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Human factors shaping the cooperation of police with other sectors: The example of domestic violence

Factores humanos que moldam a cooperação da polícia com outros sectores

Los factores humanos que determinan la cooperación de la policía con otros sectores

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ABSTRACT:

Policing is a profession with a significant human factor component, and police psychology has contributed to its structure and to improve police relations throughout various fields of crime prevention and intervention. Within police and in police-client interaction, the management of the human factor has become quite elaborate. However, in the challenging field of police cooperation with other professions in domestic violence management, there is a lot of uncharted land. The EU-funded research project IMPRODOVA sought to address this topic in an empirical approach via document analyses and expert interviews. IMPRODOVA's main objective was to improve the cooperation and performance of frontline responder ecosystems to high-impact domestic violence considering existing heterogeneities across different settings. Its major results show, how communication, vision and leadership, and organisational learning are the key areas to be reinforced to support police interagency cooperation. Outputs for police practice (including an open access training website) are discussed in the following. Also, recommendations for police multi-professional and inter-agency cooperation are presented.

KEYWORDS: human factor, police psychology, domestic violence, interagency cooperation, training.

RESUMO:

O policiamento é uma profissão com uma significativa componente de factor humano, e a psicologia policial tem contribuído para a sua estrutura e para melhorar as relações policiais em vários campos da prevenção e da intervenção no crime. No seio da polícia e na interação polícia-cliente, a gestão do factor humano tornou-se bastante elaborada. No entanto, no desafiador campo da cooperação policial com outras profissões na gestão da violência doméstica, há muitas terras inexploradas. O projecto de investigação IMPRODOVA financiado pela UE procurou tratar este tópico fazendo uma abordagem empírica através da análise de documentos e entrevistas com peritos. O principal objetivo da IMPRODOVA era melhorar a cooperação e o desempenho dos ecossistemas de resposta da linha de frente à violência doméstica de alto impacto, considerando as heterogeneidades existentes em diferentes ambientes. Seus principais resultados mostram comunicação, visão, liderança e aprendizagem organizacional são as áreas-chave a serem reforçadas para apoiar a cooperação policial entre agências. Resultados para a prática policial (incluindo um website de formação de acesso aberto) são discutidos. Também são apresentadas recomendações para a cooperação policial multi-profissional e inter-agências.

PALAVRAS-CHAVE: factor humano, psicologia policial, violência doméstica, cooperação inter-agências, formação.

RESUMEN:

La policía es una profesión con un importante componente de factor humano, y la psicología policial ha contribuido a su estructuración y a mejorar las relaciones policiales en diversos ámbitos de la prevención y la intervención del delito. Dentro de la policía y en la interacción policía-cliente, la gestión del factor humano se ha convertido en algo bastante elaborado en la policía. Sin embargo, en el desafiante campo de la cooperación policial con otras profesiones en la gestión de la violencia doméstica, hay mucho terreno inexplorado. El proyecto de investigación IMPRODOVA, financiado por la UE, trató de abordar este tema

con un enfoque empírico mediante análisis de documentos y entrevistas a expertos. El objetivo principal de IMPRODOVA era mejorar la cooperación y el rendimiento de los ecosistemas de respuesta de primera línea a la violencia doméstica de alto impacto, teniendo en cuenta las heterogeneidades existentes en los distintos entornos. Sus principales resultados muestran cómo la visión y la comunicación, el liderazgo, y el aprendizaje organizativo son las áreas clave que deben reforzarse para apoyar la cooperación policial interinstitucional. Resultados para la práctica policial (incluido un sitio web de formación de libre acceso). Asimismo, se presentan recomendaciones para la cooperación policial multiprofesional e interinstitucional.

PALABRAS CLAVE: factor humano, psicología policial, violencia doméstica, cooperación interinstitucional, formación.

1. HUMAN FACTORS IN POLICING

Policing is a job that builds on communication. Especially, police officers on the beat, those in direct contact with victims and perpetrators, spend a lot of time listening, interrogating, explaining, informing, warning, mediating, and pacifying communication activities (cf. WESTLEY, 2005). Consequently, all kinds of human factors play a crucial role for successful police actions. Human factors first and foremost include humans' physical, psychological and social conditions, capabilities, and limitations (ROSENZWEIG; PAWLIK, 2000). With regard to policing, especially police psychology has contributed to an elaborated understanding of human factors, be it in the selection of police officers, dealing with mentally disordered persons, managing crowds and protests, guiding police investigation of serious crimes, hostage-taking, killing spree, profiling, the development of interrogation techniques, assessment of credibility, and survivability (e.g., DROR, 2013; HACKER; HORAN, 2019; WEULEN KRANENBARG; LEUKFELDT, 2021; STOTT; RADBURN, 2020).

