

Recognising Domestic Violence Against Children by the Competent Police Officers

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Abstract: The paper presents risk indicators for domestic violence against children, concerning both parents and children, as well as an analysis of data obtained from a sample of 46 competent police officers in Vojvodina with the aim of identifying these indicators. Eighty percent of respondents considered unfavourable parental behaviour to be the most frequent parental risk indicator for the occurrence of violence against children. Externalized behavioural problems in children were seen by 48% of respondents as a risk indicator in children that always appears and points to violence. The least common, or rarely occurring indicator, is the sexualized behaviour of the child (according to 63% of respondents), which is justified considering that sexual abuse of a child is also assessed as the rarest form of violence against children. About half of the respondents identified excessive reactions from the child when they make a mistake or are pointed out for a mistake as the most common indicator of psychological violence in child victims. Although the data analysis did not show statistically significant differences in the results concerning the possession of a certificate for working with minors, 61% of respondents believed that competent police officers should also possess this certificate. Since the respondents highlighted this need as the greatest systemic hindrance in the work of child protection, and since about half of the officers (22) in this sample did not possess this certificate, the authors emphasize the opinion that competent police officers, as well as other police officers, should be specially trained for working with minors.

Keywords: domestic violence against children, competent police officer, indicators of violence, consequences of violence against children.

INTRODUCTION

Domestic violence is any act of physical, sexual, psychological, or economic violence that occurs within a family or household, or between former or current spouses or partners, regardless of whether the perpetrator shares or has shared the same residence with the victim (The Law on the Ratification, 2013–2015).

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Children are the most vulnerable category when it comes to domestic violence because they are unable to protect themselves from it, and this inability is greater the younger they are. A particular problem arises when the person who is supposed to care directly for the child, typically a parent, is also very often the perpetrator of the violence. Victimization in childhood leaves not only immediate consequences but also long-term psychological effects on the child's development and later adult life, as evidenced by numerous studies.

Namely, experienced abuse and neglect in childhood are risk factors that increase the likelihood that such a child will become a perpetrator of violence in the future (Đurđević, 2014: 270). Struggling with personal emotions as a consequence of childhood abuse leads to inadequate parental behaviours that affect the emotional development of the child (Plant et al., 2018). Negative emotional reactions and difficulties in regulating emotions, such as anger, increase the risk of abuse by parents, especially mothers who have a history of childhood abuse (Smith et al., 2014). Parents who were abused in childhood are at significantly higher risk of abusing their own children (Lo et al., 2019), and those who witnessed domestic violence during their childhood are more likely to be violent in adulthood (Lang et al., 2002; Black et al., 2001). Moreover, if they witnessed physical violence between their parents, they tend to use harsher physical violence towards their own children (Black et al., 2001).

Girls become predisposed to victimization in adulthood (Cloitre et al., 2002) which is a way of accepting a familiar image of an emotional relationship. When it comes to men's memories of childhood experiences (experiences of violence or witnessing parental partner violence), it has been shown that they are (to a small to moderate degree) associated with the expression of physical violence in adulthood (Schumacher et al., 2001). Special attention should be paid to rural areas where, in an etiological and phenomenological sense, domestic violence has certain specificities that are important for more precisely defining the necessary preventive measures (Soković & Randelović, 2024). However, it is essential to note that aggression as a modeled behaviour cannot fully explain the trans-generational transmission of violence; this explanation is limited, and other factors should play a protective role in preventing transmission.

The social system must be one of the protective factors, and it is its responsibility to protect children from their abusive parents. This duty is also a particular responsibility of professionals working in child protection, who must have the necessary knowledge to recognize indicators of violence and respond appropriately to protect children. These facts also highlight the great importance of research on violence indicators, as well as the training and preparation of professionals involved in protecting children from domestic violence.

Taking all of this into account, the research we conducted was motivated by the analysis of specific indicators of domestic violence against children up to the age of seven, using a sample of competent police officers³ (hereinafter referred to as CPO) in Vojvodina. Recognizing the indicators provides insight into the training of these officers but also highlights potential shortcomings or challenges they face in their work. The importance of recognizing violence against children and identifying as many appropriate indicators as possible can contribute to a better analysis of the violence, the perpetrator, the victim, and the witnesses, thereby indirectly contributing to more effective victim protection, which

³ Article 8 of the Law on Prevention of Domestic Violence stipulates that police officers performing duties related to the implementation of this law are referred to as competent police officers.



is the primary goal and social responsibility. A key condition for improving the quality of work is highlighting examples of good practice, identifying shortcomings, and finding mechanisms for their resolution.

A BRIEF OVERVIEW OF POLICE OFFICERS' PROCEDURES

The Law on the Prevention of Domestic Violence (hereinafter referred to as LPDV) (2016) enables the immediate prevention of domestic violence and the prevention of its recurrence through the powers given to the police to assess risk and impose urgent measures on the potential perpetrator. In order to carry out tasks related to the prevention of domestic violence, specialized training for the application of this law is prescribed for the CPO (Article 28). However, seven years after the LPDV came into effect, in cases of domestic violence, police officers who do not have this training are also involved, in addition to the CPO.

