



The National Framework for Family Protection against Violence

Second Edition

2016

Contents

Introduction.....	4
Jordan's response to the problem of family violence.....	5
The National Framework for Family Protection against Violence.....	7
I: The goal of the National Framework for Family Protection against Violence.....	7
II: Basic principles of the National Framework for Family Protection against Violence.....	7
Definitions and Terms:.....	10
- Family violence definitions and terms.....	10
- Case management definitions.....	11
Prevention of family violence:.....	12
- Primary level of prevention (awareness-raising programmes):.....	13
- Secondary level of prevention (prevention through intervention programmes):.....	15
- Tertiary level of prevention (prevention through aftercare):.....	16
Case Management:.....	17
- Case management definition.....	17
- Case management methodology and tools.....	17

- Case management levels.....	19
- Case management controls between partners.....	19
Stages of response to cases of family violence.....	20
Multisectoral Institutional Interventions:.....	28
Supervision, technical support, and evaluation of the implementation of the National Framework for Family Protection against Violence:.....	29

Introduction

In 2006, The National Council for Family Affairs (NCFA) worked in partnership with the Family Protection Project (implemented 2000-2005) to prepare the first edition of the National Framework for Family Protection against Violence (NFFPV), a national, practical document on family protection against violence. The NFFPV specifies the basis for providing prevention and protection services and seeks to bridge the gaps in existing practices at the national level. It also aims to clarify the roles, responsibilities, authority, and ways in which governmental and non-governmental organizations should deal with cases of family violence. Moreover, the NFFPV aims at coordinating and integrating the efforts of relevant entities through a model of holistic national procedures. The NFFPV was adopted by the Council of Ministers in decision number (4637) during its session held on 21/4/2009 as a national reference document in responding to cases of family violence emphasizing the commitment of all concerned parties to work in line with the role assigned by the content of the document.

Ten years following the establishment of the NFFPV and its implementation at the institutional and field levels, and as a result of numerous legislative and institutional developments, it became important to review the document to analyze the extent of its effectiveness, efficiency and application, to assess the clarity of roles of national institutions in dealing with cases of family violence, and to identify gaps in the field.

Based on NCFA's role in contributing to the development of policies and plans pertaining to family members and following up on implementation, NCFA has prepared the second edition of the NFFPV in cooperation and partnership with NCFA's Board of Trustees, the National Task Force for Family Protection against Violence, and a number of UN agencies in Jordan (UNICEF, UNFPA, UNHCR). The purpose behind this was to enhance the NFFPV's effectiveness in setting forth national and practical policies related to family protection against violence and identifying survivor-centered multidisciplinary mechanisms. It also aims at clarifying roles and responsibilities for all national institutions in line with the actual and legal roles of the institutions concerned. This is done in a way that enhances the effectiveness of their response to cases of family violence and fosters the provision of effective and quality services that meet clients' needs within a multidisciplinary approach that ensures respect for the rights and wishes of survivors, confidentiality, privacy, protection and non-discrimination.

Jordan's Response to the Problem Family Violence

The family is regarded as the first building block in any given society, wherein society's strength or weakness is measured by the level of family cohesion or its weakness. The family constitutes the natural environment for growth and development for all its members, particularly children, because the family has a great potential to provide protection for its members and meet their physical and emotional safety needs. Moreover, family privacy and independence are among the values that are well-preserved in various societies and cultures. Allah Almighty says: Mankind, fear your Lord, who created you of a single soul, and from it created its mate, and from the pair of them scattered abroad many men and women; and fear God by whom you demand one of another, and the wombs; surely God ever watches over you." {*Women – An Nisa': 1*}¹

Because the family is considered the primary source of knowledge wherein its members learn social behavior and acquire their cultural identity and spiritual values, Jordanians' perception of the family stems from their religious and cultural values. These values foster the role of the family in upbringing and care for its members, uphold affectionate and compassionate relations among its members, and stipulate good treatment among all family members.

Family violence is a global problem that exists in all countries of the world. Children, women and the elderly are among the most vulnerable groups that bear the brunt of the effects of family violence with its multi-faceted consequences (e.g., social, psychological, health, and economic consequences). It is also considered one of the most important causes of family disintegration. As such, addressing the problem of family violence by safeguarding the rights of its members and providing all with equal opportunities becomes essential for improving the quality of life, protection and stability of families.

The principle of equality and the importance of preserving the family as an entity and providing it with safe living are all enshrined in national legislation and documents. The **Jordanian Constitution** and its amendments for the year 2011, Article (1) stipulates that all Jordanians are equal before the law. Article 4/6 stipulates that the family is the foundation of society based on religion, morality and patriotism. The law preserves the family as a legal entity and strengthens its ties and values. **The National Charter**² (1990) emphasizes the need for the State to provide the family with the means for decent living. The **Jordan First**³ document stressed the need to revise human rights legislation, particularly the rights of women and children, and to comply with international conventions ratified by Jordan.

¹The Nobel Qur'an. English translation by A. J. Arberry available at https://www.quranpdf.net/quran/en/Quran_en_A._J._Arberry.pdf

²In April 1990, the late King Hussein had appointed a 60-member royal commission with the aim of drafting guidelines for carrying out political party activities in Jordan. The commission produced a written consensus referred to as the National Charter. The Charter outlines guidelines that facilitate dialogue between the executive and legislative bodies and between decision-makers and intellectual elites with regards to issues of authority, rights and responsibility.

³Jordan First "is a working plan that seeks to deepen the sense of national identity among citizens where everyone acts as partners in building and developing the Kingdom. Jordan First, which was launched under the directives of King Abdullah II, emphasizes the pre-eminence of Jordan's interests above all other considerations and seeks to spread a culture of respect and tolerance and integrate and fortify the concepts of parliamentary democracy, supremacy of the law, public freedom, accountability, transparency, and equal opportunities." Available at http://kingofkings.8m.net/favorite_links.html

The **Jordan First** document 2025, launched in 2015, sets forth a national vision for family protection that focuses on the protection of children, women, the elderly, persons with disability (PWD), and marginalized groups, and promotes social protection and social responsibility.

The establishment of the NCFA in 2001 came as a result of the assiduous commitment of both their majesties, King Abdullah II Ibn Al Hussein and Queen Rania Al Abdulla, to create a national institution that cares for family affairs, sets forth policies and plans to improve the quality of life for families, and ensures the safety of all family members. In His Throne Day Speech addressing the Parliament on 1/11/1999, His Majesty King Abdullah II Ibn Al Hussein affirmed the importance of securing the rights of children and women and improving the level of care provided to them, wherein His Majesty declared that:

“The woman and child sectors are in need for further care and attention through setting forth programmes and legislation that safeguard the rights of both these sectors and raise the level of care provided to them.”