Accordingly, within the police and in police-client interaction, the management of the human factor has become quite elaborated. Police psychologists' focus on human factors including cognitive and emotional factors such as perception, consciousness, learning and memory, problem-solving, judgments, motivation, personality, (body-) language, and the development of these factors within social relations (MARQUES; PAULINO, 2021). In order to structure and improve police relations in the various areas of crime prevention and intervention, police psychology has taken further steps outside the police organization to qualify cooperation with other professional groups (e.g., KAIP; IRELAND; HARVEY, 2022). For example, collaboration with community associations is an important prerequisite for community policing, as it determines how relationships with ethnic minorities can be constructive and whether conflicts with the community, such as those related to ethnic profiling, can be resolved with a strong focus on human factors toward restoring trust, respect, and justice (DECKER; KERSTEN, 2015). This includes the cooperation of police with community leaders, social workers, as well as leaders of cultural, sports, and religious institutions (KUNZ; VOGT; KERSTEN; BURCHARD, 2016).

Originally drawing from computational sciences, the term 'interoperability' found its way into police psychology, describing how different agencies and professions "work jointly in problem solving, particularly in emergency situations and incident" (CHARMAN, 2014, p. 102). Within these 'communities of practice', transfer of knowledge and learning is enabled, if participants emphasise the human factor and establish a constructive communicative environment and are willing and able to exchange knowledge (CHARMAN, 2014). Moreover, interoperability refers to the collaboratively harmonised exchange of different organisations in terms of procedures, data, infrastructure and applications (MOON; CLARKE, 2001). Whereas the question of procedures regards policies and procedures that enable organisations to exchange information, capabilities and services; the question of data regards information formats, data protocols, or databases that enable the exchange of data and information; the question of infrastructure regards the environment that enables integration; and the question of applications regards the set of applications that enable information exchange, processing or manipulation (MOON; CLARKE, 2001). In addition, intra- and inter-professional work is not static, but may alternate between collaborative or

competitive negotiations which also depend, to some extent, on the social status of the collaborating groups (COMEAU-VALLÉE; LANGLEY, 2020). Yet, although professionals usually agree about the need for a greater degree of interoperability, co-ordination and co-operation, the practical implementation seems to be rather difficult and framed by differing structural and cultural barriers like different value systems or identities (IRVINE; KERRIDGE; MCPHEE; FREEMAN, 2002).

Likewise, in the field of domestic violence and abuse, there is still a lot of uncharted land on how interoperability can be achieved (cf. VOGT, 2020). Domestic abuse implies all kinds of behaviour by an intimate or ex-partner including physical violence, sexual coercion, psychological abuse, and controlling behaviour causing physical, sexual, and/or psychological harm (WORLD HEALTH ORGANIZATION, 2021). Sadly, domestic abuse is a widespread problem all over the world with mainly women as victims. For example, Brazil (2018) had approximately 1.2 victims of femicide per 100,000 persons (UTSEY, 2021). Naturally, police are not the only professionals involved in the management of domestic abuse, but also other frontline responders like social workers, medical doctors, teachers, employers, and judges (e.g., PECKOVER; GOLDING, 2017). Transferring the concept of human factor-focussed interoperability to the context of police domestic abuse management, a large field of influential factors and tasks has to be acknowledged.

First of all, different professions bring with them different work cultures, like differing emphasis on different human factors, shaped by different *policies and legal frameworks* relevant to their work (e.g. MILLER, 2004). In order to understand success and failure in police interoperability, these legal framework factors need to be examined, as they shape professionals' understanding and have a direct impact on how domestic violence cases are dealt with (IRVINE; KERRIDGE; MCPHEE; FREEMAN, 2002). The central question here is whether such frameworks exist and are consistent with or contradict each other, especially those of the police.

Secondly, in order to quantify the extent of domestic violence incidents, victimisation, and thus, the workload for the police and other frontline professionals, data and statistics provide a way to translate the meaning of – and the understanding of different professional groups in dealing with – domestic violence (cf. MOON; CLARKE, 2001). This is a critical human factor. For example, while women's counselling services understand domestic violence in terms of the World Health Organisation's definition (2021), as only male perpetrated violence with female victims, police data typically includes male victims and female perpetrators. If the police want to share information about the extent of the problem or the effectiveness of certain interventions of domestic abuse management, they need to ensure that they speak the same 'language' as their non-police cooperation partners.

Thirdly, human factors also play a role when it comes to actual work applications in the context of interoperability (cf. COMEAU-VALLÉE; LANGLEY, 2020; MOON; CLARKE, 2001): the main objective of police and other responders working together in the field of domestic abuse pre- and post-intervention is to protect victims of domestic violence from further, more severe or fatal harm. To this end, they exchange information to better assess the risk of re-victimisation or killing of the victim. This is where thorough *risk assessment and case documentation* from all involved frontline responders is critical as cooperation can only be achieved if all first responders involved in a case (including the police) collect and document their knowledge about the cases and regularly reassess the risks of the victims to also detect changes. Indeed, interoperability based on shared information can only be successful if the information to be provided is available and valid (WITTENBAUM; HOLLINGSHEAD; BOTERO, 2004). Risk assessment tools can also serve as a guide for the proper collection of information (CAMPBELL; O'SULLIVAN; ROEHL; WEBSTER, 2005).

