

FRONTLINE RESPONSE TO HIGH IMPACT DOMESTIC VIOLENCE IN FINLAND

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Abstract Finland is committed to the Council of Europe Convention on preventing and combatting violence against women and domestic violence (Istanbul Convention). The Convention entered into force in Finland on August 1st 2015. The Current Government Programme of the Prime Minister also includes several initiatives to better combat domestic violence. In 2020, 10,800 incidents of domestic violence and intimate partner violence offences were reported to the authorities. The number of reported offences decreased by 1,2 per cent from 2019. Among all the adult victims of domestic violence and intimate partner violence, 75.2 per cent were women, whereas 78.1 per cent of suspects were men. In 2020, there were in total 29 shelters for victims of domestic violence in Finland. There are several NGOs supporting victims of domestic violence and providing perpetrator programmes in Finland. When discussing the good practices of cooperation, 'Anchor' ('Ankkuri') teams shall be mentioned. 'Anchor' teams are multi-agency teams working in several police departments in Finland. These teams often consist of police officers, social workers, and psychiatric nurses. The Anchor model supports the well-being of children and adolescents and prevents juvenile crime and violent radicalisation.

Keywords:

domestic violence, Finland, interagency cooperation, victims, police, NGO

Description of country

The Republic of Finland has about 5.5 million inhabitants in an area of 338,455 km². Although increasing global economic competition, an ageing population and budget deficits have posed serious challenges to the sustainability of public policy, Finland still follows a Nordic welfare state model that endorses citizens' universal social rights to health, education and social care. The Nordic model of risk-sharing involves a relatively large public sector with the welfare benefits and services mainly financed by taxes. The responsibility for organising social and health services lies with local government, the municipalities. Yet, the state is just one provider of social and health services, which are also provided by private businesses and non-governmental organisations (Kettunen, 2014).

Finland has a unified national police force (Devroe & Ponsaers, 2017). The police are accountable to the central government that sets the general objectives and allocates finances for it. The Ministry of the Interior controls the National Police Board (NPB) directed by the National Police Commissioner. Performance management goes down from the ministry, via the NPB to local police. First, the ministry sets strategic priorities, targets and indicators. Then, the NPB negotiates annual performance contracts with the 11 local police districts. The local police districts maintain strong cooperative relations with other public agencies and with important private and civic society partners at a local and regional level. Various stakeholders are specifically brought together around local and regional safety and security planning (Virta & Taponen, 2017). In addition, the police, health care, social care, and non-governmental organisations can cooperate around a few selected topical issues such as domestic violence prevention, discrimination, and social marginality.

Finland is committed to the Council of Europe Convention on preventing and combatting violence against women and domestic violence (Istanbul Convention). The Convention entered into force in Finland on 1 August 2015.

The Current Government Programme of Prime Minister Sanna Marin also includes several initiatives to better combat domestic violence. According to the Programme, the Government will safeguard the implementation of fundamental and human rights and tackle violations of people's rights.

Legislation regarding domestic violence

Domestic violence in the Criminal Code (1889/39)

Many forms of actions that are commonly regarded as domestic violence in research literature and international policy documents are not defined as specific criminal offences in the Criminal Code of Finland. Furthermore, some forms of violence such as oppression and psychological violence may be difficult to prove in court, because often it is one person's word against another and the causal link between the actions of the perpetrator and the impairment of mental health of victim requires evidence to stand in court. However, active intervention in and prevention of domestic violence requires the police to be able and motivated to identify all forms of domestic violence in order to manage the types and sources of risks that may lead to or trigger violence. Risk assessment should be done in close cooperation with the social and health care sector agencies and the relevant NGOs.

– Physical violence

Different forms of physical violence are criminalised in the Criminal Code (e.g. assault, killing, homicide, murder, negligent bodily injury, negligent homicide, imperilment, endangerment of health and abandonment). In 2014, the new offence of 'Preparation of an aggravated offence against life or health' was inserted into the Criminal Code.

All physical violence is subject to public prosecution even if the offender is a family member or ex-family member of the victim. Petty assaults occurring in close relationships and against children have been subject to public prosecution since 2011. This means that the police do not have discretion over filing a criminal offence report when suspecting physical domestic violence.