Since many years, Her Majesty Queen Rania Al Abdulla (Chairwoman of the Board of Trustees of the NCFA) has paid great attention to activities that promote the protection of families and children. In Her speech made during a seminar held by the Family Protection Information Sharing Project on 12/7/2000, Her Majesty affirmed:

“In Jordan, we have been working on family security issues for quite some time, and Jordan has for long faced certain issues such as child abuse. We believe in facing challenges and not turning a blind eye to them.”

Her Majesty also expressed her vision of the Jordanian family in a letter addressed to the NCFA which stated the following:

“Accelerating changes impose upon us unfamiliar challenges and risks. To address this situation, it would be wise to resort to a new approach that combines both traditional and new solutions and practices that provide care and safety for the family and all its members so that it remains the solid foundation of a safe and stable society.”

With the launch of the Family Protection Project in 2000, a national team for family protection against violence had been formed. Members of the national team included representatives of multiple governmental and non-governmental institutions concerned with family protection who work under the umbrella of the NCFA. A working document had been prepared by the national team for family protection against violence (2009) to ensure institutionalization of the team’s work as a national approach for formulating policies and developing national programmes on family protection based on coordination between all governmental and non-governmental organizations, to follow-up on implementation and assess impact, and to ensure sustainability of the team’s work.

As an intellectual entity specialized in policies, the NCFA (managed by a Board of Trustees consisting of a number of ministers; directors of relevant institutions; and persons in their legal capacities) promotes the status of the Jordanian family through its key role in developing policies and legislation in a multidisciplinary approach that brings together governmental and non-governmental organizations working in the field of family protection.

Due to the ongoing efforts by governmental and non-governmental organizations at the national level, many national achievements have been accomplished through the implementation of programmes and projects that aim at promoting the status of the family and protecting it from the risks of family violence. Results of such programmes and projects included change achieved in the legislative and institutional environment and the implementation of various partnerships, community activities, and procedural manuals.

The National Framework for Family Protection against Violence

I: The Goal of the Framework

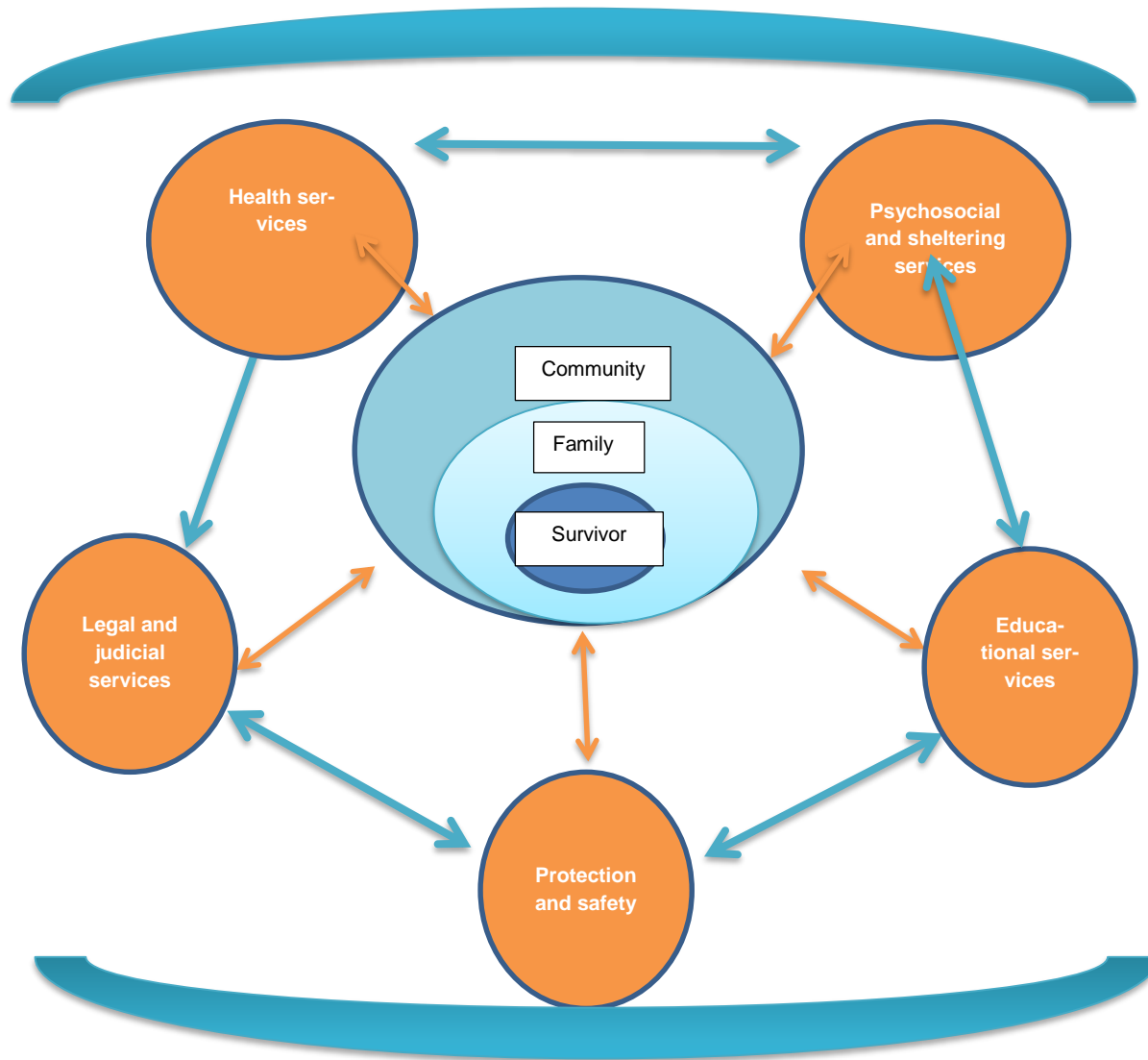
Outlining the process of prevention / protection against family violence at the national level and specifying the basis for coordination among all partners (and from all sectors: social; health; education; police; judicial; and administrative). This is based on a multidisciplinary approach to provide integrated and holistic services, ensure consistency of programmes and activities within a systematic process of supervision and follow-up, and to provide technical support so that quality services can be offered to cases of family violence in line with the survivor-centered approach agreed upon by partners.

II: Basic Principles of the Framework

١. **Respecting the rights and wishes of the survivor:** Procedures must be applied professionally by all concerned agencies. The wishes, rights and dignity of the survivor must be respected. All actions should be in the best interest of the survivor, and the survivor should be involved in all actions concerning his/her case, taking into consideration the circumstances and needs of his/her family and the surrounding environment.
٢. **Informed consent:**^٤ Informed consent should be obtained to provide services for the survivor in accordance with applicable national legislations, laws and regulations. Service providers should explain the following:
 - All available options for the survivor and consequences of those options.
 - Information to be shared with others for purposes of obtaining services.
 - The benefits and risks of consent for obtaining other services must be clarified.