If we take into account that during 2023, there were only 235 CPO working in seven police departments in Vojvodina,⁴ we can highlight two observed problems. The first is the *insufficient number of CPO*, and the second is that in cases of domestic violence, police officers who have not completed specialized training for the application of the LPDV are also involved. The additional problem is that not all CPO possess *specialized knowledge in the field of children's rights and criminal legal protection for minors (the police certificate for working with minors)* (Article 70 of the Police Law), which enables them to deal not only with juvenile offenders but also with matters related to the protection of minors (victims, witnesses).

In situations where children are present at the scene of domestic violence, whether as direct victims or witnesses to the violence, the collection of information (in accordance with Article 288 of the Criminal Procedure Code [2011–2021] [hereinafter referred to as CPC], Articles 91 and 70 of the Law on Police [2016–2018]) should be conducted by a police officer trained to work with minors. A practical problem arises when the competent police officer does not have this certificate. Currently, this issue is resolved by calling a police officer for minors to join the work of the competent police officer and conduct the conversation with the child. The problem becomes greater when we consider the small number of police officers for minors and the time it takes to act in police stations in small municipalities, given that most police officers for minors work at the headquarters of the police department. These issues can lead to secondary victimization of the child victim, as they may have to speak with a police officer who does not possess the certificate for working with minors, wait for the police officer for minors to conduct the interview, and wait for the parent to speak with the competent police officer. During all this time, the child may experience institutional traumatization.

Once we overcome the aforementioned problems, the crucial question remains: how do CPO act in protecting children who are victims of domestic violence? In order for CPO to exercise their authority and protect the victim, they must first recognize the indicators of domestic violence. These indicators can be found in the analysis of the report, in the

⁴ Official data obtained for this paper on June 07, 2024 from the Ministry of Interior of the Republic of Serbia, Crime Suppression Department, Criminal Police Directorate in Belgrade (concerning the following police departments: Subotica, Sombor, Zrenjanin, Novi Sad, Kikinda, Sremska Mitrovica, and Pančevo).



observation of signs of physical or other forms of violence on the victim, or in other circumstances that indicate the existence of violence or an immediate threat thereof (Article 13 of the LPDV). The purpose of data collection is to provide an adequate risk assessment that should result in a decision regarding the risk and any urgent measures if the risk exists (Articles 15–17 of the LPDV). *Risk assessment* encompasses the risk of immediate danger from domestic violence, as well as the assessment of the likelihood that domestic violence will occur in the immediate future (Ministarstvo unutrašnjih poslova [MUP], 2023). For CPO, risk assessment will be easier in cases where the individual can be characterized as a perpetrator of a domestic violence crime or some offense with elements of violence, as in such situations there will almost certainly be an immediate danger of domestic violence (Bošković & Puhača, 2019: 34).

INDICATORS FOR RECOGNIZING DOMESTIC VIOLENCE AGAINST CHILDREN

The risk assessment form (MUP, 2023) used by CPO contains 26 specified indicators, most of which are focused on the perpetrator of the violence. Therefore, the assessment in cases of domestic violence against a child is directed at the parent/caretaker/family member. There are few indicators related to the victim, in this case, the child. In the risk assessment form, only item 27 can be used to assess the risk of any indicator not listed, which is not sufficient. In accordance with the subject of our research, our further analysis suggests the importance of specific indicators (from the risk assessment form) related to the parent and certain indicators related to the child victim that can assist CPO in assessing risk.

INDICATORS RELATED TO THE PERPETRATOR OF DOMESTIC VIOLENCE (IN OUR CASE, THE PARENT)

Unfavourable parental behaviours and inadequate lifestyle. Data regarding a potential perpetrator's history of violent behaviour or reports of disturbed family relationships are considered, along with information about a propensity to commit criminal offenses and violations with elements of violence, and data on a criminogenic past related to other offenses (MUP, 2023). Such data are predisposing factors for violent reactions and pertain to determinants that indicate attitudes toward other individuals (Krug et al., 2002: 36). Information about previous reports of domestic violence or reports of disturbed family relationships, as well as recidivism, indicates patterns of behaviour of the perpetrator and their personality. However, when we have data indicating that there have been no previous reports, additional caution is required. Some authors emphasize that even when there is a report of domestic violence in a milder form, it usually does not involve a single incident, but it is essential to determine the prehistory of that event and the context in which the reported incident occurred (Jovanović, 2011: 165). Therefore, a situation where a perpetrator is recorded for the first time cannot automatically mean that it is an isolated event of a situational character. Every act of violence represents an accumulation of tension that escalates at a certain moment, preceded by other circumstances in the family that we must investigate. These circumstances can provide us with data for predicting a potentially new incident.



Unfavourable behaviours of parents can include behaviours that are also a reflection of the parents' personality and predisposing circumstances for family violence. We are talking about behaviours that indicate whether the perpetrator is a person suffering from mental disorders, whether he is a user of psychoactive substances (hereinafter referred to as PAS) or is being treated for alcoholism, whether he has been punished in connection with the consumption of PAS or alcohol, whether there is information about suicide attempts or death threats to others. These data are checked both through the official records of the police and other authorities, but also based on the data provided by close people about the possible perpetrator or they can be recognized in the behaviour of a mentally ill person, a person under the influence of alcohol, narcotic drugs or other PAS (MUP, 2023). All these indicators have been shown through research as risk factors for the occurrence of violence in the family or against children (Black et al., 2001; Ross, 1996; Wolfner & Gelles, 1993; Žegarac & Brkić, 1998). Determining indicators of this type concerns all specific triggers (causes and motives), persons, places and times that are more likely to be associated with an increased risk of violence (Đurđević, 2014: 313).