– Coercive control

Many forms of domestic violence are covered in the Criminal Code but it is unclear how often the detectives identify these forms in the preliminary investigation. For instance, coercive control, defined as an act or a pattern of acts of physical violence, threats, humiliation and intimidation or other abuse (Kelly & Johnson, 2008) can be hard to identify and prove. There is not yet academic research in Finland on how

effectively cases of coercive control occurring in intimate relationships such as ‘eavesdropping’, ‘illicit observation’ or ‘deprivation of personal liberty’ have been identified in police investigations and later dealt with in the courts.

– **Psychological violence**

Psychological violence is not a specific offence in the Criminal Code but, if psychological violence has caused the victim physical injuries or mental health issues, psychological violence can be prosecuted as an ‘assault’ in court. Yet, this is not very common since the intended negative consequences of psychological violence towards one’s physical health are difficult to prove. However, some illegal acts that may be used as tools of psychological violence are criminalised, such as disseminating private information, violating personal privacy, menace, stalking, coercion, defamation, and invasion of domestic premises.

– **Economic violence**

Additionally, economic violence is not a specific offence. Acts like fraud, criminal damage, extortion, identity theft and human trafficking are criminalised. If economical violence takes the form of restricting access to financial resources, education or the labour market, or not complying with economic responsibilities (EIGE, 2017), the judicial system may have difficulties in responding effectively to this type of abuse.

– **Forced marriage**

In 2019, the Finnish Parliament adopted changes to the Marriage Act (234/1929) and repealed the exception that under-aged persons could marry with special approval from the Ministry of Justice. The purposes of the changes are to protect children and limit the risk of forced marriages. Even if forced marriage is not a specific offence, it is illegal in Finland and may be considered as human trafficking or compulsion.

Article 32 of the Istanbul Convention requires that “marriages concluded under force may be voidable, annulled or dissolved without undue financial or administrative burden placed on the victim”. The aim of this provision is to ensure that, where women and girls free themselves from marriages concluded without their free consent, they do not have to bear any consequences regarding their civil status. GREVIO’s country report on the implementation of the Istanbul Convention of Finland (2019) noted that Finland should review the criminal offences of rape, sexual violence, stalking, sexual harassment and forced marriage to increase the probability of prosecutions and to align them more closely with the requirements of the Istanbul Convention. Furthermore, GREVIO encouraged the Finnish authorities to incorporate into the relevant legislative act(s) the possibility of voiding, annulling or dissolving marriages concluded under force.

– **Female Genital Mutilation (FGM)**

Although there is no specific criminal offence to cover female genital mutilation, there is a general agreement that the act of FGM falls within the scope of (aggravated) assault.

The Istanbul Convention requires the criminalisation of behaviour that involves the intentional exertion of influence on a girl who herself does not have the intention of undergoing FGM. The aim of the article is to ensure that criminal liability ensues, for example where relatives or community members incite, coerce or procure a girl to undergo FGM but do not take an active part in ensuring that the procedure is carried out. In its country report on Finland (2019), GREVIO noted with concern that very few reports of cases of FGM have been made, none of which have led to prosecution.

In 2019, a citizen’s initiative was launched to place the question of introducing a specific criminal offence of FGM on the parliamentary agenda. In 2020, the Legal Affairs Committee of the Parliament passed a Committee Report on a citizen’s initiative supporting the passing of specific criminalisation of FGM.

– Sexual offences

In general, criminal acts regarding sexual offences reflect societal attitudes about sexual norms and limits. In principle, Finland can be identified as one of the Nordic countries where more liberal gender norms give women more freedom to fulfil their sexuality based on their own needs. However, usually it has not been until a few decades later that Finland has followed the amendments that more equal Nordic countries such as Sweden have previously passed. As an example, Finland was one of the last countries in Europe to make rape in marriage a crime.

Sexual violence is criminalised in the Criminal Code covering rape offences, coercion into a sexual act, sexual abuse and sexual abuse of a child. In the act currently in effect, the offence of rape is not based exclusively on the lack of consent, which is the central element in the way the Istanbul Convention frames sexual violence. Rape is currently categorised according to the degree of physical violence used or threatened by the perpetrator. Alternatively, there is a requirement to show that the victim was in a state of fear or helplessness and unable to defend herself or to formulate or express her will. This formulation has been criticised for not capturing the realities of how (mostly) women experience sexual violence and how they respond to threat.