^٤Interagency Standard Operating Procedures for the Prevention of and Response to Gender-Based Violence and Violence, Exploitation, Neglect and Abuse against Children in Jordan 2014

- Enable PWDs to understand the procedures and ensuing consequences by providing them with the necessary information and by using various communication alternatives (sign language; images; verbal and written information; among other alternatives) when needed.
- २. **Confidentiality:** The survivor's confidentiality and privacy must be upheld. This means that the survivor's information should not be shared except with concerned agencies that will be providing assistance or intervention and only on a need-to-know basis. No issues should be discussed with the survivor except in places designated for that, ensuring, at all times, that no one is present other than those concerned with the case and that the discussions do not take place in front of other survivors. Full confidentiality is essential and must always be upheld except in cases when risk to the safety and security of the survivor is foreseen. All private information pertaining to the survivor must be documented in writing and must be kept in a safe place where others cannot have access to it.
- ३. **Safety :** The safety and security of the survivor and his/her family must be ensured at all times and stages in accordance with their best interest. While doing so, it is important to take into consideration the psychological and health situation of the survivor, follow procedures that ensure his/her safety and deal with him/her professionally to safeguard their safety and the safety of those providing assistance to them such as family members and service providers.
- ४. **Non-Discrimination:** Care must be taken to ensure non-discrimination towards survivors in service provision. Services must be of high quality and must meet the needs of all survivors and their families irrespective of other considerations such as their social, economic or familial status, or their cultural background or nationality or religion or gender or age or disability.
- ५. **Survivor-Centered Multisectoral Multidisciplinary Approach:** The National Framework is based on an approach of cooperation and coordination among agencies working in the field of family protection and clearly defines the common roles and responsibilities of those agencies. The roles and responsibilities of those agencies should be clear and detailed. This requires mutual understanding of and respect for the different professional perspectives, information and experience sharing, and comprehensive multi-sectoral services that are of high quality within agreed standards.



Survivor-centered multisectoral multidisciplinary approach

Definitions and Terms

1. Family Violence Definitions and Terms

- ❖ **Family Violence:** Any act or the omission of an act carried out by a family member against any other member within the same family that results in material or moral harm. Some forms of family violence include:

- **Physical violence:**

Use of physical force or the threat of it, which may result in physical injury or physical harm. Examples of physical violence include beating, wounding, punching, biting or burning by throwing incendiary, caustic or deforming material. It also includes any other acts that may cause physical harm.

- **Sexual violence:**

Any form of sexual activity or behavior including sexual harassments, sexual comments or sexual seduction. It also includes child sexual abuse, which involves forcing or enticing a child to take part in sexual activities whether or not the child is aware of what is happening, encouraging a child to view pornographic materials or take part in the production or marketing or distribution of such materials, or enticing a child to engage in inappropriate sexual behavior.

- **Psychological violence:**

Violence that results in behavioral problems or one that inflicts psychological harm or emotional pain. Examples of psychological violence include insults; cursing; humiliation; isolation from family and friends; ridicule; intimidation; making impossible demands; or arbitrary deprivation of rights and freedoms.

- **Neglect:**

Persistently refusing or failing to fulfill one's commitments or duties toward any family member within his/her capacity. This includes failing to provide health and medical care or basic needs such as food, clothes, shelter, health, and education.

٢. Case Management Definitions

- ❖ **Case management:** a systematic process centered around the wishes and needs of the survivor and entails case planning for intervention, assessment, coordination, counselling, and provision of necessary services to the survivor in coordination with relevant partners. The process follows a series of procedures that specify roles and responsibilities from case intake to case closure.
- ❖ **Case Coordinator:** is a specialized employee with the necessary skills, experience, and qualifications in dealing with survivors in his/her respective agency. He/she is primarily concerned with case management tasks starting with risk assessment all the way to case closure through supervision of and communication with the case management team responsible for following up on the survivor within the respective agency or with other partner agencies. The Case Coordinator also coordinates case meetings concerning the survivor.
- ❖ **Supervisor of Case Coordinators:** is a specialized employee with the necessary supervisory skills. He/she holds a supervisory position within the agency they work for, oversees the distribution of cases to case coordinators in his/her agency, follows up on these cases, provides technical and administrative (logistic) support to case coordinators, and ensures the provision of quality services in accordance with the work plan tailored for the survivor and his/her family.
- ❖ **Service provider:** is an employee of the agency that deals directly with the survivor and his/her family through the provision of specialized services. Service providers can be professionals of one of those fields : social work, psychology, counselling, social sciences, parenting, medicine, nursing, law, or any other specialization related to human sciences.
- ❖ **Best interest of the child:** is broadly about ensuring the full and actual enjoyment of all rights recognized. Failing to respect all rights of the child under the pretext that an adult better knows the best interest of the child is not permissible. Also, rights should not be hierarchical, and all rights must be in the best interest of the child. Rights must not be tampered with by interpreting the best interest of the child negatively. The full implementation of the concept of the best interest of the child necessitates setting forth a rights-based approach, involving all concerned stakeholders to ensure the overall physical, health, psychological, and moral safety of the child irrespective of sex, and to foster the child's human dignity.

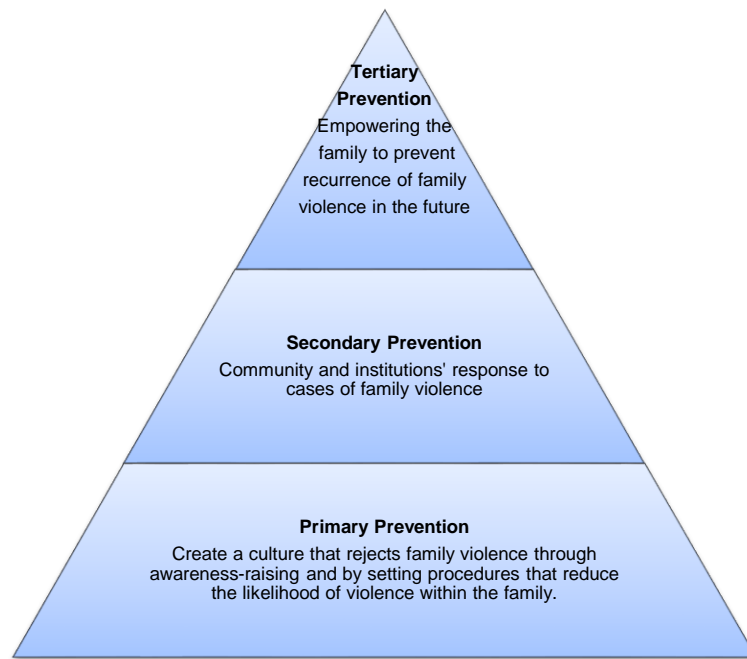
- ❖ **Informed consent:** is the voluntary agreement of an individual who has the legal capacity to give consent for receiving services. To provide informed consent, the individual must receive full, clear, and comprehensible information, and must have the capacity and maturity to understand the services being offered. Parents / caregivers are typically responsible for giving consent on behalf of their child to receive services until the child reaches 18 years of age subject to applicable national laws and legislations.