The personality of the perpetrator is an indicator that can most easily be assessed through data from health records. However, we must understand that perpetrators of violence are not necessarily individuals with psychiatric disorders. Aggressors can also be part of a non-clinical population but may have other psychological “pathologies”. For instance, the security of their emotional attachment is an important characteristic for predicting violence. Perpetrators with low self-esteem are positively predicted to exhibit abusive behaviour (Buck et al., 2012; Kesner et al., 1997; Schwartz et al., 2005), and low self-esteem is a feature of insecure affective attachment (Mikulincer & Shaver, 2019). Accordingly, types of insecure affective attachment (such as anxious and avoidant types) positively correlate with psychological violence and physical abuse (Henderson et al., 2005; Fournier et al., 2011; Dutton et al., 1994), making it evident that violence can be expected in such individuals.

Additionally, in the population convicted of violent crimes, aggressive reactions and behaviours are prevalent among those with higher levels of neuroticism and lower levels of conscientiousness and agreeableness (empathy) (Vukosav et al., 2018). These individuals can be recognized by their low levels of empathy and sense of responsibility, pronounced neurotic symptoms, and a strong need for dominance.

The current mental state of a (potential) perpetrator is an indicator that reflects both the personality of the aggressor and contributes to the likelihood of violence recurring in the near future. In order to determine the indicators that increase the level of risk, attention should be paid to: the perpetrator's behaviour during intervention, resistance to being brought to the police, denial of events at the scene of intervention or during questioning, avoidance of the topic of violence, expressions of attitudes that violence is deserved, downplaying the significance of violence, and displaying emotions such as agitation, crying, anger, and jealousy. The behaviour and emotions of the perpetrator indicate their attitude towards violence, the defense mechanisms they use, their insight into what they have done, and the consequences of their behaviour.

In the statements of aggressors, it can be heard that they blame others for their behaviour, they believe that they should not face any negative consequences for their violent behaviour, and do not accept responsibility for marital, familial, or business failures. It can be



observed that they have poor impulse control, an explosive and unpredictable nature, and easily fall into a rage (Maljković, 2018).

For a more objective risk assessment, significant **indicators also include the circumstances and context of the perpetrator's life and and the life of their family**. These can provide insights into the personality profile of a potential perpetrator, as they reflect their lifestyle, habits, life attitudes, and social adaptation, as well as their coping mechanisms in stressful life situations.

Such data can be obtained from the perpetrator, but also from *other sources*, so we must be cautious in their assessment. Other sources may include individuals from the perpetrator's or victim's surroundings, as well as records from other institutions through intersectoral cooperation (such as social services, healthcare facilities, and the child's school).

Data contributing to an increased risk of violence include: most often low socioeconomic status of the family, frequent relocations, unemployment among adult family members, financial debts, reduced intellectual or educational capacities, and serious illnesses of a family member (Nasilje prema deci u Srbiji, 2017). Significant data also include: the existence of custody battles, manipulation of the child's behaviour or emotions for personal goals, threats to the children's mother, children, or members of her family, refusal to accept responsibility for parenting, lack of support from immediate family members, and conflicts with other family members, colleagues, or friends (whether occurring at home or in public), as well as the social isolation of family members under the perpetrator's influence.

RISK INDICATORS RELATED TO THE CHILD VICTIM OF DOMESTIC VIOLENCE

Data concerning the child victim can be collected from the child, other individuals, available official records, and collaboration with other institutions.

If the child is a victim of domestic violence, this can be determined through the analysis of the child's nonverbal and verbal communication, while guided by indicators related to: the child's personal characteristics (health status, illnesses, intellectual capacities), developmental characteristics of the child (in relation to age, speech, and vocabulary), and the child's current mental state connected to their relationship with the perpetrator and the consequences of violence on the child. It should be noted that almost every indicator can affect multiple domains in the child's functioning.

Certain **personal characteristics of the child** can predispose them to become a victim of domestic violence. These include, first and foremost, physical weaknesses and psychological problems (Finkelhor, 2008: 61), special needs (DePanfilis, 2006: 39–41), as well as developmental and health characteristics such as delays in intellectual development, slowed development in other modalities, serious chronic illnesses, or disabilities. These conditions in parents who are supposed to care for the child often trigger violence from the father against the mother in the child's presence or directly towards the child by either the father or the mother. The consequences stem from a lack of knowledge and understanding of the child's illnesses and conditions, exhaustion from caregiving, insufficient finances for better care and treatment, parental alcoholism, the development of psychological disorders in parents, and more. Therefore, in such situations, all the previously mentioned indicators related to the parents become significantly more pronounced, increasing the likelihood of violence against the child.



