but the main segment that needs improvement is people's will and motivation to attend such trainings. Ninlil's employees are trying, and gradually succeeding, in their objective to teach professionals who work with women with



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disabilities, or specifically with women with learning disabilities, about the importance of empowering women, with a goal of providing them a better and more fulfilled life, and stopping violence against these women during its initial phases.

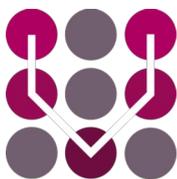
Ninlil's employees are willing and ready to adjust to the situation caused by the COVID-19 pandemic by getting bigger rooms and other spaces for the organization of their trainings, and eventually, if needed, they'll find the best possible way to conduct their workshops and trainings online.

DIFFERENZA DONNA (ROME)

During the interview with Rosalba Taddeini, she said they don't have experience of negative or problematic training. Every time there is some kind of success, at least increasing the professionals' ability of recognizing forms of gender violence.

A positive experience of training, told by Taddeini, is a training held in June 2002 for an anti-violence association of Bologna, an association that has chosen proximity, in the sense that it is not centered only in the city, but also in the province, so there are more centers on the province to get as much as possible to women. Precisely for this reason several women with disabilities have come to them.

"The training was experiential and it was wonderful because we started by addressing the topic through a video that we made. There was an analysis of how we came to this process, from the research that gave us certain types of results. Did we realize that what was practically happening? The woman victim of violence who had multiple discrimination, did not arrive at the center why? Because the services managed them. Not thinking that a woman, just because she is a woman, needed something different" Taddeini explained.



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The trainer started from the experience, talked about the process, how they got to this type of path, the traveling desk, the itinerant center and so on. From there, then, they projected a video that talks about women with three different stories. "This went very well as training" Taddeini continued, "because we felt the participation, prejudices also came out, but that's okay, because at least we talk about them, we work on these, and also the fears, because *"if I find myself on Friday evening managing a woman who has a physical disability, where should I send her? because that service could tell me so.. because that other shelter could tell me what ..."*. We make them feel support, that they are not alone.

How can the helping network be activated? It happened to us, a girl who had a motor problem indeed had a degenerative pathology so she already had the catheter and was in a wheelchair and in any case, we managed it, however we managed to give her the opportunity to get out of the situation of violence. So, this was great, that training was very important".

To the question about what suggestions would come based on experience of Differenza Donna, to develop skills to welcome women with disabilities, Taddeini answered: "In my opinion it is more functional to do a training linked to an experience. If you bring the cases, you present them the theme you want to consider. For example we were talking about this woman who was hosted by us for many years, you can read her story on many fronts, you can read her story putting the focus on prejudices, because in any case she is a girl who has never been taken in charge by any service despite having all the difficulties, you can read her story about the violence she suffered, rape in the family, group rape, they sold her, she was mistreated, she was exploited by the father on the street. It depends on what you want to argue, you bring a story of a real woman, who unfortunately lived a lot of violence, a woman with disabilities, and you begin to tell her story on this type of perspective: stereotypes, prejudices rather than violence, accessibility to justice, reproductive and sexual health. The important is starting from a case, a



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situation, this has a lot of effect, it makes you feel that this woman exists, maybe you know her because she remind you of someone, and this is very important. All the women who were present at the training said "*oh, you make me feel bad, because I knew a woman with a disability that this thing happened to her*". Each of us, at school, the neighbor, knows a story like that, which can be a discrimination story, because maybe that little girl was isolated, rather than you knew very well that she was exploited, that she was mistreated, that she had a pension, but it was taken from her by her parents and so on.

For better or worse we know all these stories, and therefore they resonate to you and if they resonate to you, they are powerful.”

FUNDACIÓN CERMI MUJERES (MADRID)

The most difficult things they report in the running of on-line courses are the following:

1. **on-line courses require access to certain minimum resources** (suitable telephone, internet access, etc.). Registration is on-line so access to internet is fundamental. Trainees also need some minimal knowledge of how to use smartphones, computers, and other technologies. They have tried to simplify the process as much as possible, but some people still have difficulties.

2. **Participants with high support needs** to be able to access information and communication technologies have difficulties following the courses. They try to resolve this issue at times by organizing specific courses for these groups, but they think this segregate so they attempt to integrate as much as possible. People with high support needs requires help from a personal assistant, interpreter-guides or an assistant with knowledge of learning



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difficulties. This makes the courses very expensive and is complicated to arrange given the current restrictions due to the COVID-19 pandemic.