Prevention of Family Violence:

Prevention of family violence aims at promoting healthy behavior within the family, mitigating risk factors, ensuring early detection and identification of cases of family violence, and ensuring necessary actions are taken to reduce it. Prevention programmes are generally concerned with spreading awareness about family violence and the risks associated with it, preventing its occurrence or recurrence, and introducing services, programmes and activities implemented by different agencies at the community level. Prevention practices are based on three levels:

1. **Primary level of prevention (awareness programmes):** focuses on raising public awareness about the dimensions of family violence and the risks it poses on the family and the individual.
2. **Secondary level of prevention (prevention through intervention programmes):** is about providing integrated and comprehensive services to the survivor.
3. **Tertiary level of prevention (prevention through aftercare):** is about providing services for reintegrating the survivor into society and for rehabilitating his/her family and the perpetrator(s).

Figure 1



The difference between these levels of prevention is based on the target group and the nature of the programme. Whilst the primary level is limited to community outreach, secondary and tertiary level programmes target specific groups at-risk of violence through the implementation of special programmes such as family counselling, parenting skills, among others.

First: Primary level of prevention (awareness programmes):

This level of prevention is concerned with establishing a culture that rejects family violence, which is achieved by raising the awareness of the family and empowering it so that it becomes able to provide a safe environment for its members. This can be accomplished by adopting a variety of methods as follows:

1. **Awareness:** awareness can take three pathways:

- **Public awareness:** public awareness programmes focus on raising the awareness of community members about the risks of family violence on the family and the community. This aims at developing and promoting a culture that rejects family violence in general, and abuse against women and children in particular. Public awareness can be achieved through community awareness campaigns implemented by governmental institutions such as the Ministry of Education and the Ministry of Awqaf and Islamic Affairs. It can also be implemented through academies, universities, churches, awareness and training programmes for service providing agencies, and programmes and activities implemented by non-governmental organizations from all sectors.
- **Legal awareness:** aims to inform society about laws and legislations pertaining to family protection, and the legal services available to survivors. Legal awareness programmes can also identify gaps in existing legislation to seek public opinion that advocates for change.
- **Procedural awareness:** aims to make members of society aware of the steps and procedures they should follow to report cases of family violence or to protect themselves when they experience violence. It also entails measures service providers must undertake in dealing with cases of family violence, each according to their area of speciality, which includes:
 - a. **Awareness on means of accessing protection services:** this aims at raising the awareness of groups vulnerable to family violence about the steps for reporting violence, the available service providers, in addition to services such as the Family Protection Department (FPD); child and women’s support hotlines; and other NGOs services
 - b. **Awareness on means of reporting:** this includes raising the awareness of staff of governmental and non-governmental organizations working directly with groups that are vulnerable to family violence about the mechanisms of identifying and reporting cases of family violence. It also focuses on how staff working with survivors should respond professionally so that to encourage reporting of cases of violence and to ensure that reporting will be taken seriously while keeping in mind the best interest of the survivor.
 - c. **Raising the awareness of the judiciary and police:** this includes the benefits and means of conducting investigative procedures professionally such as the use live T.V. linking system or the use of video recording in police interviews with sexually abused children to spare the survivor considerable psychological distress resulting from repeatedly recounting his/her experience of violence.
- ٢. **Developing policies and strategies to reduce family violence:** developing national policies and strategies that aim to improve the quality of life by finding solutions to socioeconomic problems such as poverty, unemployment, and crime, provide education for all, and contribute to creating an environment that rejects violence within the family.
- ٣. **Institutional capacity building:** improving the capacity of governmental and non-governmental organizations in providing integrated services necessitates the development of relevant policies; the existence of infrastructure; standards and procedures for

service delivery; monitoring and evaluation mechanisms; and defined roles and responsibilities of agencies working in the field of family protection.

4. **Personal and professional development:** preparation and documentation of service provision procedures and standards should be accompanied by training programmes for family protection workers, including training on standards and procedures; indicators of violence; and foundations and mechanisms of monitoring and evaluation.

Second: Secondary Level of Prevention (prevention through intervention programmes).

The most important area of prevention of family violence lies in relieving the survivor of his/her physical, psychological and social suffering, further developing the services provided to him/her in a manner that meets their needs and providing a safe dignified environment throughout the process. Programmes and activities of the secondary level of prevention (prevention through intervention) entail the following:

- **Psychosocial support:** empowering the family cognitively and socially can be achieved by enhancing survivor ability to access information and sources of information, and through the provision of family support programmes such as family counselling and parenting skills. This aims at fostering the family's ability to fulfill its role and understand the different psychosocial needs of its members so that they become less vulnerable to violence.
- **Economic empowerment:** economic empowerment of the family can be achieved through the implementation of empowerment programmes, vocational training, and by supporting micro projects, all of which can foster the family's ability to meet the needs and requests of its members and find work opportunities for them.
- **Legal assistance:** legal assistance consists of both legal counselling and legal representation. It ensures the provision of full protection to the cases. It also ensures that cases are well-aware of relevant information, the legal procedures that will be undertaken, and the consequences of such procedures in line with applicable national legislations and laws.
- **Health care:** the provision of integrated health care to cases of family violence can be accomplished by undertaking remedial measures and interventions in a safe environment, free from stigma or discrimination, which mitigates the immediate and long-term health and psychological effects of violence.

Third: Tertiary Level of Prevention (Post-care prevention programmes)

It aims to preserve the family as an entity and enable it to confront any form of violence in the future. Prevention programmes focus on eliminating the negative effects of violence by working with the survivor and his/her family to rebuild family relations that have been severed and affected by the violence. Such programmes also work with perpetrators to make them realize the consequences of their actions and to demonstrate to them that what they did was unacceptable so that they do not repeat their abusive actions against any family member. This can be achieved through the following:

- **Care and reintegration of the survivor into society:** Care and reintegration programmes must take into account the importance of adapting the survivor's specific circumstances and individual needs to ensure a more effective provision of services and to mitigate the psychosocial harm they have experienced. Given the fact that care and reintegration can take many years, it is important to continue providing support and needed assistance to ensure full recovery, which can be achieved through the provision of the following care and reintegration services:
 - **Safe accommodation:** Establishing shelters that provide emergency protection and comprehensive services to survivors contributes to undertaking the necessary measures for lasting and effective care to mitigate the risk of re-exposure to violence. Such shelters play a significant role in receiving and caring for survivors to help them overcome the effects of violence, reintegrate them into society, make them aware of the various service providers that provide the services they need, and open doors of opportunity for them to live a normal life by providing them with integrated services.
 - **Sustainable psychosocial counselling and treatment services:** Survivors who had experienced violence may be subject to Post-traumatic Stress Disorder (PTSD) or other psychological and emotional consequences. As such, it is important to provide specialized and ongoing psychosocial programmes and counselling services. The type and duration of such services is determined by the type of violence; its severity; duration of exposure to abuse; recurrence; the perpetrator's identity; and the age of the survivor. Survivors can also benefit from support groups which plays a significant role in their psychosocial healing, and therefore, increasing their self-confidence and reducing their feelings of isolation and marginalization within their families and communities.
- **Perpetrator rehabilitation:** The perpetrator needs to be engaged in psychosocial programmes implemented by various governmental and non-governmental organizations to enable him/her to reintegrate into society. These types of programmes examine the ways in which perpetrators deal with their anger, and provide them with training in anger management methods, which may contribute to reducing incidents of family violence in the future and maintaining family cohesion.