Data about the violent incident are also viewed through the **developmental characteristics of the child**, which relate to their chronological age, speech and vocabulary development, cognitive development in terms of time concepts and the sequence of events, imagination and abstraction, emotional reactions, tendencies toward manipulation, and more. At the preschool age, children are prone to imagination, curious, and think intuitively as they do not use logic to connect events. They may not comprehend more complex events, perceive only what captures their attention, and may assert something without needing to prove it. They are also more suggestible than older children (Baić, 2018; Bruck & Ceci, 1999; Pavliček, 2013). Children older than five years can be questioned about the sequence of events, taking care to note that a child more easily connects time concepts with the order of events than with expressions of time indicators (Baić et al., 2023). Some authors believe that even children over the age of three can provide significant information regarding a committed crime with the proper approach to questioning (Baić, 2018; Bruck & Ceci, 1999; Pavliček, 2013), emphasizing the conditionality of the “proper approach” and the individual characteristics of the child. It is also important to know that children younger than seven or intellectually underdeveloped children fill gaps in time with imagined events, which may not contribute to the accurate identification of the event.

In conversations with the child, age-appropriate terms should be used, along with short and simple sentences, and straightforward open-ended questions that the child can answer in their own words. Suggestive or dichotomous questions should be avoided. When introducing certain terms into the conversation, it is essential to check whether the child understands them and knows their meanings, as we cannot assume that the child assigns the same meanings to words as an adult does. The child should not be asked to explain why they did something to avoid triggering feelings of guilt, which could shut them down for further communication.

The current psychological state of the child as a victim or as a witness can be observed through internalized and externalized indicators. *Internalized indicators* refer to the child's conditions that can be linked to violence against them, as they arise as consequences, which we infer from the child's expressed behaviours (*externalized indicators*).

Internalized indicators pertain to emotional reactions that range from anxiety, depression, and hostility (Litrownik et al., 2003), to jealousy and anger, excessive compliance, or aggressive/destructive behaviour (Brassard et al., 2000; Modul 14, 2019). In conversations with the child, we may notice avoidance of discussing violence, fear of talking about it or mentioning the perpetrator, verbalizing their guilt (as a consequence of developmental egocentrism), minimizing the significance of the violence, all of which may raise doubts that violence has occurred.

Children who are victims of violence from their parents will not seek their parents in threatening situations, as they do not serve as a safe base for them (Bowlby, 1988). Due to their insecure attachment (Mikulincer & Shaver, 2019), they will also exhibit internal functioning problems (Alizy et al., 2017). These internal problems may arise from internalizing parental reactions (Afroz & Tiwari, 2015; Glaser, 2002; McGee et al., 1997), and then drawing conclusions based on those experienced events.

It is important to recognize externalized behaviours that arise as a **consequence of psychological violence** against the child, as their significance is often downplayed in risk assessments. For preschool-age children, these can include: exhibiting exaggerated reac-



tions when they make a mistake or are pointed out for an error; showing sudden fear of unfamiliar situations, especially if they have experienced threats from parents, such as abandonment or harm (Glaser, 2002); and behaviour indicating that they do not seek comfort from parents when they are hurt or upset (Bowlby, 1969; Mikulincer & Shaver, 2019), which arises as a result of internalizing the emotional unavailability/insensitivity of parents (Glaser, 2002). Such isolation imposed by parents, whether social or reflected in emotional unavailability, can also be inferred if the child states that their parent(s) lock them in a closet or another space (Glaser, 2002), meaning that for a child with such experiences, their parent will not serve as a secure base.

Therefore, the identification of risk factors is necessary not only when a child is a direct victim of violence but also when they witness violence in their family. A child is a victim of psychological violence from family members, whether they directly observe the violence or infer it indirectly. A child infers indirectly when they hear sounds from nearby, know that violence is occurring but do not see it, when they assume that it will happen based on previous experiences, or later see the consequences of violence against a family member (for example, injuries on the mother or broken furniture in the house).

The most common reaction of children in situations of violence against their mothers was physical or verbal resistance to the perpetrator, which exposes them to the risk of direct violence, as well as hiding and calling for help (Ignjatović, 2015). Some studies indicate that the impact of direct violence is greater than that of indirect violence (Wilson et al., 2009; Wolfe et al., 2003), but there is no doubt that indirect violence and exposure of the child to domestic violence also have harmful consequences (Evans et al., 2008; Holt et al., 2008; Levendosky et al., 2013; Wolfe et al., 2003).

Therefore, we see that the child's relationship with their parents is complex and, to a certain extent, protective from the child's perspective toward the parents, which is significant when it comes to the **relationship with the perpetrator** (especially in the case of a sexually abused child). Due to their emotional bond with the abuser, children may minimize the events, repress memories, or dissociate from the events. However, atypical, inappropriate, or exaggerated behaviours in children may indicate that sexual abuse has occurred (Lazić, 2021), as such sexualized behaviours deviate from the normal sexual development expected for their chronological age. It is a fact that cases of sexual violence against children are more difficult to uncover and are very rarely reported because children are often not aware of what has happened to them and only realize what was done to them later in life.

