The phenomenon of domestic violence in Romania: A prevention and intervention *

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Summary. This paper aims firstly to introduce and discuss the phenomenon of domestic violence and the development of social policy and services in Romania, in its transition from a former communist country (before 1989) to an actual European member (since 2007). Secondly, we will introduce one of the pioneering projects for Preventing and Combating Domestic Violence, developed within the organization "Home of Hope". Its foundation, evolution, theoretical approach and methodology of intervention are described. The experience of grass-root professionals working in the project is summarized in a section on results, what works, some lessons learned and recommendations for policy and practice in the field of gender-based and family violence.

Key words: domestic violence in Romania, legislation, prevention and intervention for abused women, project development

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Domestic violence is accepted as a universal problem that affects all countries and can be found at all social levels, irrespective of their developmental stage. Family and gender violence are recognized by the international community as acting against fundamental human rights such as safety, dignity, liberty, physical and psychical integrity. This has resulted in a broad range of social policy actions and administrative and financial measures (Council of Europe, 1985; United Nations, 1999). Romania has a strong Orthodox cultural and social tradition. The patriarchal mentality and behaviour is the natural and consequential result of this tradition. The perception that women should be the ones who must always be obedient and respectful towards their husband and the male dominated society is a general perception in Romania. A male ideology still dominates social status, granting fewer chances for women to reach leadership in social life or to build successful careers for themselves. In spite of declarations or international treaties concluded, at the level of individual conscience, prejudices conferring women a secondary status remain prevalent. On many occasions, governmental and non-governmental organizations of women and feminist movements in various countries, have noticed the dichotomy existing between "human rights" and "women's rights", which has generally reduced women to second class citizens. This is why women have actively demanded the international community to adopt regulations providing specific and efficient protection, so that gender quality can become a reality. Yet these tactics have not yet yielded the expected results.

Any action to combat discrimination against women must take into account both traditional discrimination, that has deep roots in the individual conscience and so-called "positive" discrimination, which is a legal measure in answer to the need for special protection for women, both of which have negative effects on the social status of women. On the one hand, men consider that it is enough to label gender equality to make it real, while the existence of special regulations for women tends to change them into a privileged minority, therefore inducing resentment.

Domestic violence in the Romanian context

Legal and policy framework

In Romania the interest in domestic violence started to emerge after the fall of communism (1989), in the beginning of the '90s, through the attention paid first by non-governmental organizations. In the Romanian legislation, domestic violence was not treated separately. There were only legal provisions covering all types of violence. Offences and contraventions with general applicability involving domestic violence were included in the Criminal Code and Law no.61/1991, which governs any infringement of the

norms of social behaviour and public order. Yet, for example, hitting, causing serious bodily harm, fatal blows or beating, incriminated by the Criminal Code and Law, are not severely prosecuted when the wife is the victim. Marital rape is another legislative shortcoming due to the distorted way in which those assessing a case apply the law. According to current legal theories and realities, married women or those living with a partner cannot be active subjects in the rape offence, and equal protection principle is therefore undermined by the discrimination suffered by women living in a couple. Also sexual harassment is not covered by criminal law and the women are therefore unprotected in social and professional life.

Due to Romania's application to join the European Union, its requirements and standards have had a clear impact on shaping Romania's social and welfare strategies. International treaties of ONU and the EU recommend the Member States to take consistent legislative measures based on the principle of zero tolerance towards any form of violence. Under international pressure, Romania had to adopt and create a legislative framework as well as enforcement strategies for domestic violence cases. On the legislative level, domestic violence was first recognized as a social problem in 2000, when the section of the Romanian Criminal Code regarding "Hitting and harm to physical integrity or to health" was modified, aggravating provisions being introduced in regard to the punishment of these deeds when they are committed against a family member. Given that these modifications were not enough, the first specific legislative framework for preventing and combating family violence was released in 2003 (Law 217/2003). According to this legislation, the National Agency for Family Protection (N.A.F.P.) was established within the Ministry of Labour, Family and Equal Opportunities. Different aspects of domestic violence as punishments, standards regarding the counselling office, shelters for victims and aggressors were framed. Law 211/2004 offers victims the right to free psychological counselling and legal support, and financial compensation from the Government.