3. The Foundation does not have ample human resources but the needs are great, so **they cannot always meet the demand for training.**

In describing an example of training that worked well, they affirm that their '**You're not alone**' webinars are proving to be very popular and successful. The webinars originated to provide support and accompaniment to women and girls with disabilities and mothers of children with disabilities. The webinars were originally to give a voice to these groups to express their testimonies, but they now incorporate short (8-minute) presentations on very specific subjects. Approximately 150 women attend each webinar on Zoom from all over Ibero-America to share their experiences and knowledge on topical issues. The videos of all the webinars are available on the following link: <https://galeriavideos.cermi.es/miniaturas.php>.

Participants find the webinars very useful and said that nobody else was offering anything similar. It seems that the key point that allowed the course to succeed were:

- 1) brevity: presentations are kept short (8 minutes) and the floor is given to participants for a maximum of three minutes;
- 2) personal aspect: personal testimonies which participants can relate to;
- 3) specific space for women with disabilities.

Finally, they affirm that, in order to strengthen their training, they would need more financial support to ensure the participation of women requiring higher levels of support to access the information, to be able to provide more personal assistance. Additional financial resources would also enable them to provide all the information in easy-to-read formats and



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pictogrammes and open up the webinars to women from other language groups by offering simultaneous interpretation.

CONCLUSION

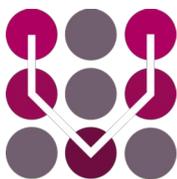
In concluding this work, it seems useful to take up some fundamental aspects regarding the theme of disability. Analysing the literature, exploring what exists in terms of associations and services at national and European level, the disabled women are not immediately contemplated as potential victim of violence. The literature proclaims their risk of exposure to violence, but there is a lack of proactive research in terms of protection, disclosure, and care.

Now the main question is: when we talk about violence against women, are we talking about all women or only “normal” and native women?

But in general, professionals trained in welcoming, protection and support of women victims of violence must be able to work with any woman, regardless of her age, social class, origin, and whether she has a disability.

Trainings should be inclusive and systematically address all situations that represent an additional fragility factor for the woman. Every training course should address in its contents the specific issues related to the care of women with disabilities who are victims of violence; every professional, every practitioner should be aware of the needs and peculiarities of women victims of violence with different forms of disabilities.

Each city, each district should provide a shelter accessible to disabled women, and be able to count on operators capable of taking care of them. It would therefore be necessary to create integrated services within which professionals trained in gender-based violence in situations of



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disability would work. What is currently present is, instead, a collaboration between institutions that deal with gender violence on the one hand and disability on the other, as there is no real integration.

Moreover, services should be made accessible from different perspectives. For example, the website should provide easy reading, make audio messages accessible, and offer this information, written and audio, in the main languages spoken by the native and immigrant population.

Services dedicated to women victims of violence should work closely with associations, with professionals who deal with those particular vulnerabilities: associations of disabled persons, of immigrant women, etc. The website should also be accessible to all.

Another important aspect would be to include in the websites a section dedicated to “third parties” (family members, caregivers, personal assistant) because in situations of violence in general but even more so in cases of violence against women with disabilities, requests for help very frequently are not direct but come from people close to the victim. Women with disabilities often have reduced access to the request for help due to their condition, especially in cases of severe disability or impairment. It would therefore be necessary to create a systematic listening space for these third parties with important indications on what to do and how to do it to help victims. Moreover, in case of help to disabled women, it is essential to have very clear how to intervene, to have useful strategies of action and answers to questions such as: “If the woman needs to be moved from her home, are there any shelters adequately equipped to accommodate her?”; “Can these places guarantee her safety and appropriate assistance according to her specific needs?”.



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Finally, it would be very useful to create a European database, available in different languages, containing a list of good/best practices, distinguished by professional area, which professionals should follow in assisting women with disabilities who are victims of violence.

A self-training exercises

In order to give themselves an opportunity for collective reflection on the specific theme of disability, each association, each service could get together and proceed as follows:

- 1: Evoke the last two cases involving women with disabilities: What worked and what was difficult
- 2: Make a detailed description of the resources currently available in terms of structure, skills and relations with the territory for all women and for those disable.
- 3: List what could be done to improve access, accommodation and support for disabled women.
- 4: Order the items listed in point 3 according to the degree of priority.
- 5: Identify among the proposed solutions
 - a) those that could be implemented immediately
 - b) those that can be planned over the next 12 months
- 6: Plan the implementation of short- and long-term solutions
- 7: After one year, check the changes that have been implemented and their effectiveness.