Case Management:

First: Case Management Definition:[°]

It is a process whereby the needs of survivors and/or the needs of families in which the violence occurred are assessed and identified through a comprehensive social study of the survivor and his/her family, and the needed services, if necessary. Services are coordinated and managed in a systematic way, followed-up on in coordination with relevant partners using sequential procedures from case intake up until case closure, all the while taking the best interest of the survivor into consideration. Some cases may be complex, and therefore, this necessitates the provision of support and services to the survivor by multiple agencies. It is also worth noting that the term 'case' in the National Framework focuses on the survivor, the provision of services and support to him/her, in addition to examining the needs of his/her family and providing support accordingly.

Second: Case Management Methodology and Tools:[`]

1. **Case Assessment:** is a dynamic and ongoing process of collecting and analyzing relevant data about the survivor and his/her family in order to determine the appropriate support services. The assessment process starts with collecting and analyzing information, and this stage includes the following:
 - Collecting relevant information about the survivor and his/her family, taking into account the accuracy of such information, to contribute to better understanding the situation and surrounding circumstances.
 - Sharing information with relevant agencies to ensure the protection and safety of the survivor and his/her family, taking into consideration the confidentiality and privacy of such information and the best interest of the survivor.
 - Assessing and identifying risk factors and analyzing the points of strength and weakness of the survivor and his/her family.
 - Determining the needed services and procedures in participation with the survivor, his/her family, and service providers, and identifying the best means for service delivery.
2. **Case Planning and Preparation of the Implementation Plan:** Planning is a key component of the case management process and directs work towards the steps to be taken with the survivor and his/her family. This interactive process takes place in participation with all concerned agencies that provide services to the survivor. Planning is based on the assessment phase, and in the planning phase, the needed actions for providing protection, meeting the health, education, psychosocial, and legal needs of the survivor and his/her family are determined. The implementation plan must be discussed with the survivor and his/her family if possible. The plan must be comprehensive covering all needed aspects and based on correct and professional information. The

[°]Child wellbeing and child protection – NSW Interagency Guidelines

[`]Ibid

implementation plan should be documented including the necessary goals and strategies for achieving the actions, and timeframes for service delivery. Also, the roles and responsibilities of all agencies concerned with service provision must be documented, including the role of the survivor's family. Any immediate procedures and measures that need to be undertaken in the short and long terms must be taken into consideration with focus on the importance of coordination with the survivor and his/her family regarding all procedures mentioned in the implementation plan.

३. **Implementation of the Plan:** that is, putting the procedures of the implementation plan into effect and providing services to the survivor and his/her family. Implementation of the plan may include the provision of direct services or referral to other agencies. All agencies concerned with service provision according to the implementation plan need to have a clear understanding of their role and the roles of other agencies at this stage. Implementation of the plan requires the following:

- Ongoing monitoring of any changes in the family's circumstances that may increase the possibility of risk for the survivor and his/her family.
- Understanding and mutual respect between service providers from partner institutions, taking into consideration the viewpoint of the survivor and his/her family and any other matters related to service provision.
- Holding regular meetings with relevant service providing agencies as per the implementation plan depending on the nature of the case and its risk factors.
- Emphasizing that the implementation of the plan necessitates coordination and cooperation between agencies. Differences in points of view may arise and must therefore be resolved immediately so as not to affect the process of providing services to the survivor and his/her family.
- Documenting all procedures and information and maintaining confidentiality of case files.

4 Case Follow-up: is an ongoing process of reviewing progress made in the implementation of the plan and ensuring that the plan seeks to improve the protection and safety of the survivor and his/her family. The follow-up process helps in identifying any obstacles that may stand in the way of achieving the plan's goals. Accordingly, procedures or interventions may be added, or the plan may be modified to overcome identified obstacles, all the while ensuring the commitment of the case coordinator or his/her representative in following up on services received by the survivor and his/her family from relevant service providers. It is also important to get regular feedback from service providers, the survivor, and the survivor's family to determine the following:

- The service provided is in line with the implementation plan.
- Emergence of any change in needs.
- Challenges that may surface during implementation.
- The continuous participation of the survivor and his/her family.

- . **Case Closure:** Case closure can be more effective when it occurs as part of the planning process agreed upon between service providers. Due consideration must be given to the achievement of the goals of the implementation plan developed earlier for the survivor and his/her family, and progress should be regularly monitored and reviewed. Usually, the decision to close a case file is agreed upon by partners based on the opinion of the majority of agencies providing services to the survivor and his/her family, with due emphasis on the participation of the survivor and/or his/her family in the case closure process. All parties concerned with service provision must be given the opportunity to participate in the decision-making process, and to discuss any necessary measures as part of case closure. Moreover, a comprehensive review must always be conducted and risk factors affecting the survivor and his/her family removed prior to closing the case file. It is also important to document all services provided to the survivor and his/her family.

Third: Case Management Levels:

There are two levels of case management as follows:

- Case management level between partners in cases that require mandatory reporting to a legal authority (FPD) when the act committed constitutes a felony or misdemeanor in accordance with applicable national legislation, laws and regulations. All agencies have a legal obligation to report cases of family violence to FPD provided that they also take part in the case management team. In this case, FPD will assume the responsibility of case management and follow up, will attend all case meetings concerning the survivor and his/her family, will follow up on decisions made during such meetings, and will coordinate with partners with regards to the procedures and services that need to be delivered to the survivor and his/her family by all partner agencies, taking into consideration the situation, needs, and wishes of the survivor and his/her family.
- Case management level between partners in cases that do not necessitate mandatory reporting to a legal authority (FPD) when the act committed does not rise to the level of felonies or misdemeanors according to applicable national legislations, laws, and regulations. Here, the agency concerned with family protection which received the case will deal with and manage it in line with the case management approach. The agency shall also adhere to all case management procedures and stages of assessment, coordination, planning, referral, follow-up, and case closure.