The creation of a legislative framework and of the implementation strategies was not an easy process because the issue of equality between men and women was not considered important, given that the inheritance of the communist regime was a society that was blind to gender problems (Adorjani, 2012). Even though, the legislation is aligned with international treaties and conventions and is theoretically generous, it proved to be inappropriate for the Romanian economical and social context, while standards were not accurate for the domestic violence field practice. Antal and Szigeti (2011 cited in Adorjani, 2012) emphasise the lack of approximation of the Romanian Criminal Code and of the Romanian Criminal Procedure Code with Law 217/2003 of the Romanian Civil Code, which leads to a limited number of domestic violence cases being tried. Thus, legal intervention is critical and problematic.

Other implementation difficulties of the legislative provisions encountered by professionals working with abused women is that the municipality of each town may pay for the victim's forensic certificate,, but this does not usually happen because the bureaucratic procedure is uncertain and money for domestic violence cases are not a priority in the social field. A new amendment stipulates that other money can be used if the funds allocated from the budget are enough, but because social services include all types of services, the transfer of funds is made according to the political priorities of each town or the gravity of the problem, with funds for children and basic needs for very poor families being prioritised, while domestic violence issues are considered as luxury domain. Other issues include the standards which permit the functioning of counselling centres and shelters, which cannot be fully implemented in reality; although shelters for perpetrators are financially supported, the abusers are not wiling to take in consideration this form of help and cannot be obliged to seek help. One of the crucial problems until now was the still missing restraining order for abusers.

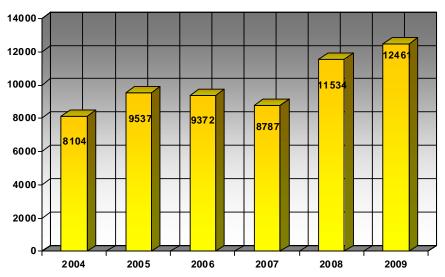
As of March 8th, 2012, a new decree was signed and Law 25 / 2012 was promulgated on amendment of the 2003 law for preventing and combating domestic violence. According to the new legislation, the following were approved: domestic violence includes verbal violence, psychological, physical, sexual, social or spiritual; victims may request a court order of protection and restrain the abuser; the victim is entitled to respect for personality, her privacy and dignity, for special protection, for counselling, rehabilitation, reintegration, free medical care, social counselling and legal aid. The most important amendment is the right to go to court to seek a temporary protective order. The abuser can be prohibited to remain or to return to the matrimonial home, even if it's his property, and can be forced to bear some costs, such as medical expenses, court and cost generated by the victim. A restraining order that requires the aggressor to leave the home can be requested by the victim, as well as maintaining a minimum distance of 200 meters from the victim, prohibition of any contact telephone or correspondence. The law provides also some penalties, for example psychological testing the person who committed acts of aggression and the aggressor can be obliged to participate in psychological counselling, psychotherapy or detoxification programs. The new law will become valid as of May 12th, 2012, and is an important step forward for the protection and safety of abused women, although its implementation can result in slow progress being made.

National data

The National Agency for Family Protection (N.A.F.P.) established in 2003 has the responsibility of creating a data base that manages domestic violence cases. In conformity with this provision, N.A.F.P. gathers and

centralizes the data base concerning the cases of domestic violence, including cases that involve the victim's decease, on the basis of the quarterly reports of the Departments with the responsibility of fighting against domestic violence within the Representatives for Labour and Social Protection of each district. However, national data on domestic violence cases seems to be available only for the period 2004 2009, as N.A.F.P. was taken over by a larger authority the National Authority for Family Protection and Children's Rights (Decision 1385/2009) which does not compile further statistics on domestic violence. Various data are collected within different systems, such as Police, Justice, Forensic department etc.