Sex offenders use environmental factors to commit crimes against children, assessing risks and benefits while exploiting the situation, family structure, family relationships, and limitations in adult supervision of the child, as well as manipulating the circumstances (Pavlović & Bijvoets, 2016: 126–127). They also manipulate the child's age and the characteristics of the interpersonal relationship, all of which further complicate the detection and proving of such crimes.

SUBJECT, AIM, AND TASKS OF THE RESEARCH

The subject of the research is the identification of indicators of domestic violence against three- to seven-year-old children by CPO. The analysis focused on indicators related to



parents as perpetrators of violence, indicators concerning the child as a victim of violence, and symptoms/consequences pointing to psychological violence against the child. Additionally, we aimed to determine the prevalence of certification for working with minors and any potential differences in the assessment of indicators based on this factor. The *primary objective* of the research was to establish the frequency of indicators of violence against children based on the assessments by CPO and then to determine the existence of differences in the assessment of the frequency of these indicators concerning the gender of the respondents, years of experience in CPO duties, and possession of certification for working with minors. We also had an additional objective that concerned the respondents' opinions on certain systemic issues they face, whether violence between parents affects the child, and whether there is a likelihood of the transmission of violence within the family.

The research tasks are:

- 1) To determine the characteristics of the sample, specifically examining what percentage of CPOs have experience working with children who have experienced domestic violence, the distribution of CPOs by years of service, and what percentage of CPOs hold certification for working with minors.
- 2) To investigate the extent to which CPOs assess the frequency of different forms of violence against children, considering the forms of violence prescribed by the General Protocol (Vlada Republike Srbije, 2022), and whether in their work they encounter more frequently children who are direct victims of domestic violence or children who witness domestic violence.
- 3) To examine the attitudes of CPOs regarding the impact of violent parental relationships on the child, as well as the consequences of experiencing domestic violence in childhood on behaviour in adulthood.
- 4) To investigate the frequency of risk indicators for violence against children under the age of seven. This frequency includes the most common risk indicators related to parents (4a), risk indicators related to children (4b), and indicators/symptoms that may suggest that a child is a victim of psychological violence (4c). For these indicators, we also examined the presence of differences concerning gender, years of service on CPO duties, and possession of certification for working with minors (4d).
- 5) To determine CPOs' opinions on the prevalence of systemic issues that are seen as potential challenges in protecting children from domestic violence.

SAMPLE AND RESEARCH METHOD

The *sample* consisted of 46 CPOs from six police departments in Vojvodina: Subotica, Sombor, Zrenjanin, Kikinda, Novi Sad, and Pančevo. Since the sample represents only 25% of the total number of CPOs in these departments, it is considered convenient and purposeful. The *research* was conducted in December 2023 as part of the promotion of the “16 Days of Activism against Domestic Violence” campaign in Serbia. The *measurement instrument* was a questionnaire constructed specifically for this research, and an analysis of eight questions of various types is presented: closed-ended questions with dichotomous “yes/no” answers, multiple-choice questions, a five-point Likert scale, and questions re-



quiring the ranking of provided answers. *Data processing* was performed using the statistical package SPSS Statistics 25, with descriptive statistical analysis methods, and the data are presented in percentages, frequencies, and ranks. Non-parametric methods of data analysis were used for the analysis of certain questions.

RESEARCH RESULTS WITH DISCUSSION

We decided to present the research results and their discussion together for clarity and in alignment with the outlined research tasks.

1. In Table 1, we present the descriptive statistics data that provide a detailed description of the sample of respondents.

Table 1. *Descriptive Statistics*

	Experience in working with child victims or witnesses	No experience in working with child victims or witnesses	Has a certificate for minors	Does not have a certificate for minors	Number of years working on CPO duties		
					< 2	2–5	> 5
Total Number of CPO	46 (100%)		46 (100%)		46 (100%)		
Number of CPO	38 (83%)	8 (17%)	24 (52%)	22 (48%)	8 (17%)	14 (31%)	24 (52%)
Experience in working with child victims or witnesses	/	/	24 (63%)	14 (37%)	5 (13%)	12 (32%)	21 (55%)
No experience in working with child victims or witnesses	/	/	0 (0%)	8 (100%)	3 (37.5%)	2 (25%)	3 (37.5%)
Up to 2 years on CPO duties	5 (13%)	3 (37.5%)	2 (8%)	5 (27%)	/	/	/
2–5 years on CPO duties	12 (32%)	2 (25%)	7 (30%)	7 (32%)	/	/	/
More than 5 years on CPO duties	21 (55%)	3 (37.5%)	15 (62%)	9 (41%)	/	/	/

In addition to holding a certificate for working according to the Law on Prevention of Domestic Violence (hereinafter referred to as LPDV) (Zakon o sprečavanju nasilja u porodici, 2016–2023), 24 respondents also possess a certificate for specialized knowledge in the field of children's rights and the criminal justice protection of minors. All respondents with this certificate (24) have experience working with children who have been in situations of violence, abuse, or neglect in a family environment (whether they are direct victims or witnesses of violence). This accounts for nearly 63% of the total number of



respondents who have had this professional experience. Only 8 CPO did not have this professional experience, and at the same time, 8 of them do not have a certificate for working with minors. However, 14 respondents who do not possess a certificate for working with minors (which means they are not authorized to work with children) stated that they do have this type of professional experience working with children. This finding can be explained either by the respondents misunderstanding the question or by CPOs working with children despite not holding the necessary certification.