Fourth: Case Management Controls between Partners:

Agencies that deliver case management services must adhere to the following controls:

١. Assigning the task of case coordination to the case coordinator and inviting relevant entities to participate in case management meetings concerning the survivor and his/her family.
٢. Engaging the family protection agency which had reported the case as a member in the case management team through case follow-up, service provision, and participation in case meetings, conferences and decision-making. All agencies that are part of the case management team must send a qualified technical person who has the authority to make decisions regarding necessary interventions for the survivor and his/her family.
٣. Evaluating the risk factors that may affect the survivor and his/her family by assessing the degree of risk to personal safety and security and by assessing physical and psychological risks. It is also important to hold an immediate response meeting with participation of all relevant service providers.
٤. Ensuring that the case coordinator regularly informs the case management team of all new developments pertaining to the survivor and his/her family.
٥. Ensuring the case manager's commitment in collecting and securing necessary information, following up on all procedures and services the survivor and his/her family need which are undertaken by partner service providers, ensuring the case management team is not late in achieving this, and sharing information concerning the case.
٦. Involving the survivor and/or his/her family in all phases of case management by ensuring they are well-informed, seeking their opinion regarding available options, including the consequences of each option, and the plan that will be implemented.
٧. Making participatory decisions pertaining to the survivor and his/her family within the case management team.
٨. Closing the case in agreement with all partners and based on the results of the risk factors assessment. The final decision is made after members of the case management team vote on the matter, wherein the opinion of the majority will be adopted.
٩. Ensuring that the case management agency is committed to making partnerships and memoranda of understanding with other relevant agencies concerned with providing services to cases of family violence.

Stages of Response to Cases of Family Violence

The process of responding to violence is primarily concerned with providing services to the survivor, ensuring his/her safety and security, and then extending services to his/her family and the perpetrator. However, the long-term goal of any strategy for family protection is the prevention of family violence. It must be stressed, here again, that prevention and protection services are largely intertwined. For

example, the provision of services to individual cases may contribute to the development of prevention services, wherein the goal of both these types of services is to reduce family violence.

All medical, psychosocial, and educational service providers should seek to look for and identify cases of family violence and report these cases to specialized authorities.

Phases of responding to cases of family violence include the following:

- Identification and reporting phase
- Immediate response phase
- Intervention phase
- Case closure phase

First: Identification and reporting phase:

All efforts at this stage are focused on receiving information and seeking to verify it. This enables the agency to which the case was reported to provide response and make appropriate decisions regarding the survivor and his/her family. Agencies concerned with family protection identify cases of family violence through their follow up work with their target groups.

There are multiple mechanisms by which cases of family violence can be detected by agencies concerned with family protection. These include:

- Referral through service providers.
- The survivor attends in person and discloses the violence.
- The survivor or a member of the local community reports a case of family violence through a hotline.

The agency that identified the case shall report to the FPD in accordance with applicable national legislations, laws and regulations. However, if the case did not necessitate reporting, the agency would undertake all steps related to case management, provide services to the case, and coordinate with partner service providers for referral purposes.

The case coordinator opens a file for each case and gives it one number only. The case file includes all information and forms, and documents all services, procedures, and follow-ups undertaken by all agencies mentioned in the case file to avoid duplication and ensure effective follow up.

When a case is reported to FPD or any of its departments, the reception unit fills in the reporting form and then refers the case to the supervisor of case coordinators. This phase constitutes the first step in collecting information about the survivor and his/her family. The supervisor of case coordinators at FPD assigns a case coordinator to complete the work and undertake all necessary measures for this phase.

Procedures that must be followed by partners:

- Develop internal systems and procedures for receiving reported cases; documentation; and periodic review with other agencies.
- Develop a registry for documenting reported cases, prepare reporting forms that facilitate the assessment process, and conduct comparisons and analysis to ensure confidentiality and non-recurrence.
- Train workers on means of identifying cases of family violence, the systems and procedures that should be undertaken, in addition to follow-up.
- Train agency workers dealing with groups that are most vulnerable to violence (children and women) on means of identifying signs of abuse, neglect, and violence.

Second: Immediate Response Phase (does not exceed 24 hours):

This phase entails the provision of immediate protection to the survivor based on the initial information obtained. The case coordinator verifies available information about the survivor and his/her family and checks whether or not the survivor and his/her family had a previous case file. The case coordinator also coordinates with partners on the following matters to assess the level of risk and severity of the case and to take appropriate measures to protect the survivor's best interest.

- The primary goal at this stage is to ensure the safety and protection of the survivor as soon as possible after identification, reporting and verification. As such, this phase must be completed within a maximum period of 24 hours after the case was reported.
- Comprehensive assessment of risk factors is conducted by the case coordinator in partnership with the relevant agencies to determine the risk factors and level of risk affecting the survivor and his/her family, and to document the results.
- Commitment to hold a consultative meeting referred to as the **"immediate response meeting"** in which concerned agencies set forth an immediate intervention plan to deal with the survivor and/or his/her family. This meeting can be carried out over the

phone provided that the case coordinator documents all specifics of the meeting and seeks the endorsement of all entities he/she coordinated with.

- Preserving and collecting evidence such as wounds or other effects of violence by legal means within 24 hours.

Speedy response must be ensured for all identified or reported cases.

- Involving the survivor or his/her family in available procedures and options, explaining the potential consequences of each procedure/option and involving him/her in the plan to be implemented in accordance with the survivor's best interest and applicable national legislation, laws and regulations.
- Establish an intervention plan for immediate response by the case management team to deal with the survivor and his/her family. The immediate intervention plan must specify the responsibilities of the case management team, timeframe for implementation, in addition to psychosocial, health, legal, judicial, and sheltering services.
- Each entity provides services according to its area of specialization and in line with the intervention plan for immediate response approved by the case management team.
- Follow up on the intervention plan for immediate response by the case coordinator in coordination with service providers.
- Ongoing assessment of and follow up on the situation of the survivor and his/her family by the case management team.
- Discussion of the following decisions after implementation of the immediate intervention plan, and after obtaining the results of the risk factors assessment:
 1. Close the file based on recommendations from the case management team, inform the survivor and/or his/her family about the instructions necessary to protect him/her in case they needed any additional future support, and document all this in the file.
 2. Refer the survivor and his/her family to the intervention phase to hold a case conference for purposes of developing an intervention plan and following up on it.
- Emphasize that documenting information about the survivor and his/her family is one of the most crucial matters that must be followed by all partners at this stage and that reports must be prepared for this purpose.

Actions that should be taken:

- Developing a comprehensive risk factor identification form for the survivor and his/her family.
- Establishing procedures and forms for holding immediate response meetings.

- Designing an immediate intervention plan in participation with service providers.