The principle established by the Istanbul Convention is that all sexual acts without the consent of the victim must give rise to reprimanding sanctions. Therefore, GREVIO (2019) strongly encouraged Finland to speedily reform all sexual offences contained in Chapter 20 of the Criminal Code, and to incorporate the notion of freely given consent as required by Article 36 of the Convention. Furthermore, Finland should ensure appropriate sanctions for all sexual acts without the consent of the victim, including where the circumstances of the case preclude valid consent.

Currently, in 2020, Finland is undergoing a complete reform of the whole Chapter 20 of the Criminal Code regarding sexual offences. This is largely being influenced by the public debate(s) and the changing of attitudes towards sexual crimes, but also due to the criticism and pressure received from international legal sources such as GREVIO. The reform will base the new definition of rape on the lack of consent.

The Social Welfare Act (1301/2014)

The current Social Welfare Act entered into force in April 2015. It emphasises the timeliness of assistance, improves the basic services and reduces the need for reparative measures. The act strengthens the right of families with children to services that support their ability to cope with daily life. These include services such as home-help services, family work, support persons and families and peer group activities. With regard to domestic violence, the act strengthens the victim's right to all services necessary due to a need created by having experienced domestic violence and its consequences, such as dwelling and livelihood.

The Child Welfare Act (417/2007)

The Child Welfare Act determines regulations concerning child welfare and applies to all children who live in Finland. The applicability is not dependent on their nationality, religion or culture. According to the law, all children are entitled to a safe and stimulating living environment, balanced and diverse development and special protection. Since 2015, notwithstanding secrecy provisions, the authorities working with children and families have been obliged to submit a child welfare notice if they are concerned about a child's wellbeing.

Reporting rates of domestic violence

In 2020, there were 10,800 incidents of domestic violence and intimate partner violence offences reported to the authorities. The number of reported offences decreased by 1,2 per cent from 2019. Among all the adult victims of domestic violence and intimate partner violence, 75.2 per cent were women, whereas 78.1 per cent of suspects were men. The suspect was also male in one-third of cases where the victim was a male. These numbers include only incidents that have been reported to the authorities (Statistics Finland, 2021).

In 2018, emergency response centres received about 26,000 emergency calls to homes because of domestic violence. In that year, only about 5,500 domestic violence crimes were filed (PolStat, 2020). Not all the cases referred to the police from the emergency centre as domestic violence cases always relate to actual domestic violence. However, this gap and other evidence such as victim surveys

suggest that some domestic violence remains unidentified by the authorities. According to the studies, only 10 per cent of the most serious incidents of violence in the intimate relationships is reported to the police in Finland (FRA, 2014).

The role of the police, other front-line and first-responder agencies and pertinent stakeholders in responding to high-impact domestic violence

Police

Uniformed police officers are often the first responders encountered by a victim of domestic violence. For the police, domestic violence call-outs are the most common sources of information about violence in close relationships (Fagerlund, 2016). In 2011, the Criminal Code was reformed to give a clear message that even milder forms of violence in close relationships are unacceptable. Through the reform, all forms of assault in close relationships including petty assaults became subject to public prosecution. The aim of the reform was to ensure that domestic violence cases that at first may appear mild are also investigated and not to hold the victim responsible for reporting the offence. The police should record the offence immediately, and collect and document the necessary evidence in every case immediately (Fagerlund et al., 2020).

In a domestic violence case, uniformed police officers intervene and often interrupt the unlawful activity, question the parties, collect the evidence and file a report. The uniformed police officers also inform Child Welfare if there are minors in the family, or report a need for social welfare services if they are concerned about the ability of an adult client to cope. The uniformed police officers also apprehend the suspect based on the Police Act (872/2011) or Coercive Measures Act (806/2011) depending on the seriousness of the crime or the risk of continuation or recurrence of violence.

The police have a duty to conduct a preliminary investigation without undue delay when there are grounds to suspect that a crime has been committed. During the preliminary investigation, the police will interrogate the victim, the suspect and any witnesses. The police will also collect evidence (e.g. various statements such as a doctor's statement, photographs and the results of technical investigations). Detective chief inspectors and detective superintendents manage investigation units

and decide about the use of coercive measures. The Pre-Trial Investigation Act (805/2011) regulates the principles concerning preliminary investigations and the Coercive Measures Act (806/2011) regulates the use of and the prerequisites for the use of coercive measures.