According to the statistics of the N.A.F.P. evidenced in Graph.1 (Mostavi, 2009), there is an increasing trend in family abuse cases from 8,104 cases reported in 2004, to 9,372 cases in 2006 and 12,461 cases in 2009. Nationally in the period between 2004 and 2009 59.795 cases of domestic violence were reported and 778 deaths following family violence incidents. These statistics can be explained twofold: an increasing public awareness and response to the phenomena as a result of media campaigns, national and local programmes on domestic violence developed over the years; and an increase in poverty, due to the recession and economic difficulties of the country.



Graph. 1. Domestic violence cases in Romania 2004 – 2009 (www.anfp.ro)

Development of social services

First actors in the domestic violence field were non-governmental organisations, that developed isolated initiatives beginning between 1995 and 1996; five/six years after Romania's liberation from communism. This late response shows that social service support and initiatives focused on

other vulnerable groups first, for instance, children in care. Muntean, Popescu and Popa (2000) describe some of the specific elements of these early interventions with abused women: they were developed in the private sector, usually domestic violence was not the first target of the NGO's, and was set up as an imperative response, not as a consequence of a needs and resources analysis of the phenomenon, they lacked trained professionals, and they focused more on charity interventions and crisis support, less on rehabilitation of the abused Some of the domestic violence programs across the country considered more relevant are: Artemis Centre (Cluj-Napoca), Profamilia (Bistrita), Conexiuni (Deva and Hunedoara), Sinergii (developing first maternal centres in Romania), Phoenix Carita (Constanta), SEF - Equal Chances for Woman (Iasi), SCOP – Society for children and parents (Timisoara), Arapamescu (Sibiu), Ikon (Timisoara), PFCF – For every child a family (Muntean, Popescu, Popa, 2000).

The first statutory pilot centre and refugee centre for victims of family violence was set up in 1996 in the capital, Bucharest, by a governmental decision under the coordination of the Ministry of Labour and Social Protection. Also a free urgency call line for domestic violence was set up.

`Home of Hope` experience and expertise: A program of preventing and combating domestic violence

History and mission

The Home of Hope Reformed Christian Church Centre from Brasov was established in 1992, after the social-political-economical changes that took place in 1989 in Romania. The Centre can be described as a typical urban mission institution, serving both the needs of a church congregation, as well as the needs of the continuously changing civil society. Over the years, its commitment to take over and handle some of the local and regional concerns of the current society, has materialized in different long term social projects carried out successfully.

The origins of the project concerned with domestic violence were rooted in a concern over a lack of development of social services in Brasov for victims of family. Responding to this need, from 1997, through "Home of Hope" - Reformed Christian Centre, the project idea started to grow. In the beginning, pioneering work, when the legislation was not framed for domestic violence, the people's mentality during this transition period could not yet accept the issue. The team was particularly concerned with the lack of counselling and formal support for conflict in families. In 2003, with the support of Diakonisches Werk Germany, the project got its' own name and concentrated on the "Program for Preventing and Combating Domestic

Violence". Attention is given to the physical, emotional, social, spiritual and cognitive aspects of people's lives.

The following aims are accomplished and are still in process:

- public awareness for responsible institutions, the media concerning the topic of domestic violence;
- seminars on prevention and education programs on domestic violence issue in secondary and high-schools in Brasov;
- training programs workshops or seminars offered to responsible service providers in the field of domestic violence;
- building a network between certain government- and nongovernmental institutions to prevent and combat domestic violence;
 - psychological counselling;
 - legal advice for victims;
 - building a volunteer team.

One aim is to help individuals express their emotion in a positive way when dealing with their spouse or partner.

After five years experience in working with abused women, the project was frequently challenged by the lack of a crisis centre. This imperative need motivated the expanding and developing of our services and have let to the opening in 2008 of a crisis shelter for victims of domestic violence named "Esther Crisis Shelter".