Third: Intervention Phase

The intervention plan consists of five main components:

- **The priorities for the survivor and his/her family, which are determined in coordination with partners and with the participation of the survivor and his/her family.**
- **The responsibility of each entity.**
- **Specific timeframe for implementing the plan.**
- **Follow up mechanism for the survivor and his/her family.**
- **Outputs of the plan.**

In this phase, the focus of attention is directed towards identifying the type of intervention, that is, whether it is short or long term or whether it requires holding a case conference. The meeting is called by the case coordinator in which representatives from all agencies concerned with dealing with the survivor and his/her family participate. The meeting aims at examining all aspects of the case (social, psychological, health, legal/judicial, administrative, sheltering, educational), and developing intervention plans that specify the actions needed to support and assist the survivor, the survivor's family, and the perpetrator if necessary. The importance of the case conference stems from the study, assessment and provision of holistic services for each case depending on its specifics and needs. It is important to note that agencies' response must be in accordance with the needs and wishes of the survivor and his/her family. The **case conference** reflects the effectiveness of the multidisciplinary approach in responding to cases of family violence and in providing comprehensive ser-

vices to the survivor and his/her family. The role of the case management team can be summarized as follows:

- Collect information from the immediate response phase and prior information about the survivor and his/her family and analyze such information objectively.
- Assess and review risk factors to ensure the safety of the survivor and his/her family, estimate the extent to which the survivor and his/her family may be vulnerable to future abuse and violence, and document the results.
- Ensure the involvement of the survivor and his/her family in all actions, available options, the potential consequences of each, in addition to the plan intended for implementation in accordance with their best interest and applicable national legislation, laws, and regulations.
- Prepare an intervention plan that includes all necessary interventions in line with the needs and nature of the case as agreed upon by the case management team. The type of intervention, responsibility of each partner agency, and actions to be taken must all be specified within a set timeframe including mechanisms for following up on the intervention plan.

The case management team assesses the situation of the survivor and his/her family and follows up on the case by holding periodic meetings to stay abreast of case conference outputs. These meetings are referred to as "**case follow-up conference**," which is held periodically at the invitation of the case coordinator and in participation with the case management team. During this conference, the services provided to the survivor and his/her family are monitored, evaluated, and documented, and necessary interventions are put in place. The following are the most important matters discussed:

١. Reviewing all actions agreed upon within the plan to protect and support the survivor and his/her family.
٢. Sharing experiences such as good practices, constraints, and the reasons behind services not having reached the required standards.
٣. Reviewing and agreeing upon the existing intervention plan during the case conference with the participation of the survivor and his/her family and assessing the extent to which it has achieved its goals.
٤. Discussing the perpetrator's needs for rehabilitation services, assessing the family's support needs, and taking any action that would enable them to integrate socially and economically after having overcome the incident(s) of family violence.
٥. The case management team assesses the situation of the survivor and his/her family and provides ongoing follow-up.
٦. Discussing the following decisions after implementation of the immediate intervention plan and based on the results of the risk factors assessment:
 - Closing the case file based on recommendations from the case management team when the risk factors have been eliminated and providing the survivor and his/her family with the necessary instructions for their protection if they needed additional future support. All such information must be documented in the case file.
 - Continuing with the intervention procedures and holding a meeting to follow up on the case conference so long as the risk factors are still present.
 - Emphasizing the importance of documenting information pertaining to the survivor and his/her family by all partners at this stage and the importance of preparing relevant reports.

Actions to be taken:

١. Setting forth procedures for holding a case conference and case follow-up conference.
٢. Determining the required services, responsibilities and roles for each agency concerned with providing services in line with the intervention plan.
٣. Documenting the intervention plan in the case file.

Fourth: Case Closure Phase

The case closure meeting aims at reviewing the intervention plan that had been adopted to protect and support the survivor and his/her family. It also aims at discussing the perpetrator's needs for rehabilitation services and the family's needs for support.

This phase intersects with all previous phases. This means it is possible to close a case file for multiple reasons during any given phase. The decision to close a case file, regardless of the time and reason behind its closure, must be made during a meeting coordinated by the case coordinator and in the presence of all partner service providers within the case management team. Justifications and reservations, if any, for case closure must be documented in writing. Following discussions, voting on case closure will be undertaken by all participants in the meeting. If a decision were made by the majority, members of the case management team would sign it and would inform the survivor and/or his/her family of the necessary instructions for their protection if they needed additional future support. This will also be documented in the case file. Specific mechanism must be put in place to determine what needs to be done before closing any case file, which includes:

- Assessing the psychosocial and health needs of the survivor and the needs of his/her family.
- Ensuring that all necessary actions for the survivor and his/her family have been implemented.
- Ensuring a report explaining the reasons behind case closure is included in the survivor's case file (attached with all other necessary documents).

Actions to be taken by partners:

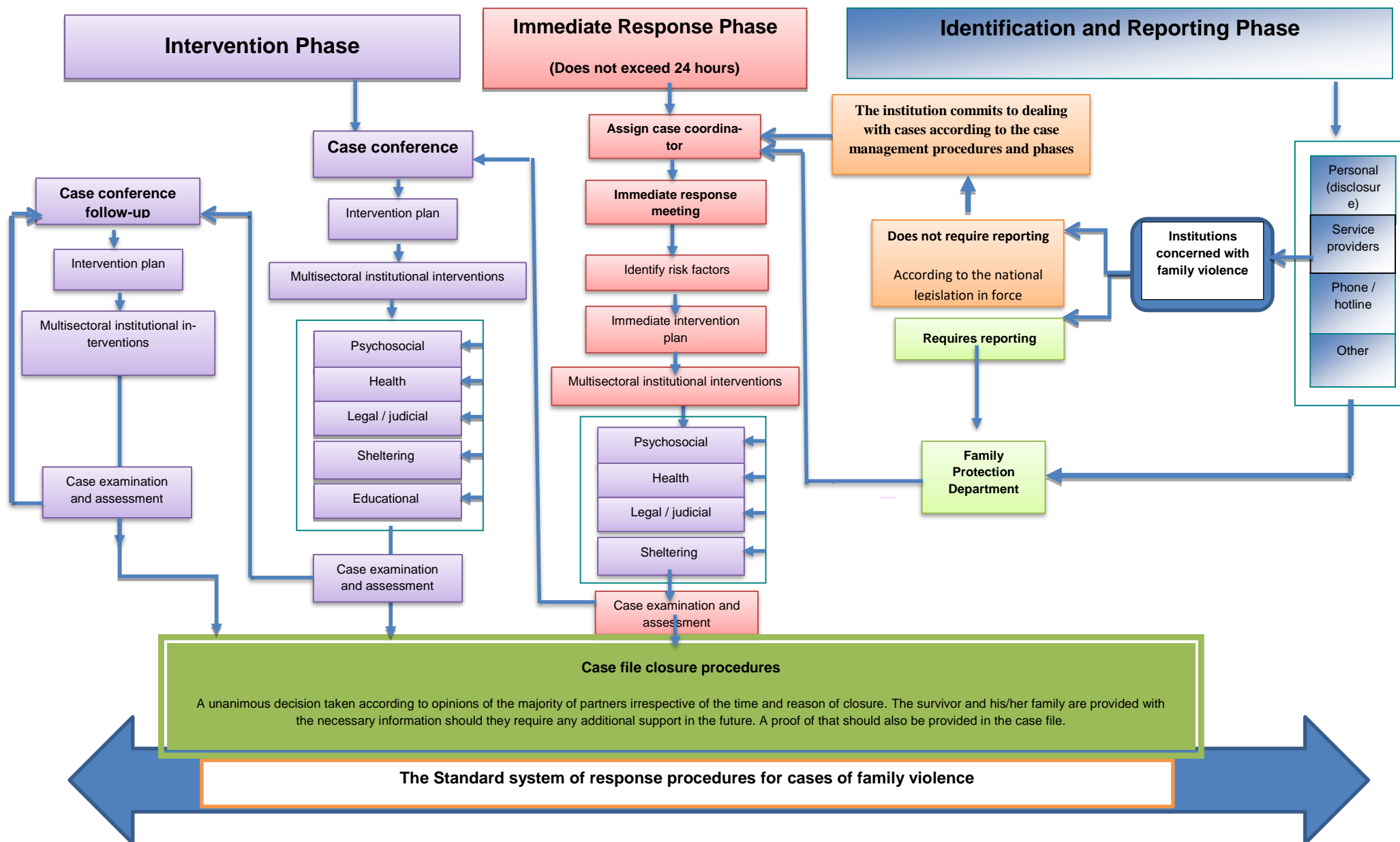
١. Establishing procedures and forms for case file closure and preservation.
٢. Documenting the results of the case closure meeting.
٣. Adopting uniform standards for case closure.

