



# Domestic violence and social norms: attitudes and practices of criminal justice and health workers in Norway and Brazil



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## Background

Gender-based domestic violence has gained significant visibility in recent years and is currently considered a priority in the field of public health.

## Objectives

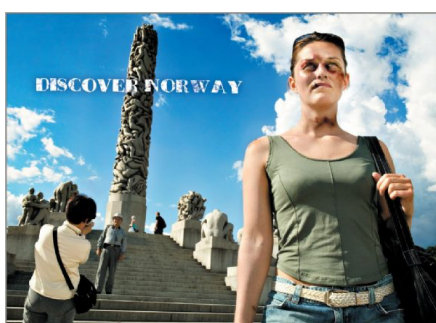
This study explores how professional and social norms and regulations impact the attitudes and practices of health and criminal justice professionals regarding domestic violence against women in Brazil and Norway.

## Methods

A total of 16 in-depth interviews were conducted; eight in Brazil and eight in Norway, with four health professionals and four criminal justice professionals in each country. We focused on their experiences with cases of domestic violence, their perceptions of their professional responsibilities, as well as the challenges they encounter. We analyzed the transcribed interviews using a focused open coding process.

*Domestic violence is not common in my daily clinic, but it appears sometimes. I have personally treated a few cases. I still feel uncomfortable with these kinds of cases. I am uncomfortable interfering in these family affairs (...). I cannot help them when they do not want me to call the police (...) I need to respect their will and this is very frustrating. (Kristin, Norway)*

*(...) when an individual is shot and enters the hospital, health professionals have, as a protocol, reported cases like that to the police. In the case of female victims, sometimes they do not give this information to the police, which I think is a big mistake. (Fernando, Brazil)*



## Results

The participants ranged in age from 32 to 59. All of them worked with domestic violence victims both with and without supervision. In both countries, professionals felt that they had not received enough training on how to handle domestic violence.

Both countries have regulations to provide professionals with guidance on navigating services related to domestic violence cases; and their governments try to give professionals some rules to follow when helping domestic violence victims.

In both countries, professionals reported the need for a closer collaboration with social workers and mental health specialists, since domestic violence is closely related to both social norms in the communities and to individual psychological factors.



## Conclusion

Individual characteristics and experiences, the emphasis on confidentiality, as well as fear of repercussion, can affect the way health or criminal justice workers perceive and deal with domestic violence cases. Personal psychological factors and social norms concerning the acceptability of domestic violence are critical risk factors for women, and a multi-professional approach is therefore needed.