



European Family Justice Center Alliance

FJC Antwerpen



www.efjca.eu

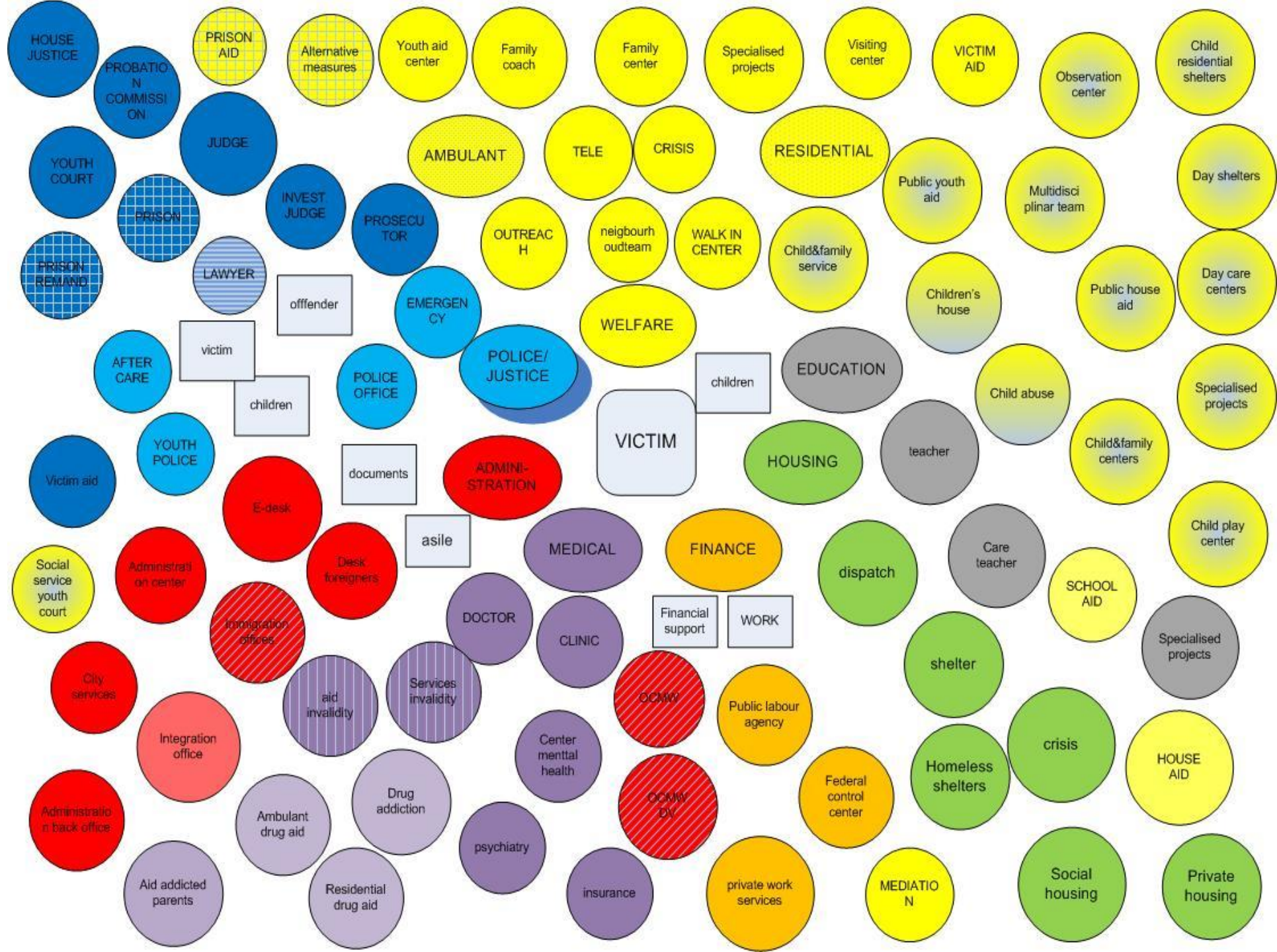
On site partners of FJC Antwerp

- Police
- Prosecutor
- Women's aid
- Shelters
- Services for child abuse
- Services for social welfare
- Counseling
- Medical services
- Services for housing
- Probation
- Perpetrator programs
- Services for migrants and asylum seekers
- Youth care
- Centre for mental health
- Services for job seeking
- *Local authorities: city and province*



On site services:

- Peer groups
- Support by voluntary cooperators
- Self-defense courses
- Legal advice
- Advice on debts
- Focus groups
- Medical examination
- Wellness: yoga
- Social integration
- ...