Prevention: Community-oriented programmes and activities

Programmes targeting specific groups or individuals, and care and integration into society during the

A survivor-centered multidisciplinary approach

Respect for the rights and wishes of the survivor, informed consent, privacy and confidentiality, protection and non-discrimination



Multisectoral Institutional Interventions:

- **Psychosocial services:**

- Assessing the psychological state of the survivor and his/her family.
- Social studies about the survivor and his/her family.
- Family counseling services.
- Psychological counseling services.
- Safe accommodation.
- Forming support groups.
- Sustainable counseling and psychotherapy services.
- Rehabilitation of perpetrators.
- Care and reintegration of the survivor.
- Parenting skills.
- Social and economic empowerment.
- Protection hotlines for the child and his/her family or the woman and her family.
- Periodic national media awareness campaigns.

- **Educational Services:**

- Providing psychosocial support within the school or through any other educational services.
- Facilitating the survivor's transfer processes from one school to another.
- Community awareness.

- **Health Services:**

- Forensic services.
- Psychological services.
- Diagnosis and treatment.

- **Police Services:**

- Investigating cases of abuse.
- Referring cases to the specialized court.
- Protection measures.

- **Judicial Services:**

- Setting procedures for investigating crimes of family violence.
- Making special decisions about alternative measures and perpetrator rehabilitation.
- Issue judicial verdicts.

- **Legal Services:**
 - Legal counselling.
 - Legal representation.
- **Administrative Procedures (Governors):**
 - Pledges.
 - Protection and arrest procedures.

Supervision, technical support, and evaluation of the implementation of the NFPPV

Supervision, technical support and evaluation of the implementation of the NFPPV are carried out by measuring accomplishments, overseeing the achievement of agreed upon goals, developing a unified vision of the future, developing mutual understanding of various other issues, and reaching consensus on how partners may contribute to achieving the vision.

Supervising the implementation of the NFPPV is undertaken within the context of a multidisciplinary approach at two levels:

- Supervision, technical support, follow-up and evaluation is carried out at the national level to determine the extent to which relevant agencies are committed to implementing the NFPPV. This process is facilitated by developing a follow-up and evaluation framework in cooperation with all agencies based on their areas of expertise.
- Supervision, technical support, follow-up and evaluation is conducted at the internal level for agencies concerned with implementing the NFPPV. Each agency works individually to achieve and further develop quality standards for its services in accordance with the goals and plans agreed upon, which is then monitored in light of the NFPPV.

✦ Supervision, technical support, and evaluation of the commitment of concerned agencies in implementing the framework at the national level.

It is important to select an entity to be responsible for supervision, technical support and comprehensive evaluation. This entity will monitor the commitment of national agencies in implementing the NFPPV and its procedures, in addition to agencies' commitment to delivering the necessary services to cases of family violence. This entity must represent governmental or non-governmental organizations working in the area of family protection against violence in the Hashemite Kingdom of Jordan. It operates as an umbrella for all programmes pertaining to family protection against violence, and at the same time, it is not concerned with service provision to ensure separation of both these roles and to ensure transparency. Accordingly, the national team for family protection against violence that operates under the umbrella of the NCFA will undertake the task of overseeing agencies' commitment to implementing the framework, monitoring and evaluating the framework at the national level, and providing technical support to partner national agencies in this regard.

In order to fulfill this role, the national team for family protection against violence will seek to develop the following mechanisms:

- A mechanism for overseeing the response of partner agencies in protecting the family from violence and in implementing the NFPPV.
- A mechanism for identifying agencies that provide services to cases of family violence and those that provide family violence protection services, and for setting accreditation standards and quality controls for services provided to cases of family violence.
- A mechanism for evaluating the implementation of the framework's procedures, and for regularly (every two years) assessing the performance of partners and issuing periodic reports accordingly.
- A mechanism for preparing and monitoring national indicators pertaining to family violence.
- Monitoring the extent to which the national framework is implemented, evaluating it, and identifying and seeking to overcome obstacles that stand in the way of its implementation.

✦ **Supervision, technical support, follow up and evaluation at the internal level of agencies involved in implementing the framework.**

Internal supervision of the commitment to implement the NFPPV is carried out within each agency through the department responsible for this. The respective department should adopt the following indicators and tasks to oversee the procedures for implementing the framework and to follow up on these procedures internally, which must also include the agency's commitment to the following:

- The agency shows commitment to the issue of family violence by giving it priority in strategies, implementation plans, and in its periodic evaluation.
- The agency develops internal systems and procedures for service provision and evaluates them to ensure that response is not random or duplicated.
- Update procedural manuals to ensure services are provided in line with the updated version of the framework, circulate the updated manuals among workers and monitor their commitment to its application.
- Develop the basis for coordinating all activities pertaining to family protection to ensure the provision of integrated and holistic services and to avoid any gaps.
- Monitor the performance of cadres and ensure their commitment to protection policies, confidentiality, and the provision of quality services.
- Provide ongoing capacity-building for workers and service providers in accordance with identified needs pertaining to the procedures of service provision and as per quality control standards.
- Adopt specialized indicators related to the type of service and ensure the commitment of agencies in applying the accreditation and quality control standards for family violence services approved by the Prime Ministry in 2014 and build on that to improve response to cases of family violence.
- Use system automated procedures for dealing with cases of family violence in case management, case follow-up and case referral.
- Conduct periodic assessment, evaluate the satisfaction of service recipients, and use the results to further develop provided services and enhance their quality.