Fourthly, following the concept of “communities of practice”, the police and other frontline actors in the field of domestic abuse can learn from each other and benefit from each other's experience when they work together through *transfer of knowledge and training* (cf. JADOTTE; NOEL, 2021). Joint training events also save effort and costs and can inspire innovation. However, the question that arises from research on

domestic violence is whether and to what extent first responders even have relevant basic knowledge to share with each other; whether they are trained to work in communities of practice; and if the human factor of expertise and networking can come into effect at all (HOUTSONEN, 2020).

Fifthly, within domestic abuse management besides the core task of joint risk assessment meetings, *intra- and inter-organisational cooperation* enables frontline responders in domestic abuse management to benefit from 'short ways' of communication to e.g., quickly solve their clients' problems or administrative issues that in turn supports victims' safety and satisfaction. Research has shown that especially human factors like social norms, cognitive biases, hierarchy and relationships facilitate the responsiveness and thus interoperability of intra- and inter-organisational networks (LIU; LYNDON; HOLL; JOHNSON; BILIMORIA; STEY, 2021)

As the potential of cooperation is currently only rarely explored by initiatives serving as good practices and lighthouses, victims', witnesses', and perpetrators' needs cannot be met in a comprehensive way (VOGT, 2020). Thus, the contribution of police psychology expertise for interagency and multi-professional cooperation in domestic violence cases is essential. This will be demonstrated in the following by presenting the results of the research project IMPRODOVA which started exactly at this point of departure. Accordingly, the objective of this paper is to analyse the target situation and the *status quo* of (1) policies and regulatory frameworks, (2) data and statistics, (3) risk analyses and case documentation, (4) transfer of knowledge and training, and (5) intra- and inter-organisational cooperation in domestic abuse management and to present potential tools or guidance as well as recommendations regarding the influence of human factors within police cooperation with other professions. Taken together, the overall purpose of this study is to improve the collaboration and efficiency of police when interacting with other groups of domestic abuse frontline responders by understanding similarities and differences resulting from different settings and organizational ecosystems.

2. RESEARCH APPROACH

2.1 Aims and objectives of the IMPRODOVA project

The EU-funded project *Improving frontline responses to high impact domestic violence* (IMPRODOVA) was a research and innovation project investigating human factors shaping institutional responses to domestic violence. It aimed to improve and integrate the response of police, social work, health and non-governmental organizations (NGOs), and other actors making up the ecosystem of frontline responders to domestic abuse or violence. Expecting that across Europe best practices can be identified from which other stakeholders involved in the management of domestic abuse could learn. Thus, the project's main objectives (IMPRODOVA Consortium, 2019) were to improve interagency cooperation among frontline responders, to develop and test tools for this aim, and to integrate human factors in frontline responders' perception of and intervention in cases of severe domestic violence and abuse. Specifically, IMPRODOVA sought to improve collaboration and performance of frontline ecosystems responding to severe domestic abuse, taking into account existing heterogeneities in different environments. In doing so, IMPRODOVA wanted to map the regulatory frameworks, guidance, risk assessment formats, and training materials that shape the institutional response to severe domestic abuse in Europe and identify gaps, deficiencies, and inconsistencies. Additionally, the project aimed at documenting how the current legal frameworks shape field operations and collaboration among responders, identifying the role of human factors, and describing and highlighting best practices. Moreover, its objective was to develop new and revise existing tools, guidance, and training for first responders, using the results of in-depth field research, first-hand knowledge of stakeholders, and addressing identified gaps, taking into account differences across national and local sites. Finally, IMPRODOVA had

planned to evaluate, validate, and adapt tools and guidance using stakeholder feedback to demonstrate the feasibility of an innovative approach to supporting and guiding first responder networks in severe domestic abuse, leveraging stakeholder knowledge and employing a bottom-up strategy to identify and productively address human factors (IMPRODOVA Consortium, 2019).

2.2 Composition of the IMPRODOVA research team

To follow such ambitious goals, the project partners comprised 16 teams from eight European partner countries/regions (Austria, Finland, France, Germany, Hungary, Portugal, Scotland and Slovenia). The partners represented a variety of professions including five police universities/colleges, six police organizations, and institutions like medical science faculty, independent/national research, public health, and NGO. The authors of the study both worked in this project from beginning to end.

2.3 Focus of the IMPRODOVA project

To realize its objectives, the general structure of the IMPRODOVA project looked at five overarching topics related to the management of domestic abuse, namely policies and regulatory frameworks, data and statistics, risk analyses and case documentation, transfer of knowledge and training, and intra- and inter-organisational cooperation (VOGT, 2020). These topics were investigated in the police, the medical, and the social sectors assuming them to be the most important frontline responders in the management of domestic abuse.