Regarding years of service on CPO duties, we categorized respondents into three groups. Considering that the LPDV has been in effect since 2017, there are CPOs who have held this certification for more than five years. The results in our sample indicate that the majority fall into this category (24), while a slightly smaller number have been working between 2–5 years (14). The fewest CPOs have been in these roles for less than 2 years (8). Among those with more than 5 years of experience, the majority have had experience working with children (21), and most of them also possess a certificate for working with minors (15). The sample included 14 female respondents and 32 male respondents.

2. We examined the frequency of different forms of violence by having respondents rank them from 1 to 6, where 1 indicated the most frequent form and 6 the least frequent form of violence.

The ranking results indicate that the most frequent form of violence against children is *psychological violence* (56% of respondents), occupying the top two ranks in terms of assessed frequency (12 respondents ranked it as 1 and 14 respondents ranked it as 2). The third most frequent form is a combination of physical and psychological abuse (12 respondents), followed by physical abuse alone (13 respondents) in the fourth place. Abandonment of the child was ranked the fifth in terms of frequency (18 respondents), while sexual violence was identified as the least frequent form by 30 respondents (65% of the sample).

It is also important to note that the vast majority of CPOs (91%) reported that they more frequently encounter situations where children are observers (witnesses) of violence occurring between family members. Considering this, it can be concluded that there were fewer instances where children were direct victims of violence. However, it remains unclear whether child witnesses were treated as victims of psychological violence by the potential perpetrator. Was the risk assessed concerning them as indirect victims when emergency measures were imposed, or only concerning the direct victim?

3. We examined CPOs' attitudes toward the consequences of domestic violence through two questions.

The first question focused on the extent of the impact (from 1 to 5) of violent parental relationships on the child, specifically the severity of negative consequences on the child's mental health and development. The impact was rated from 1 – indicating no consequences, to 5 – indicating the maximum negative consequences.



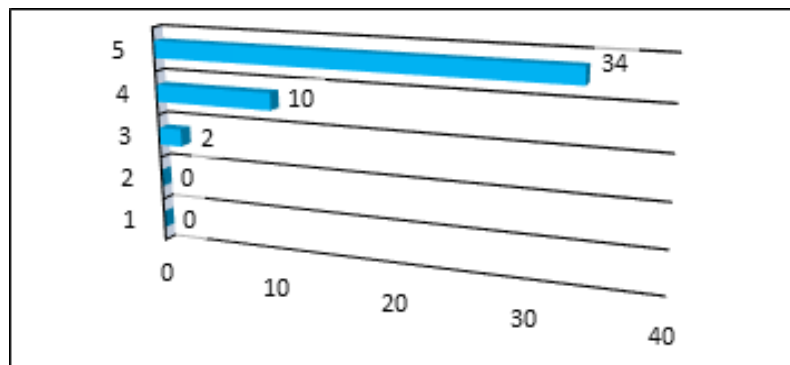


Figure 1. Representation of CPOs' Opinions on the Extent to Which Violent Parental Relationships Leave Negative Consequences for the Child

Figure 1 shows that about two-thirds of respondents (34) believe that such relationships within the family have maximum negative consequences for the child's further development. Two respondents considered the consequences to be of moderate severity, while 10 rated them as a 4 (indicating a slightly stronger impact on the continuum between moderate and maximum negative impact). However, it is encouraging to conclude that the majority of these professionals' views align with the results of many studies (Evans et al., 2008; Holt et al., 2008; Levendosky et al., 2013; Wolfe et al., 2003; Lang et al., 2002).

The second question also reflects opinions on the possible consequences in adulthood due to experiencing domestic violence in childhood.

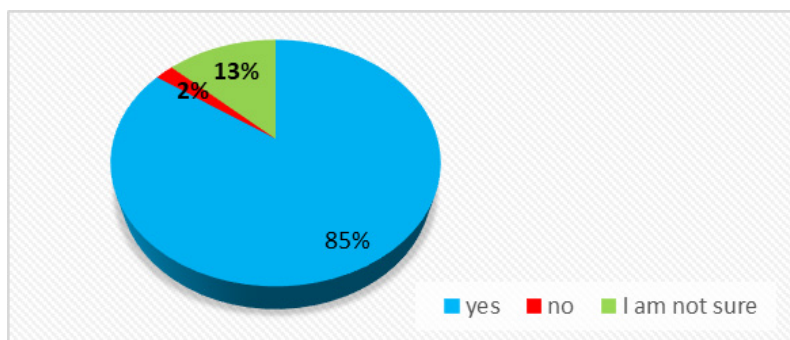


Figure 2. Percentage of CPOs' Opinions that Children Who Experienced Domestic Violence in Childhood Are More Likely to Become Abusers or Victims in Adulthood

Figure 2 shows that the majority of CPOs (85%) believe that there is a higher likelihood that such children will become either abusers or victims of violence in adulthood, compared to children who have not had such experiences in childhood. However, 13% of CPOs are unsure.