Theoretical approach

The intervention model was inspired from a Romanian core text about domestic violence and child maltreatment (Muntean, 1999). Ana Muntean is one of the most productive and early writers in the field of domestic violence carrying out research in the field: "Victims of Domestic Violence: Children and Women" (Muntean, 2000).

Among the theoretical approaches of domestic violence which inform our methodology of intervention with abused women are: systemic family intervention (Bowen, 1966), transgenerational theories (Schuzenberger, 2007), contextual therapy (Boszormenyi, 1995), ecological model, risk assessment and risk management.

The family systems theory is a theory introduced by Dr. Murray Bowen (1966) that suggests that individuals cannot be understood in isolation from one another, but rather as a part of their family, as the family is an emotional unit. Families are systems of interconnected and interdependent individuals, none of whom can be understood in isolation from the system. Differentiation of Self is transmitted through the multigenerational transmission process. This concept describes patterns of emotional process through multiple generations. It offers a way of thinking about family patterns that goes beyond a dichotomy of genes versus environment. One of the ways family patterns are transmitted across generations is through

relationship triangles (Bowen, 1978). According to the author, if a person has less capacity for differentiation, the person will seek as a partner someone who has the same level of differentiation capacity. People first couple together and afterwards establish the emotional atmosphere of their new family. If, for example, the husband has a lower capacity for differentiation than his parents, the anxiety level in his new family will be higher. As a consequence, the coping mechanisms in the family will be more active in this generation when conflicts or problems arise. Thus, the past influences the present (Nichols & Schwartz, 2004).

Schutzenberger (2007) makes the distinction between what is clearly called intergenerational transmission, inheritance from previous generations what is forgotten and what is secret, hidden, unspoken, or unprocessed called transgenerational. Mistakes, sins, losses, personal and family secrets and unresolved trauma transmitted from generation to generation may affect future generations in depth.

In sociological approach Boszormenyi Ivan Nagy (1987), a renowned family therapist, creator of context in family therapy theory, describes and explains transmission of aggression from generation to generation with a concept called "as destructive". Boszormenyi (1995) believes that in relationships there is a tendency instinctive, unconscious or partially conscious for balance and reciprocity. So if the parent adequately cares for his/her child, then the child is obliged to turn to care in the same way the next generation and to take revenge against his/her parents taking care of the elderly stage. If a child has not received the right he will not feel obliged to do so, and even more, will perpetuate the way he was treated.

Individual behaviour is influenced by what is accepted, supported, made possible by society, norms and values. If society does not accept the norms and values considered necessary, does not sanction violence and violent behaviour, then they force retention. Changing public opinion is itself a force for restraint. This explains the many campaigns. Many people complain that there is too much attention given to violence in the family: billboards, television, films, lectures and many other means.

An international literature review on the effectiveness of risk assessment in social work, (Barry, 2007), highlights that there are different definitions of risk, organisational cultures, risk assessment tools and procedures, leading to the need of developing a common understanding and language of risk.. Social workers' views of the language of risk are largely absent from the literature and yet they actively engage with risk on a daily basis.

The research and literature on domestic violence identifies following benefits of utilising risk assessment (Laing, 2004):

- to assist women and domestic violence workers to develop more realistic safety plans;
- to assist interventions for the perpetrator for example, treatment for alcohol abuse;

- to help the criminal justice system to identify which offenders are more dangerous and need closer supervision;
 - to educate service providers about domestic violence;
- to provide a shared language about risk for service providers from a range of different agencies.

'Home of Hope' shares the view of many authors in Barry's (2007) review that suggest that risk assessment needs not only to be objective but also subjective – from the individual and family perspectives as well as based on the worker's assessment. Where individuals and their families are capable and willing to participate in such a dialogue, their interpretations of risk are perhaps the most expert, accurate and 'telling' and should be taken into account in a consensual and combined assessment. But this cannot be done easily without a worker–client relationship and a listening ear. The relationship between worker and client is paramount in our approach to effective working.