2.4 Data collection

Formal ethical approval for the study was obtained from the Westfälische Wilhelms-Universität Münster, Germany. After the approval was achieved, and with regard to before mentioned five topics, the target-situation of domestic abuse management was analysed via literature reviews and then compared to the status quo which was realized by a Europe-wide interview study within the eight partner countries processing 296 expert interviews at 19 places, as well as supporting document analyses and observations. The methodology of data collection and analysis followed the grounded theory approach (CORBIN; STRAUSS, 2014), with literature reviews serving as a starting point for identifying the target situation. Step by step, then, expert interviews with professionals from police, medical and social service sectors were conducted to describe the *status quo*, and to enrich the findings and gain a deeper understanding, the results of further document analyses and observations were included in the findings. A detailed description of this approach is provided by DELPEUCH and BONNET (2018), explaining how best and average practices were determined and identified, what topics were covered by the interviews, and how information was gleaned from observations and information on local conditions. In short, all consortium partners had the task of identifying a list of three to five potential sites in their respective countries, from which 19 sites were finally selected at a project meeting. Altogether, the final convenient sample included “41 interviews from Austria, 44 interviews from Germany, 35 interviews from Finland, 48 interviews from France, 32 interviews from Hungary, 26 interviews from Portugal, 30 interviews from Scotland, and 34 interviews from Slovenia, were included in the analysis” (IMPRODOVA CONSORTIUM, 2020, p. 6).

2.5 Data analysis

Data analysis followed the grounded theory approach (CORBIN; STRAUSS, 2014) comparatively contrasting the police, the medical, and the social sector with regard to five themes identified before as relevant for domestic abuse management, i.e. (1) policies and regulatory frameworks, (2) data and statistics, (3) risk analyses and case documentation, (4) transfer of knowledge and training, and (5) intra- and inter-organisational cooperation. The comparative contrasting was furthermore clustered into topics of target situation and *status quo*. As the research was conducted in eight European countries, partners from each country produced joint country reports. Based on the findings about the average and best practices of inter-agency management of domestic abuse that emerged from the merging of the reports, insights were gained into the human factors affecting police inter-agency collaboration.

2.6 Tool development

Based on the results from the comparison of the target-situation and the *status quo* situation, five guidance tools were developed and evaluated, namely a *Policy Development Module*, *Data Improvement Recommendations*, a *Risk Assessment and Case Documentation Module*, a *Training Platform*, and a *Communication Platform Pilot* (to be explained in more detail below).

3. RESULTS WITH REGARD TO IMPROVING FRONTLINE RESPONSES TO HIGH IMPACT DOMESTIC ABUSE

Predictably, the IMPRODOVA project has produced a number of results which, due to their abundance, can only be touched upon in this dossier by way of example. However, the common thread running through the results is the translation of the different professional ‘languages’ of the cooperation partners, i.e. views, priorities, or problem awareness, and the integration of these into police work. This human factor of language and translation has already been identified as central in other scientific work and samples investigating human factors in interoperability (CHARMAN, 2014; IRVINE; KERRIDGE; MCPHEE; FREEMAN, 2002). In order to find a mutual understanding and ‘a common language’, the research results on the different areas and, among others, a training tool on domestic violence are presented in the following.

3.1 Policies and regulatory frameworks

Target-situation. Examining policies and regulatory frameworks, we found that whilst most IMPRODOVA partner countries follow the Istanbul Convention (COUNCIL OF EUROPE, 2011), domestic violence is not officially defined in all IMPRODOVA countries’ legislations, and it is not part of the Penal Code. Reasons for this are manifold: while some countries and sectors already made up their individual legislation long before the Istanbul Convention (COUNCIL OF EUROPE, 2011) came into force, others do not even have guidance or policies regarding the management of domestic violence. For example, in the medical sector a lack of guidelines has to be stated in the majority of the investigated countries. Based on the respective definition of domestic violence, the focus of policies is set (HERBINGER; NEUNKIRCHNER; LEONHARDMAIR, 2020): in most countries and in accordance with the Istanbul Convention (COUNCIL OF EUROPE, 2011), a gender-based concept of domestic abuse is prevalent, meaning that domestic abuse is understood as forms of violence against women and children. Yet, the definition whether domestic violence is understood as intimate partner violence, domestic violence, or family

violence determines national action plans. Also, the comprehension of the phenomenon as either domestic violence or domestic abuse shapes the action of governments and sectors. Additionally, no definition of severe domestic violence was found in any of the investigated policies. Notwithstanding, domestic abuse is considered as an independent offense in some countries (e.g., Portugal).

Status quo. Research published by the IMPRODOVA Consortium (2020) found that international standards were relatively well implemented in all partner countries and that the basic steps in domestic violence management are very similar. For example, police are empowered to enter private property, arrest perpetrators, issue protection orders, et cetera to address all forms of violence. All in all, there is a good coordination of police with specialized support services for victims' referrals. However, a fast response to victims by specially trained officers is necessary as domestic abuse specialists are better able to meet the needs of victims than generalists (here it is at the discretion of the police how much help the victim receives). Discretionary means that the quality of service depends on the quality of the individuals on duty that day, rather than the quality of the organizational processes in place to ensure a higher standard of service. In some countries, such as Hungary, Slovenia, or Portugal, virtually all police officers responding to domestic violence on the front lines are generalists. In other countries, such as Scotland and Finland, most responders are made up of specialists. In France, Germany, and Austria, this varies by location. In the case of domestic violence, police discretion was analysed in the 1980s as a key factor in the inadequate care of victims of domestic violence because police officers traditionally tend to view domestic violence as a private family matter rather than the crime that it is. Thus, a need for training has to be stated for all investigated sectors. Most importantly, there is a need for at least one specialized officer per police unit, for domestic abuse and sexual violence.