During the preliminary investigation, the police have a duty to assess the victim's special needs for protection and the required protection measures. These protection measures can include that the questioning may be conducted by the same person or by a person of the same gender as the victim. In the trial, the victim may be heard behind a screen, via video link or without the dependant or public being present, or the interrogation of the victim may be video-recorded.

The Criminal Investigations Act (805/2011) requires preliminary investigation authorities to tell the victim about his/her rights in terms of support services, advice, interpretation and translation, compensation, protection, reimbursement of costs and information on the handling of the case in criminal proceedings (Victim Support Finland, 2020). With the victim's consent, the police can provide Victim Support and other support services with the victim's personal data.

Victims have a right to have a lawyer and a support person present at the questioning and at the trial. The presence of a lawyer may help the victim to perform better in the questioning. Victims of domestic violence can often be provided with a lawyer paid for by the state. The support person service of Victim Support Finland is always free for the victims and witnesses.

After the investigation is closed, the detectives prepare the record of the pre-trial investigation. The record includes the official interview records and collected evidence. The record of the pre-trial investigation is submitted to the prosecutor for consideration of charges or for issuing a fine. Alternatively, the police may close a pre-trial investigation without submitting the case to the public prosecutor, if the investigation shows that no offence has been committed.

Health care

In Finland, 7 per cent of emergency department patients have reported recent and 20 per cent lifelong domestic violence (Notko et al., 2011). Domestic violence is seriously unrecognised in emergency care, with the result that victims are likely to suffer from a wide range of mental and somatic health issues and to make repeated visits to emergency departments and other medical services (Siltala et al., 2020).

The majority of domestic violence victims are likely to remain unidentified in the day-to-day practices of health care and those who are identified have typically already suffered several assaults (Leppäkoski et al., 2011). Currently, it seems that the identification of domestic violence in emergency care is based on external and visual injuries, and it fails to account for the majority of victims who have other issues like obstetrical and gynaecological complaints, pain and mental health problems. Very few emergency departments have routines to identify victims, so patients experiencing domestic violence are systemically unrecognised in medical settings (Siltala et al., 2020; Tampere University Dissertations, 2020).

In health care, the documentation of domestic violence is also variable. The documentation of injuries, evidence collection and reports are not always consistently high-quality. The documentation of domestic violence in health care is inadequate. The proper ICD10 perpetrator codes are used poorly, and the codes used do not always match to the content of the patients' medical records. The proper use of ICD-10 coding would help victims, health care professionals and researchers in the detection, treatment and prevention of domestic violence (Tampere University Dissertations, 2020).

Assessment by healthcare professionals in forensic documentation and interpretation of injuries can result in a number of benefits for the victims and positive court outcomes, including an increase in the rate of successful prosecutions. Multidisciplinary collaboration between health care, police, legal and social service professionals is needed to provide comprehensive care and support (Tampere University Dissertations, 2020). Universal screening of domestic violence is needed due to the prevalence of the problem.

Social work and shelters

According to the Social Welfare Act (1301/2014), a municipality must arrange social services to support those who have experienced domestic violence or other forms of violence or abuse. The shelter is a home-like environment where victims find refuge from violence and where they get help to stop the violence, free of charge. In 2020, there were in total 29 shelters for victims of domestic violence in Finland. The shelters could accommodate 211 families or clients who come alone. Shelter services are state-funded special services defined in legislation for people who have experienced acts or threatened acts of domestic violence. For many clients, the domestic violence started long before coming to the shelter. For 35 per cent of clients in shelters over the age of 15, the violence had been going on for between one and five years.

The number of clients in shelters during 2020 was 5,244 2,929 of whom were adults and 2,311 children. About 92 per cent of the adult clients were female and 8 per cent male. Victims can go to shelter either on their own initiative or on referral. Of the clients, 42 per cent came to the shelter on their own initiative, 27 per cent were referred by Social Welfare, 6 per cent by the police and 4 per cent by health care.

Victims of violence get support, guidance and counselling from professionals at the shelter as well as assistance and information for dealing with practical arrangements. The staff at the shelter explore together with the client what measures of support he or she will need after their stay in the shelter. Where necessary, the staff will also collaborate with the municipality and other service providers. The municipality is responsible for providing community care for those of its residents who have experienced domestic violence, as well as for arranging support after clients leave the shelter.