Method of intervention

In light of these theoretical underpinnings, the intervention model is based on two types of interventions: crisis intervention, regarding the person's way out of the crisis, and the long-term intervention, regarding rehabilitation of the victim. The main intervention domains are: rehabilitation of physical health and mental balance, financial independence, empowerment, motivation and to develop adequate coping strategies, life values etc. An essential long-term goal is stopping the cross generational repetitive patterns.

The victims of domestic violence are contacting our service through the network connections we developed Child Protection Authority, Police, State Social Welfare, Lawyers, Forensic, Public information desk, Hospitals, Universities, Churches, Probation office, Schools, different NGO's and other institutions. There are also women who come on their own, as a result of the campaigns and community activities we have done over the years. Sometimes victims appear at our door or call with the only declared purpose to seek information for themselves or family members, or demand interventions that are unprofessional such as taking the spouse's alcohol away. In most cases these women experience abuse and trauma, but are afraid and unprepared to talk about it and seek professional support.

The first meeting with the abused women is an Initial Evaluation with the main aim of risk assessment of the victim and her family members. Also registration forms are filled. Because safety is the central concern of domestic violence, the initial evaluation is needed to clarify if there is an emergency, if particular: medical care if is needed, if there are injuries, if she needs shelter, clothing, food, if she cannot return home and the children's safety. The crises intervention model is used to assess and manage risks,

while the first actions of intervention are targeted towards risk reduction and establishing a safety plan. In some cases, the police department where the victim lives is contacted and the woman is sent to talk directly to the proximity officer. If there are children at risk professionals collaborate and refer the child to the child protection authority in the county. In case of visible injuries, the woman is referred to the hospitals we are collaborating with and to the forensic department. If the victim needs shelter, steps are taken in this direction.

According to the specific needs of each beneficiary, they follow different steps, as parts of the intervention plan. Direct work with the victim is coordinated on different levels.

The "Esther Crisis Shelter" was developed in order to fulfil the lack of a transit station for two weeks between the counselling office and the long term residential centres. In this way beneficiaries can make several decisions in order to continue their previous life or create a better life

Cases are documented on the basis of interviewing the victim and other family members (if possible). As risk assessment is an important dimension of our intervention, data collected refer to: battered history (previous assaults against the women, previous assaults against others, suicide or homicide attempts, being abused or neglected etc.), battered behaviour (alcohol or drug abuse, terrorising behaviours, monitoring, stalking, escalating frequency or severity of aggressiveness, physical and sexual abuse of the children etc.), battered personality (jealousness, lack of empathy, sense of entitlement or possessiveness, psychological problems etc.) and contextual issues such as: separation, losses, the victim's use of violence, victim's abuse of substances, suicide attempts etc.

In Romania, services for domestic violence focus on the victim of abuse, while programs for perpetrators are very isolated and rare.

The 'Home of Hope' intervention for rehabilitation of the victim provides a range of activities, such as: information regarding domestic violence, psychological and juridical counselling, medical assistance, services and training to help clients make steps out of the condition of being victims and to take mature decisions about their lives. The program for domestic violence is seen by its users as providing relief, if not healing, in difficult situations.

After the evaluation phase, some of the victims choose our services for counselling or therapy. The process of counselling is ongoing, in parallel with other support for the victim (legal or medical assistance, urgency shelter etc.). Therapeutic interventions focus on the following objectives: getting out of the crisis, stop the circle of violence inside the family, discussions on violence in the family of origin, identifying external - social and internal - psychological resources, life planning, re-socialization, restructuring and reframing the negative attitude, belief, restructuring of the gender model, building self esteem and others. The methodology used is individual or group counselling or therapy, family meetings, couple therapy

based on systemic family therapy instruments, hypnosis, psychodrama, sand play therapy, drama therapy approaches.

As discussed in the literature, risk assessment is not seen as a single, static event, being an on-going process and done at every point of contact with the victim (Abrams, Belknap, & Melton, 2000 cited in Laing, 2004). The true goal of the evaluation is not to predict violence, but to prevent it through sound planning based on a comprehensive and informed risk assessment.