Tool. To meet the demand for informed policies, IMPRODOVA formulated a Policy Development Module (OCTOBER; NIPULI, 2020), describing how to bring the perspective of first responders into the policy-making cycle. The instrument mainly consists of a checklist for policy formulation in the area of domestic abuse. The tool was evaluated and adapted (LOBNIKAR; VOGT; KERSTEN, 2021; OCTOBER; NIPULI, 2021).

Human factors. Police work is grounded in legislation. If regulation and standards are missing, gaps in policing will occur. Also, regulations and standards set a framework and support morale by providing a guidance function. Likewise, police's multi-agency cooperation and interoperability should be grounded in standards. Notwithstanding, police need to be aware of the lack of regulation and standards in their collaborating partners' organisations with regard to managing domestic abuse cases. Here, police can act as role model and in the mode of 'communities of practice' guide other partners towards minimum standards when handling domestic abuse cases. On one hand, this will foster procedures of interoperability (cf. MOON; CLARKE, 2001). On the other hand, this will set transparent expectations and avoid misunderstandings, which will in turn fuel motivation for collaborative work (e.g. LIU; LYNDON; HOLL; JOHNSON; BILIMORIA; STEY, 2021).

3.2 Data and statistics

Status quo. According to Fagerlund and Houtsonen (2019), data and statistics available to determine the epidemic of domestic abuse are victimization studies and crime statistics. Usually, at least one national survey could be found to determine victimization. For most examined countries, the results of the 2014 survey conducted by the European Agency for Fundamental Rights (FRA, 2014) were available. However, this survey included only women, which implies a lack of information on the situation of boys and men as potential victims of domestic abuse. Besides, victimization studies often lack representativeness and are usually one-shot studies.

Usually, crime statistics are limited to acts defined as crimes by police. As mentioned above, the way police report domestic abuse cases depends on the respective country. Altogether, the comparability of crime statistics depends on different legislations. Also, statistics on police measures are often missing as well as emergency call or control centre statistics. Here, exceptions are France and Scotland, which also have police-recorded data on incidents that are not reported as crimes. Likewise, statistics from single organisations from the medical sector and the social sector are either not accessible or non-existent at all.

Guidance. Respectively, the IMPRODOVA report by Burman, Brooks-Hay and Bradley (2020) gives recommendations for data collection in the field of domestic abuse. Basic information such as gender, type of relationship, number of victims, perpetrators, and offenses, has to be collected. More complex information, like police actions or type of abuse, is also relevant. The authors suggest establishing a national “Day to count” (BURMAN; BROOKS-HAY; BRADLEY, 2020, p. 23), to bring the importance of statistics and the scope of domestic abuse to public and governmental attention. Currently, there are too little data and too little knowledge about domestic abuse happening everywhere. Naturally, data collection needs purpose and a clear definition. It needs to consider multiple offenders; how police find out about the acts; how first responders use the data; and how the data should be made available to the public (BURMAN; BROOKS-HAY; BRADLEY, 2020).

Human factors. Data and statistics are necessary to illustrate the scope of domestic abuse and to bring the matter back to consciousness and to motivate action. Naturally, it is also a feedback on how successful (collaborative) risk assessment and action might have been, for example in preventing intimicides. It is a starting point to discuss the effectiveness of measures and to find out in what categories of domestic abuse victims need intensified support, for example. Collecting data and creating statistics should not over-burden interoperability or police work (and that of other sectors respectively) but qualify the work (to be) done. At the same time, collating and comparing domestic abuse-related statistics in interagency collaboration bears the potential to draw an even bigger and more informative picture of the needs of those affected by domestic abuse. This will also support collaborating partners to understand each other’s professional language and work priorities (cf. IRVINE; KERRIDGE; MCPHEE; FREEMAN, 2002).

3.3 Risk analyses and case documentation

Target-situation. While the Istanbul Convention requires risk analysis and case documentation (COUNCIL OF EUROPE, 2011), sector-specific policies – if they exist – present a wide range from no requirements of risk assessment to very thorough risk assessment requirements like the use of “DASH” (RICHARDS, 2009) in multi-agency risk assessment conferences (MARACs). There are references of risk assessment processes to political directives, especially in the social sector. Importantly, risk assessment is linked to professional risk management and thus, the existence and quality of risk assessment directives will directly impact police operations and in turn victim-survivors’ safety (SONDERN; PFLEIDERER, 2020). Relatedly, case documentation availability and its depth vary across sectors. This is also in line with rare references of case documentation guidelines to national directives (except data protection directives). Thorough case documentation can serve as evidence in court, however, in some countries, only case documentation from the police and the medical sector are considered valid information, while the social sector is not heard. To maintain a high standard of domestic abuse case documentation, training and quality reviews are required.