Shelters are run by municipalities or NGOs. The staff of the shelters are salaried, trained professionals. The Finnish Institute of Health and Welfare (THL) is responsible for the steering, assessment, development and national co-ordination of the shelters. The number of clients has been growing since 2015 when the shelter services became state funded. Since 2015, the number of clients has grown by 72 per cent.

NGOs

There are several NGOs supporting victims of domestic violence and providing perpetrator programmes for perpetrators in Finland. For example, the Helsinki Shelter Association offers shelter services as well supported accommodation for adults and children who have experienced violence. Additionally, the organisation has a Counselling Unit for the victims and perpetrators of domestic violence.

Some of the NGOs are specialised in supporting victims of stalking (Varjo), sexual violence (SERI Support Center, Tukinainen) or religious violence (Uskontojen uhrity). Suvantory supports elderly people who have experienced domestic abuse. Some NGOs provide assistance for immigrant women and children who have experienced violence (e.g. MONIKA) or prevent honour-related conflicts in families (SOPU work, DIDAR). There are also several NGOs offering treatment programmes for perpetrators (e.g. Jussi-work, Maria Akatemia).

In this chapter, we present the work of three NGOs in order to give a concrete description of the indispensable work being done by NGOs. However, it must be strongly stressed that there are several organisations working successfully in the field of domestic violence and they all merit being presented in this chapter.

RIKU (Rikosuhripäivystys – Victim Support Finland) is a member of the European umbrella organisation, Victim Support Europe (VSE), advocating on behalf of all victims of crime. In 2017, the Ministry of Justice decided to issue a public service obligation to Victim Support Finland for providing general victim services in Finland during 2018–2027. These services are available free of charge and confidentially in accordance with the needs of the victim and the family members of the victim. The services are available before, during and for an appropriate time after criminal proceedings (Victim Support Finland, 2020).

RIKU's main operation is to improve the position of victims of crime by influencing and producing support services. RIKU offers practical advice and psychological support for those who have become a victim of crime or attempted crime, their family members and witnesses of criminal cases. RIKU helps victims of crime operate according to their rights and supports them in coping with the experience of crime. Services are provided as national telephone and online assistance services,

as well as personal services at 30 service points around Finland. The operations are based on professionally guided voluntary work. Statements given on the position and needs of victims of crime, training, communication and participation in public debate also number among RIKU's main operations (Victim Support Finland, 2020).

MONIKA – Multicultural Women's Association is an umbrella organisation of multicultural women's NGOs developing and offering specialised services for immigrant women and their children who have been subjected to domestic violence, honour-related violence, forced marriage or human trafficking. MONIKA Multicultural Women's Association acts as an expert organisation and advocate in issues related to ethnic non-discrimination and violence. This NGO also promotes integration by supporting civic society activities for immigrants (Monika-Naiset liitto ry 2020).

Loisto Settlementi SOPU work aims to prevent honour-related conflicts and violence in families and communities. SOPU works with youth, families and communities to resolve conflicts that relate to honour. SOPU organises group activities, camps and peer support activities, and provides confidential support to individuals and families in honour conflict situations. As an example of good practice, SOPU arranges low-threshold meetings where the client can talk with an HRV-specialised police officer. SOPU also offers training in honour-related topics for various professionals including police officers.

Good practices of co-operation

Anchor teams

'Anchor' teams are multi-agency teams working in several police departments in Finland. These teams consist often of police officers, social workers and psychiatric nurses. The composition and involvement of handling domestic violence cases varies in different locations.

The Anchor ('Ankkuri') model supports the wellbeing of children and adolescents and prevents juvenile crime and violent radicalisation. At some police stations, the Anchor model is also used to prevent domestic violence by intervening in incidents at the earliest possible stage and by referring the parties involved to relevant support services.

The Anchor model is based on multi-agency cooperation involving different public authorities to work together at police stations. The social sector workers and the nurses are municipal employees. The staff cooperate closely as a team, each bringing to the team their professional competence, support and expertise in their own background organization.