In the area of prevention, the following aims are accomplished: public awareness for responsible institutions and media concerning the topic of domestic violence; prevention and education programs on domestic violence issue in schools and high schools in Brasov; workshops, seminars or training programs for responsible providers; building and development of a network of govern- and nongovernmental institutions activating in the field of preventing and combating domestic violence.

Results

The direct beneficiaries represent mothers and their children who are victims of domestic violence who come from the city of Brasov, and also from other towns referred by social services or those calling directly to our organisation. Referrals were sent from different institutions and the number of our beneficiaries grew from year to year as shown in the Table 1:

Table 1. 'Home of Hope' beneficiaries

Year	Number of cases `Home of Hope`			
2003	14			
2004	36			
2005	47			
2006	56			
2007	78			
2008	89			
2009	106			
2010	115			
2011	111			
Total	652			

It has to be mentioned that some clients, according to their specific needs, were supported for more than one year and therefore are included in the statistics in all the years they were supported by our services. Out of these, only seven men were counselled. Most of the women in counselling in psychotherapy were aged between 25-40 years, graduated from high-school, had a job, and were married. Most of the clients were willing to work in individual counselling / therapy sessions, as compared to group work.

In addition to the services for abused women, 281 children who witnessed and were direct or indirect victims of domestic violence were supported.

An example of the number of abused women and support received is given in Table 2 concerning the year 2011:

Table 2. Abused women and their received support.

Total DV* clients Jan - Dec 2011	Newly registered cases of DV Jan-Dec 2011	Number of victims asking information just on the phone	Number of victims attending counselling from previous years	Number of victims attending individual therapy	Number of victims benefiting from other social services
111	55	34 information through telephone	22 individual therapy	37 new clients in individual therapy	41 Social services: 2 Medical assistance: 28 Juridical counselling

^{*} DV = domestic violence

Among the problems solved in assisting the abused women are:

- birth certificate recovery from the state department;
- identity card recovery from the spouse or help to get a new one;
- police intervention in difficult cases;
- release of the forensic certificate;
- public transport;
- medical test for beneficiaries;
- support to find accommodation;
- professional training and training for re-qualification;
- facilitating job seeking and hiring;
- development of parenting skills;
- development of self esteem;
- development of social skills;
- encouragement to use their own abilities and capacities;
- work on building a life plan etc.

Some of the most important problems occurred along the counselling process are:

- the lack of restriction and / or protective order;
- aggressors are punished only financially;
- aggressors intimidating behaviour towards the victim, professionals or even in court:
- court's decision regarding children's custody, which in some cases do not serve the child's best interest;

- financial problems of the victims;
- women's tendency to give up counselling after the crises diminished, with the belief that problems are solved, yet the time needed for long-lasting changes is much longer.

The experience of work in the `Esther` shelter – which is a transit accommodation for abused women in crises – showed that the number of unfinished divorce cases decreased for those being accommodated due to a better motivation for counselling.

In addition to the intervention dimension of the program, an important focus of the project is on prevention. Hence, since 2003 there are organised yearly a number of conferences and workshops for students, camps for children and youth, campaigns to raise awareness on domestic violence issues. The number of participants trained and informed about domestic violence during these years is: 6.203 people, including professionals and non-professionals. The activities described above are effective as they already have an overall coordinated community response, which places a priority on victim safety. Interdisciplinary work (psychologists, social workers, medical doctors, lawyers, school counsellors, teachers, students, priests) and networking are essential parts of the organization's work and accomplishments.

The practical experience and professional surveys demonstrate that the investments in prevention are less costly than the intervention process in the crisis situation which has no solution for the problem itself. The victims need long term recovery to be capable to survive without applying again for help at the social services in the domestic violence department. Of course, this is a personal decision but the majority decide to circle from crisis to crisis in order to "solve" their problems in their own way. The long term recovery presumes: impoverishment of communication, learning the altruist attitude, negotiation, proper administration of family resources, the relationship with the children, conflict resolutions, limits of personal boundaries, couple, between parents and children, generational gaps, conflicts, responsibility assuming, social abilities, changing according to different life circles. In the prevention work the fruits are blooming later because the results are seen in the moment. Instead, the long term outcome is more efficient and qualitative.