Status quo. Likewise, research findings on practices regarding domestic abuse risk assessment and case documentation, show that police oscillate between using recognized instruments for risk assessment versus gut feeling (HERA; SZEGŐ, 2020). Usually, police case documentation is well elaborated. In contrast, there is a tremendous lack of risk assessment in the medical field where case documentation is mainly limited to mental and physical health issues. Also, in the social sector, risk assessment and case documentation are underdeveloped. Interestingly, the example of risk assessment clearly indicates the associated human factors

and their implication for police cooperation. In Austria, for instance, the function of risk-assessment tools for interagency cooperation differs between sectors. While the police use them for brief insight into cases and for mitigating gaps in the training of police officers (as they can use the tool as a checklist for interrogation for example), the medical sector uses these tools to compensate the lack of resources and sensitivity and to identify domestic abuse cases, and the social sector uses these tools for resource allocation. Thus, risk assessment tools fulfil multiple purposes and can be used as a translation and communication tool during interagency cooperation.

Guidance. As shown above, there is a need for mandatory guidelines and training regarding risk assessment tools as well as regular updating of the risk assessment made for each case. Also, interagency cooperation in risk assessment will give the police the opportunity to assess a case best by including all available perspectives. To face such needs, IMPRODOVA provides an online Risk Assessment and Case Documentation Module (<https://training.improdova.eu/en/training-materials-for-the-health-sector/risk-assessment-instruments/>) that gives an overview on what risk factors might be relevant and how the related process should look like. It is not a risk assessment tool by itself, but rather a recommendation for police to design their own risk assessment procedure. Mainly, the proposed integration of risk analysis into first aid in cases of domestic violence foresees the following four steps: (1) identification of risk factors, (2) risk assessment, (3) description of necessary measures, and (4) follow-up. The IMPRODOVA Risk Assessment and Case Documentation Module has undergone evaluation and related adaptation (LOBNIKAR; VOGT; KERSTEN, 2021; SZEGÖ; HERA, 2021).

Human factors. When frontline responders evaluate risk using gut feeling, their subjective perceptions are shaped by prior experience. In addition, current events can influence their gut feeling. Even if the gut feeling itself has an information value that should not be underestimated, additional validated instruments should be used in the risk analysis to ensure that at least all red flag criteria have been taken into account. It is also important to document the risk assessment and the case itself. Good case documentation can be the decisive factor in front of a court. As documentation is often considered as draining factor in work life, police leaders should take their supervisory role seriously and check the quality of their subordinates' reports in domestic abuse cases. The best chance to collect information from all possible angles and to validate police risk assessment by other sources of information is risk assessment in form of conferencing as realized in MARAC, which will then guide subsequent action by police and the collaborating frontline responders. Unfortunately, the current lack of case documentation and lack of domestic abuse risk assessment in non-police organizations deprives interoperability of any working basis so the human factors issue would not be relevant either. However, in the initiatives serving as good practices and lighthouses, the form of the human factors is exemplary: There is strong pre-defined leadership, communication on eye-level and open sharing of information motivated by a joint focus on victims' safety (BRADLEY et al., 2020) which is also in line with the findings by CHARMAN (2014).

3.4 Transfer of knowledge and training

Status quo. Although the Istanbul Convention (COUNCIL OF EUROPE, 2011) requires this, professional training for those who see perpetrators and victims of domestic abuse is not offered systematically and comprehensively, especially in the health sector. Often, it is part of basic education (e.g., for police officers), although the information is scattered across curricula which is detrimental to an overall understanding (HOUTSONEN, 2020). Transfer of knowledge about domestic abuse is elective in some countries and sectors and mandatory in others. The thematic focus of the police training is perpetrator-oriented; protection of children is also emphasized; whereas questions around the work with perpetrators are usually neglected.

Tool. To meet the needs of enlarged and qualified knowledge, IMPRODOVA set up the training website <https://training.improdova.eu>, which contains information and training materials for first responders

specialized for the three target groups: police, medical staff, and members of the social sector. All three training tracks include an introduction, specialized information, and features like instructional videos. All materials presented on the homepage are freely accessible and in part also editable to enable trainers to adapt the materials (e.g., PowerPoint presentations) according to their needs. Topics are organized in seven modules and cover themes like forms and dynamics of domestic violence, indicators of domestic violence, communication in cases of domestic violence, police investigation and legal proceedings, risk assessment and safety planning, international standards and principles of inter-organisational cooperation, and risk assessment in cases of domestic violence in multi-professional teams. The training website also underwent evaluation and adaptation (LOBNIKAR; VOGT; KERSTEN, 2021; MELA; HOUTSONEN, 2021).