Therefore, it can be concluded that a significant majority of these CPOs believe in the “inheritance” of behavioural patterns from the parents that will manifest in adulthood (Plant et al., 2018; Lo et al., 2019; Lang et al., 2002; Black et al., 2001; Cloitre et al., 2002).

4. We examined the frequency of risk indicators for violence against children under the age of seven through three questions: the most common risk indicators related to parents (4a), risk indicators related to children (4b), and indicators/symptoms that may suggest that a child is a victim of psychological violence (4c). We will also investigate the existence of differences in responses based on gender, years of service on CPO duties, and possession of certification for working with minors (4d).

4a) Respondents identified *the three most common risk indicators related to parents* for the occurrence of violence against children from the six options provided (MUP, 2023; Maljković, 2018; Nasilje prema deci u Srbiji, 2017; Black et al., 2001). The first indicator is “unfavourable parental behaviours (criminal behaviour, denial of parental responsibility, inappropriate lifestyle, lack of family support)” with 37 responses (80%), followed by “previous reports of domestic violence and disrupted family relations” chosen by 31 respondents (67%). About half of the respondents (52%) selected the third most frequent indicator – “mental health issues of the parents.” These indicators are part of the aforementioned risk assessment framework, so we can conclude that CPOs are well-informed about which indicators to pay attention to in their assessments, as these three indicators are the most frequently recorded.

4b) In the following question, we examined the frequency of *risk indicators for children* under the age of seven that CPOs indicate as risks for domestic violence against children. The task was to rank the provided indicators by frequency from 1 to 5 (Table 2).

Table 2. *Indicators That May Suggest a Risk of Domestic Violence Against Children, Ranked by Frequency*

Frequency	Indicators	Response Frequency
1. Always	Externalized behavioural problems in children (irritability, crying, aggressiveness, demanding behaviour)	22 (48%)
2. Very often	Internalized behavioural problems in children (anxiety-depressive symptoms, withdrawal)	16 (35%)
3. Often	Delayed child development	19 (41%)
4. Sometimes	Serious chronic illness of a child	22 (48%)
5. Rarely	Sexualized behaviour of a child	29 (63%)

The results in this table indicate that the most common risk indicator identified is labeled as “externalized behavioural problems in children (irritability, crying, aggressiveness, demanding behaviour),” with nearly half of the respondents selecting this option. This indicator aligns with the behaviours mentioned in studies (Dutton, 1994; Brassard et al., 2000; Modul 14, 2019) and is clearly chosen as the most frequent because it is also the most visible. Sexualized behaviour in children as a risk indicator occurs rarely (according to about 63% of respondents), which corresponds to the previous finding that this sample of CPOs considered sexual abuse to be the rarest form of violence against children they



encounter in their work. This result is therefore justified, considering that sexualized behaviours in children at this age indicate the consequences of sexual violence against children (Lazić, 2021).

4c) With the question “How often do you encounter the following five indicators/symptoms that may indicate a child is a victim of psychological violence?” the respondents ranked the prevalence from 1 to 5, where 1 indicates the indicator that is most frequently observed, and 5 indicates the indicator that is least observed. For the provided indicators of psychological violence (Table 3), we listed five behaviours described in the literature (Modul 14, 2019; Glaser, 2002; Brassard et al., 2000; Bowlby, 1969; Mikulincer & Shaver, 2019).

Table 3. *Indicators/Symptoms That May Suggest Psychological Abuse in Children, Ranked by Frequency in Their Work*

Frequency	Indicators	Response Frequency
1. The most frequent	Excessive reaction of a child when they make a mistake or are pointed out for a mistake (trembling, crying hysterically, saying that their parents will kill them, calling themselves stupid, incapable, etc.)	24 (52%)
2.	Exhibits excessive obedience and passivity or aggressive/destructive behaviour	15 (33%)
3.	The child does not seek comfort from parents when they are hurt or upset	18 (39%)
4.	Exhibits sudden fear of unknown situations	14 (30%)
5. The least frequent	The child says that their parent(s) lock them in a closet or some other space	17 (37%)

The results from Table 3 indicate that the largest number of CPOs (52%) reported that they most frequently encounter the indicator of “the child’s excessive reaction when they make a mistake or are pointed out for a mistake (trembling, crying hysterically, saying that their parents will kill them, calling themselves stupid, incapable, etc.)”. The third-ranked symptom, or symptom with a moderate frequency value, is when “the child does not seek comfort from parents when they are hurt or upset,” according to 39% of CPOs. The symptom encountered the least often is when “the child says that their parent(s) lock them in a closet or some other space” (37%). The responses range from 30% to 52% in the sample, which reflects the average occurrence of these indicators as a consequence of psychological violence against children. This can be considered an important finding, as it seems to contradict the result (in point 2) of this sample indicating that children are most often victims of psychological violence, as well as the result showing that 91% of respondents stated that children are most often witnesses to violence in the family (which is a form of psychological violence). This raises the question of whether there is an indicator that appears in the work of CPOs at a percentage higher than 52% that was not included here, which could be a topic for further research.



4d) In this section, we will highlight only the significant results obtained from examining the existence of differences in the sample based on certain variables such as gender, possession of a certificate for working with minors, and the number of years of experience in CPO work, specifically regarding the distribution of ranks related to the indicators described in sections 4b and 4c.