The prevention work is much more useful in education and training in order to change rigid habits. Some women affected by domestic violence took some steps to break silence and demand safety, healing and responsibility. With courage and passion, groups of women transformed their personal pain and outrage experience into an example for others.

With an experience and expertise of 8 years in the field of family violence, "Home of Hope's" project on Prevention and Combating Domestic Violence is recognized both formally (accredited social care provider) and informally by the state as social providers with a very good reputation in Brasov County. Consequently, the services of Home of Hope are promoted

in the Mayor's Journal. The Police offices and the local Institutions of the Ministry of Education and the Child Protection sector are aware of the services and projects run by Home of Hope. The Mayor in Brasov has a monthly journal, where the services are promoted. The Police offices and other local institutions related to the field of domestic violence have been informed about the services.

The values that the organization promotes are the main pillars of the professionals' belief-system. In pursuit of the project goals, stakeholders, clients, and the families are treated with dignity, respect, confidence and trust.

Conclusions and recommendations

"The Program of Prevention and Combating Domestic Violence" is definitely an ongoing project which has gained a lot of experience in assessing and intervening with domestic violence victims. While in the pioneering period of the program professionals were purely trained in regards to domestic violence issues (also because the lack of relevant literature and research in the field), over time they added a lot of know how and expertise and disseminated their know how to other professionals and interested people. One example is that, in the beginning it was thought that aggressiveness is just physical and verbal abuse and it is only the aggressors fault, but the complexity of the phenomenon and the extra factors involved become acknowledged and understood.

Through the transgenerational pattern women have the tendency to learn and take over the victim role model from their mothers, while the men the aggressor model from the same sex parent. The work with the women in the project showed a more passive-aggressive profile of the women which combined with an active – aggressive profile of the men.

The experience of work in the 'Esther' shelter showed that there are increased chances for the beneficiaries who are really interested in the changing of their situation and life if they have a 'respite' time and place from the crises to be able to take more adequate decisions for their future and do not return to the violence situation. Another important learning point is that essential groundwork with single-identity groups is necessary to build the capacity for inter-community dialogue.

The 'Home of Hope' program in this state of its development presents the characteristics of an Eastern- European social program: fewer employees than within a similar state institution, less bureaucracy for beneficiaries, but several professional tasks for employees. The program also depends on state accreditation as a social provider for the community, even though it is financially sustained by international private funds. That is why it has to accept and implement the frames imposed by social controllers and is sustained and paid by the National Authority for Family Protection and

Children's Rights. This slows down the rhythm of the intervention work. Also, finding stable ongoing financial support for the future is a challenge for the projects sustainability.

In regards to social policy, Romania is still struggling with law and standards implementation. Some important policy and practice recommend-dations are: a flexible adaptation to the new changes in the political, social and economical life in Romania; protection and empowerment of victims through National Action Plans and the development of the infrastructure which has been unable to keep up with widespread needs, due to the high number of women (mostly) requesting social services.

It is true that wellbeing means a wide possibility of choice for everyone: for beneficiaries or users to ask for help, but at the same time to take control now of their own future; for the public authorities to find the proper, efficient, and so called 'politically correct' ways to deliver social services for citizens; for private social services providers to promote good practices and excellence; and why not, for the economic operators to be sensitive about the employee's family problems. That is why there has to be a proper use of tools and professional human resources in the entire process when delivering social services to people.

To conclude, the authors align with Adorjani's (2012) most recent conclusion that Romania is still not able to respect the international provisions in regards to the efficient protection of victims and the creation of services accessible to them. Yet, there is evidence that major steps have been done in the development of social policy and practice in the field of domestic violence leading to an increased awareness of the phenomenon and in a community response.

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