Human factors. The better informed frontline responders are about domestic abuse and its varieties, the better they are able to prevent, detect, and intervene in domestic abuse cases. Especially police leaders should be a role model to their staff in actively seeking training demonstrating that there is no stop in learning about domestic abuse as the phenomenon continues to evolve, and practice and research also constantly provide new insights that support the management of domestic abuse. With regard to interoperability, consideration should also be given to creating training opportunities for police along with other responders to facilitate interagency learning in the sense of ‘communities of practice’ (e.g., CHARMAN, 2014) and to explore what other approaches to addressing domestic abuse have proven successful in other sectors or regions, for example. At the same time, police should be aware that their collaborative partners are either significantly more or less informed about the phenomenon of domestic abuse and its management (professionals from the social vs. health sector) and thus may need to negotiate their role within inter-agency settings (cf. COMEAU-VALLÉE; LANGLEY, 2020).

3.5 Intra- and inter-organisational cooperation

Target-situation. Although required by international standards like the Istanbul Convention (COUNCIL OF EUROPE, 2011), the official request for interagency cooperation in domestic abuse management is often missing across professions, also with regard to risk analysis (VOGT, 2020). One positive exception are the MARAC meetings where cooperation is an immanent part of risk assessment procedures. Of course, there are best practice examples (e.g. MACHADO; PAIS; MORGADO; FELGUEIRAS, 2021) that are piloted to serve as blueprint for others. At times, the possibility to cooperate depends on releasing professionals from confidentiality obligations. Related to this gap, training and teaching content on cooperation are missing.

Status quo. IMPRODOVA research has shown that good partnership against domestic abuse starts with defining a priority target group. The partnership has to be recognized officially and be led by a financially independent steering committee. Also, it needs to be comprehensively organized for thoughtful exchange and use of information to manage especially high-risk cases of domestic abuse. To be able to multiply knowledge, such partnership furthermore needs specialized contacts in each partner organization that facilitate the transfer of information into their own organization (BRADLEY et al., 2020, LOBNIKAR; VOGT; KERSTEN, 2021).

Tool. To support interagency cooperation and communication, IMPRODOVA pilot tested a digital communication platform for a network of first responders. The piloting took place in Slovenia and was administrated by the police in the local area of Murska Subota. Other participants included the social workers of a counselling centre. The software chosen for the communication platform was the fee-based stashtat[®], due to its high security standard. Further description and evaluation results are published by Vogt (2021).

Human factors. Interagency cooperation most often implies multi-professional collaboration in the field of managing domestic abuse. While other institutions and other professions bring their own cultures, also the cooperation itself connects to a history of cooperative attempts that may be burdened by failure and stereotypes (cf. IRVINE; KERRIDGE; MCPHEE; FREEMAN, 2002; MILLER; KWAN; NG; FRIESEN;

LOWE; MANIATE; LAKSHMI; NIRULA; RICHARDSON, 2018). Police and its masculine norms have then to be arranged in accordance with feminist norms of social workers, for example. To be able to make use of interoperability in domestic abuse management, the human factors stemming from institutional logics of dealing with domestic abuse have to be understood. This contains own police logic and also those by others like social workers and medical sector professionals. Police logic in dealing with domestic abuse is informed by the penal code; it is perpetrator-oriented and emphasizes prevention and law enforcement. Police put a strong focus on physical and sexual violence as dominant forms of domestic abuse. Their strength lies in criminal prosecution, while their weakness is to meet the needs of victim-survivors. In contrast, the logic of the medical professions is on injury and illness, emphasizing patient-oriented procedures and recovery. Within the medical sector, a strong focus is put on physical and sexual violence and neglect as dominant forms of domestic abuse. Their strength - which is usually unknown to them - is that they are the initial contact address for victim-survivors of domestic abuse (SONDERN; PFLEIDERER, 2021). Unfortunately, they rarely detect domestic abuse without a mandatory routine examination. Compared with the police and the medical profession, the logic of the social sector is to analyse the violent relationship and how it can be overcome, characterized by a strong victim-orientation. The focus is on psychological and financial violence and coercive control as dominant forms of domestic abuse. While social workers have strong expertise in support of victim-survivors, they have no power of action against perpetrators. It becomes clear that police and all other sectors with their specific strengths and gaps can benefit from cooperating aiming at managing domestic abuse cases in the best possible manner. In a nutshell, police psychologists' expertise is needed here to enable productive and sensitive communication always pointing out that cooperation is the way to support victims comprehensively and save their and their children's lives.

4. FINDINGS AND RECOMMENDATIONS REGARDING HUMAN FACTORS IN INTERAGENCY COOPERATION

Analysing the human factor in this specific type of police interoperability is central to the success of multi-professional networks with police involvement. According to Hagemann-White (2017, p. 1, translated by the authors),

“the chain of intervention is perhaps best imagined as a ring with many doors, which can be entered or left at any point, and which is also internally connected by many crossroads. It is crucial that the chain (as an offer) is not interrupted, but has connection possibilities at every point, which are mediated by the facilities. The principles of maintaining confidentiality and strengthening the self-determination of those affected remain intact despite all cooperation”.