The application of the Mann-Whitney U test showed that *gender differences* among respondents did not lead to a statistically significant effect on the distribution of ranks for four indicators present in children (described in section 4b), but there was one indicator that did show a significant difference. That indicator is defined as “externalized behavioural problems in the child,” where the distribution of ranked responses statistically significantly differs between females and males (Mann-Whitney U = 140.000, $p < .031$). This can be interpreted to mean that respondents, depending on their gender, ranked the frequency of such behaviours in children differently, as it was observed that females tended to give higher ratings for the frequency of this type of behaviour in children.

By applying the Mann-Whitney U test, it was shown that *possession of a certificate for minors* led to a statistically significant effect (Mann-Whitney U = 352.500, $p < .043$) on the distribution of ranks for one indicator, specifically a symptom that occurs in children as a result of psychological abuse – “the child says that the parents lock them in a closet or some other space”. A larger number of respondents who possess the certificate consider this symptom to be less present as a consequence of abuse (they ranked it with a lower number). The distribution of responses for the remaining four indicators described in section 4c did not show significant differences.

It is also important to mention that the analysis using the Kruskal-Wallis rank test did not show that *the years of experience in CPO work* had a statistically significant effect ($p > .05$) on the differences in the ranking of indicators present in children (described in section 4b), nor on the indicators or symptoms that occur in children as a result of psychological violence (described in section 4c).

Here, it is certainly worth emphasizing that a larger sample of respondents is needed to establish any significant differences based on the current variables. Therefore, from the perspective of this analysis, we can speak of certain random or statistically insignificant results of differences achieved by this seemingly homogeneous group of respondents.

5. Finally, we determined the opinions of CPOs regarding some systemic problems they see as possible complicating factors in protecting children from domestic violence.

The first three problems indicate organizational issues and relate to the lack of certification for minors, insufficient numbers of CPO personnel, and inadequate shift distribution. It is commendable to note that the majority of respondents believed that their work is hindered by the lack of certification for working with minors (61%), which confirms our previous analysis. We can certainly interpret the formation of this opinion as a result of their professional experience and recognition of the issues that complicate their daily work. Additionally, we believe that, as theory suggests, they are aware that such circumstances enable secondary victimization of the child, which, we can agree, is not good for a victim of any crime. The percentages for the remaining responses are around 50%, with the problem of “frequent changes in police officers’ assignments within the department” being slightly less prevalent (56%), followed by “the organization of CPO working hours (shift work, on-call duties, number of CPO personnel per shift, etc.)” and “insufficient knowl-



edge for action by officers from other sectors with whom they collaborate,” both at 52%. “Inadequate cooperation between sectors involved in child protection (in technical terms, in the sensitivity of officials, unavailability for cooperation, superficial collaboration)” was recognized as a problem by 41% of respondents. Lastly, as the least frequent response, noted by just over a third of respondents (39%), indicated that “the lack of additional and/or specialized training on this topic” is the least significant problem they see as a hindrance to protecting child victims of domestic violence. This result can be interpreted in two ways. One approach is that CPOs believe that the training they received for certification provided them with sufficient knowledge for intervention, so they do not need additional training. Alternatively, it could mean that they do not feel a lack of additional training because they receive enough on an annual basis, which we did not ascertain in this research.

CONCLUSION

Parental behaviours towards children are not transparent to the community until the consequences become evident. However, by that time, it is already too late, as the child has become a victim of domestic violence. The application of the LDPV allows for prompt and timely responses from state control bodies to prevent domestic violence, and risk assessment is a significant burden for CPOs, which must be well-trained to recognize risk indicators, especially when the victims are children. The issuance of urgent measures grants CPOs significant autonomy but also increases their professional burden in making decisions about these measures (provided that such decisions are not primarily made to protect personal accountability or to avoid severe violations of official duties or criminal acts of negligent conduct). Risk indicators related to parents and those related to children are important because, when properly identified together, they can provide adequate evidence in the victim protection process. Based on the conducted analysis, we can conclude that this sample of CPOs from the Vojvodina region, in line with the training they received and the Ministry of Interior’s Guidelines (MUP, 2023), adequately identified risk indicators.

However, we believe that the knowledge gained from such training may not be sufficient for successfully combating domestic violence. It is essential for training to be continuous and part of the professional development and improvement of police officers. Therefore, continuous training for CPOs should be conducted through annual programs that address the analysis of problems observed in practice, methods for resolving them, but also the presentation of research analysis results at the national level. In addition to the need to increase the number of CPOs, we will emphasize the necessity of increasing the number of police officers who should receive training for CPO duties (even if they do not work in that specific role) and other specialized training related to domestic violence, as they are the officers who first respond to the scene and require this specific knowledge. Furthermore, considering that almost half of the sample (48%) does not have a certificate for working with minors, we highlight that the authors’ opinion aligns with the views of CPOs in this sample: that possessing such knowledge is extremely necessary for CPOs as well as for other police officers in order to enhance the protection of child victims and improve the quality of work organization. Finally, as a significant limitation of this research, we will point out the small, convenient sample, and therefore we consider that these results can serve as a starting point for conducting future more comprehensive research on risk indicators among police officers.



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