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Relation (mental) health and domestic violence

- Women who have been victimized by an intimate partner and children raised in violent households are more likely to experience a wide array of physical and mental health conditions including frequent headaches, gastrointestinal problems, depression, anxiety, sleep problems and Post Traumatic Stress Disorder (PTSD)
- In a study of 557 women, 42% of women who reported a history of lifetime IPV currently smoked cigarettes, compared to 26.2% of women who did not disclose IPV
- Adolescent girls who witnessed IPV were 2.3 times more likely to use tobacco and marijuana than those who do not witness IPV



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Relation (mental) health and domestic violence

- Substance abuse and high-risk alcohol use are more prevalent among women who experience IPV compared to women who have not experienced IPV.
- In a study of 557 women, women who reported having experienced lifetime IPV were three times more likely to binge drink (5+ drinks per day) compared to women who reported no instances of violence.
- In a 1999 study, it was found that 40% of women with a history of physical, sexual and/or emotional abuse had been diagnosed with one or more sexually transmitted infection (STI). In comparison, 18% of non-abused women had been diagnosed with one or more STIs.



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Relation (mental) health and domestic violence

- A 1998 Massachusetts Behavioral Risk Factor Surveillance System studying 2,043 pregnant women aged 18 to 59 years old found that among women who had experienced IPV in the past 5 years, nearly 40% reported that the pregnancy was unwanted, compared to 8% of those who did not experience IPV.
- Of 2,043 women aged 18 to 59 who participated in the 1998 Massachusetts Behavioral Risk Factor Surveillance System, women experiencing IPV were more than three times more likely than other women to have been depressed for over half of the past month and approximately twice as likely to have been anxious or not gotten enough sleep for over half of the past month compared to women without a history of IPV





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Experience FJC Antwerp

Most occurant problematic life domains		
- Housing	53%	18% living at some-one else place, 15% no adress
- Finances	56%	
- Social functioning	91%	13% socially isolated
- Mental health problems	87%	22% addiction to drugs and?or alcohol, 11% mental disorder
- Meaning of life	11%	
- Physical disorder/illness	33%	15% chronic medical care, 12% eating disorder
- Practical functioning	51%	24% language problems
- Activities	51%	44% unemployed
- Average number of high risk problematic life domains	4,3	

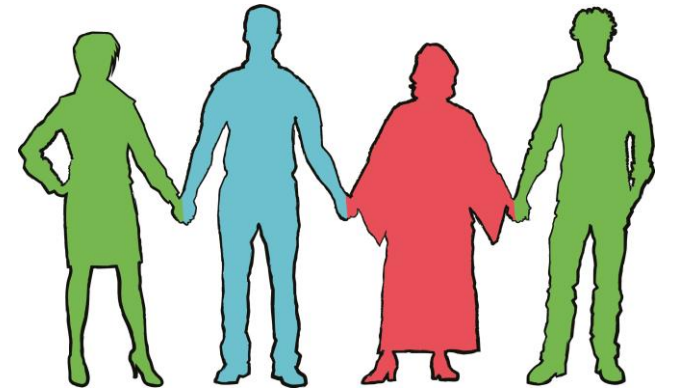


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Benefits of collaboration perceived by the team members

- Joint responsibility and decision making
- Hope and Empowerment works for the victims and the team
- Flexible work environment and creative deployment of opportunities and possibilities
- The vision is created and carried out by all partners
- There is a constant effort to build mutual trust
- WE-culture: it's all about WE
- Collaboration inspires greatly enhanced efforts and results





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Discussion

- What should the EFJCA organize to involve the health sector in the FJCs and co-related multi-agencies?



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Discussion

- The health sector is a missing link in the multi-agency approach of domestic violence



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Discussion

- The multi-agency approach takes too little account of the methods of the health sector



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Discussion

- There is a lack on common language between health sector and specialised care in domestic violence cases



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Discussion

- What do you need from your profession to involve health care in multi-agency approach?