Multidisciplinary cooperation based on an agreement and managed locally, regionally and nationally makes it possible for professionals to serve the customer in a holistic manner based on the 'one-stop shop' principle. The benefits of this holistic approach and multi-agency co-operation are evident in challenging situations where the customer suffers from multiple problems like intimate partner violence, homelessness, substance addiction and mental disorder. If the customer agrees, the Anchor team exchanges information with the police, social work and health care agencies. The exchange of information is simple when the customer has children, because the cooperation can be justified by the child's interests without asking for the customer's assent. On the other hand, childless couples who do not want to receive assistance from the Anchor team tend to fall through the service net.

Specialised domestic violence investigation teams

Some police departments have individuals and/or teams specialised in investigating domestic violence cases. During the field study of IMPRODOVA, we examined one of these investigative teams. This particular team is presented as an example of good practice in this subsection.

The Domestic Violence investigative team investigates all crimes that have occurred in intimate relationships, such as assaults, (attempted) homicides and kidnapping. Intimate relationships include family relationships, existing intimate relationships, ex-spouses and people who have a personal bond (e.g. a common child).

Investigative teams specialised in domestic violence have contributed significantly to several positive outcomes. Specialising in one particular type of crime has developed highly skilled detectives and provided an opportunity for motivated people to apply for a job in the Domestic Violence investigative team. These detectives are specialists who understand domestic violence as a problem with links to various psychological, social, economic and legal issues. They know, for instance,

how to approach a victim and a suspect to build trust, how to motivate the person to talk about their situation and to accept assistance.

Specialisation in domestic violence investigation facilitates the work of the detectives in keeping up and maintaining professional networks with, for example, support services. Good networks make effective service counselling possible, when the detectives have good connections to different governmental and non-governmental services.

MARAC - Multi-Agency Risk Assessment Conference

A Multi-Agency Risk Assessment Conference is a tool to identify and assess the risks of domestic violence and to manage the sources of risks. The MARAC method consists of 1) risk assessment and referral to an MARAC meeting, 2) sharing information between the agencies, 3) drawing up a personal safety plan and 4) monitoring the victim's situation. The MARAC questionnaire can be filled in by any public official to whom the victim turns for help. The MARAC team may consist of professionals from several service organisations such as the police, social services, victim support services, health care professional and child welfare services. The participants discuss and exchange views about each victim's situation and create an action plan to improve their safety. With the victim's consent, the participants can exchange information in order to be able to manage the sources of identified risks systemically. Currently there are more than 30 MARAC teams operating in about 90 Finnish municipalities (Rikoksmentorjunta.fi, 2020).

The main challenges

Domestic violence is a serious public health issue in Finland. From the perspective of the authorities, domestic violence is also a largely hidden crime. Effective intervention and prevention of domestic violence require the authorities to have skills in identifying the different forms of violence, to share a clear understanding of the different roles and duties of the other actors and to have secure resources and structures for inter-professional cooperation. Domestic violence is a serious problem (Rittel & Webber, 1973) that cannot be solved by the police alone, but attitudes towards the significance of domestic violence as a problem and the means of intervening pose a challenge to inter-professional cooperation (cf. D'Amour &

Oandasan, 2005). Additionally, in the changing field of service systems, serious problems such as domestic violence are often overlooked in favour of tasks that are more easily managed (Niklander et al. 2019).

One of the main challenges in the professionals' work related to domestic violence is the lack of training among the police, social work and health care professionals. A recent study (Niklander et al. 2019) shows that 27 per cent of frontline responders had received no training as part of their degree programme and 48 per cent had participated in lectures that had taken more than hour but less than days. Additionally, 35 per cent of the frontline responders had received no training as part of their professional in-service training. The lack of training may be one of the reasons explaining the ineffective intervention and prevention of domestic violence among professionals. The limited understanding of the forms and nature of domestic violence, and of the methods of how to intervene in complex issues (e.g. the lack of risk assessment tool designed for uniformed police officers) may also be connected to the frustration and victim-blaming attitudes observed among some individual professionals. However, blaming the under-resourced frontline responders who work at grass-roots level for being un-trained or working without adequate risk assessment tools is unreasonable. To improve the current situation, the focus should also be on levels of policy and management and the allocation of resources.