To enable police and other frontline responders to build a productive network or ‘chain of intervention’ in the management of domestic abuse, police psychologists' expertise is needed to highlight the human factor which is, beside all technical, legal and administrative tasks, the most decisive factor (IRVINE; KERRIDGE; MCPHEE; FREEMAN, 2002). Police psychologists who facilitate multi-professional cooperation need to be aware of human factors that hinder interoperability in domestic abuse cases and lead to demotivation and frustration. Such factors are:

- Former conflicts with other partners in the cooperation network that put a burden on work relations.
- Organizational egoism, i.e. that partners work in their own institutional logic and consider their logic as the only adequate response and do not integrate their partners' logic into the overall picture.
- Lack of cooperation and transparency among network partners. Also, some potential partners are desperately needed in such networks but do not cooperate. For example, judges do not want to be manipulated but to maintain their independence; and also physicians are very hard to involve in such networks. However, most physicians are not trained in securing evidence in a way that it can be used for legal proceedings and domestic abuse cases would highly benefit if physicians knew about

domestic abuse and its management and would send the victim to a forensic institute instead of diagnosing unspecific injuries.

- Dependence on one network partner – as usually, the police is the central figure in such networks, changes in case processing affect all partners of the network, and also prosecutors depend on good police work.
- Lack of feedback, i.e. when a case is “pushed forward”, the individual frontline responders, especially the police, in most cases do not receive any feedback on the development of a single case (due to many reasons, e.g. data protection). They do not need this feedback for their daily work, however, it would benefit their motivation and help them see the meaning of their work as processing domestic abuse cases often seems to be tilting at windmills.
- High costs in terms of high effort and disappointing output. The processing of domestic cases takes a lot of time and effort, which has the potential to demotivate those at the frontline. For example, dealing with reluctant victims, dealing with psychological violence like in stalking cases where there might be a lot of indication but little evidence, or slow processing of investigation files at the prosecution. These issues are not weaknesses of cooperation networks themselves, but costs and strains that are generally observed when dealing with domestic abuse.
- Too many guidelines and cooperation agreements may be necessary to keep such networks running and structure communication (MOON; CLARKE, 2001), but at the same time, they tend to overcomplicate the cooperation.

Equally, police psychologists should support multi-professional cooperation in domestic abuse cases by the following steps of reinforcing a common language of those working collaboratively (cf. CHARMAN, 2014):

1. Communication. Only multi-professional cooperation based on mutual trust can work effectively. This also implies appreciative tone and respectful leadership (VOGT; VAN GILS; VAN QUAQUEBEKE; GROVER; ECKLOFF, 2021). Accordingly, if the network is structured by flat hierarchies, everyone can refer to the other (as pointed out by the quote of HAGEMANN-WHITE, 2017 and also by the concept of accessibility by LIU; LYNDON; HOLL; JOHNSON; BILIMORIA; STEY, 2021). Also, short ways mean fast processing of high risk cases of domestic abuse. Altogether, good, constructive communication will fuel motivation for those who do the work.
2. Vision & leadership. Clear guidance is a sign of good communication and an important prerequisite for steering human factor variables into the favoured direction. It thus needs advocates and multipliers who drive improvements in the fight against domestic abuse. Often, police are the central figure and need to alter police regulations in a way that they are allowed to cooperate with other partners and exchange sensitive information (cf. MOON; CLARKE, 2001). Especially exchange is critical to interoperability success (CHARMAN, 2014) and needs to be fostered.
3. Organizational learning. It is necessary that network partners in multi-professional cooperation mutually introduce themselves and their way of processing domestic abuse cases so that all other partners may better understand their options and limitations and how cooperation can be improved (cf. MILLER; KWAN; NG; FRIESEN; LOWE; MANIATE; LAKSHMI; NIRULA; RICHARDSON, 2018). Furthermore, such networks should also be engaged in giving their knowledge to external parties and for example, to train judges. This will give them the chance to grow as a network and also to learn from those who are trained about their constraints and opportunities for example via ‘communities of practice’ (CHARMAN, 2014). Related to that is public relations work. If a cooperation network is visible outside, this gives back appreciation from outside to those often “unseen” frontline responders and their daily fight against domestic abuse.

Thus, we recommend to support human factors in the multi-professional policing of domestic abuse cases by maintaining motivation high by means of finding a common 'language' with regard to policies and regulatory frameworks, data and statistics, risk analyses and case documentation, transfer of knowledge and training, and intra- and inter-organisational cooperation. Police psychologists can support to find and speak that language to ensure a smooth communication and relatedly a strong vision and leadership (e.g., via storytelling). Moreover, motivation can be supported by keeping a growth-mindset and also by spreading the word about cooperation which is a key aspect of success in learning and training (cf. JADOTTE; NOEL, 2021). It is inevitable to maintain a respectful- and trustful spirit especially when problems and criticism have to be discussed. In this vein, frustrating issues need to be addressed regularly and early. To do so, feedback must be enabled, for instance in form of organizing informal meetings for those who do the work. A strong multi-professional network can efficiently protect, support, and help victim-survivors of domestic abuse by conducting valid risk-assessment and ensuring that no victim-survivor is left behind. Additionally, such a network has the potential to have a voice that will be heard at the policy level.

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