References

- Child Welfare Act. (2007). *Official Gazette of Finland*, 417/2007. https://www.finlex.fi/en/laki/kaannokset/2007/en20070417_20131292.pdf
- Council of Europe. (2019). *GREVIO's Baseline Evaluation Report*. <https://rm.coe.int/grevio-report-on-finland/168097129d>
- Criminal Code of Finland. (1889). *Official Gazette of Finland*, 39/1889, amendments up to 766/2015 included. https://finlex.fi/fi/laki/kaannokset/1889/en18890039_20150766.pdf
- D'amour, D. & Oandasan, I. (2005). Interprofessionality as the field of interprofessional practice and interprofessional education: An emerging concept. *Journal of Interprofessional Care*, (19), 8–20.
- Devroe, E. and Ponsaers, P. (2017). European national police systems and metropolitan realities. In Devroe, E., Edwards, A. & Ponsaers, P. (Eds.), *Policing European Metropolises* (pp. 23–74). Routledge.
- European Institute for Gender Equality. (2017). *Glossary of definitions of rape, femicide and intimate partner violence*. <https://eige.europa.eu/publications/glossary-definitions-rape-femicide-and-intimate-partner-violence>
- European Union: European Agency for Fundamental Rights (FRA). (2014). *Violence against women: an EU-wide survey*. <https://www.refworld.org/docid/5316ef6a4.html>

- Kelly, J. B., & Johnson, M. P. (2008). Differentiation among types of intimate partner violence: Research update and implications for interventions. *Family Court Review*, (46), 476–499.
- Kettunen, P. (2014). Conflicts and compromises in the Nordic pattern of social regulation. In Kettunen, P., Kuhnle, S. & Ren, Y. (Eds.), *Reshaping Welfare Institutions in China and the Nordic Countries* (pp. 96–121). NordWel Studies in Historical Welfare State Research 7.
- Leppäkoski, T., Paaivilainen, E. & Åstedt-Kurki, P., (2011). Experiences of emergency care by the women exposed to acute physical intimate partner violence from the Finnish perspective. *Int. Emerg. Nurs.*, 19(1), 27–36. <https://doi.org/10.1016/j.ienj.2010.02.006>.
- Monika-Naiset liitto ry. (2020). *Homepage*. <https://monikanaiset.fi/>
- Niklander, E., Notko, M. & Husso, M. (Eds.). (2019). *Intervening in domestic violence and training of professionals in social services and health care and the police: Evaluation of the EPRAS project*. Helsinki: National Institute for Health and Welfare. <http://urn.fi/URN:ISBN:978-952-343-413-4>
- Notko, M., Holma, J., Husso, M., Virkki, T., Laitila, A., Merikanto, J. & Mäntysaari, M., (2011). Lähisuhdeväkivallan tunnistaminen erikoissairaanhoidossa [Encountering domestic violence in specialist health care]. *Lääketieteellinen Aikakauskirja. Duodecim*, 127(15), 1599–1606.
- Polliisin tulostietojärjestelmä PolStat. (2020). Perheväkivaltatehtävät. Personal communication, Vesa Leppänen.
- Rikoksantorjunta.fi. (2020). *Marac*. <https://rikoksantorjunta.fi/en/marac>
- Rittel, H. and Webber, M. (1973). Dilemmas in a general theory of planning. *Policy Sciences*, 4(2), 155–169.
- Siltala P., Kuusinen-Laukkala A. & Holma, JM. (2020). Victims of family violence identified in emergency care: Comparisons of mental health and somatic diagnoses with other victims of interpersonal violence by a retrospective chart review. *Preventive Medicine Reports*, 19, 1–7. doi: 10.1016/j.pmedr.2020.101136
- Statistics Finland. (2021). *Recorded cases of domestic violence against minors decreased by 14 per cent*. https://www.stat.fi/til/rpk/2020/15/rpk_2020_15_2021-06-01_tie_001_en.html
- Tampere University Dissertations. (2020). *The Documentation of Family Violence in Healthcare and the Associations of Violence on Well-Being*. <http://urn.fi/URN:ISBN:978-952-03-1407-1>
- Victim Support Finland. (2020). *Homepage*. <https://www.riku.fi/en>
- Virta, S. and Taponen, J. (2017). Policing regime in transition in the Nordic countries: Some critical notes from the Nordic reality. In Devroe E, Edwards, A. and Ponsaers, P. (Eds.), *Policing European Metropolises* (pp. 121–144). Routledge.

