INVICTUS



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D2.2 - Consultation (National) Report Template

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Table of content

1. 1. Introduction 3

1.1. About the Project 3

2. Methodology 4

3. Results 5

3.1. Prevalence and Helpseeking 5

3.1. Reporting to the police 6

3.2. Barriers to reporting a crime 7

3.3. Barriers to seek formal support 10

3.4. Needs and Available Services 11

3.5. Legal Support 14

3.6. Practical support 15

3.7. Restorative support 17

3.8. Peer support 19

3.1. Victim Groups Lacking Adequate Support Services 20

3.2. Results of the three main objectives 24

3.3.1 Individual Needs Assessment 24

3.3.2 Referral 34

3.3.3 Information Provision 36

4. Discussion and conclusion 38

5. Annexes 39

6. References 40

1. 1. Introduction

As part of the INVICTUS project implementation, national consultations were carried out in Bulgaria, Croatia, France, Italy, Portugal, and Finland to collect evidence on the current state of victim support services. These consultations formed the basis of the Community Needs Assessments (CNA) and the Mapping of Existing Services (MES), providing an in-depth picture of existing structures, practices, and challenges in each country.

The findings in this report build upon the conducted research and reflect on the data collection and recruitment efforts, as well as research results related to the three main efforts (Individual Needs Assessment, Referral, and Information Provision), including prevalence, helpseeking, needs and available services. The consultations focused on identifying service gaps, assessing needs, highlighting promising practices, and capturing barriers that hinder effective victim support provision.

This report synthesises the results of the CNA and MES consultations across the six implementing countries. It presents common trends and country-specific insights, outlining the strengths and weaknesses of current systems and highlighting priority areas for action to improve the accessibility, quality, and coordination of victim support services.

1.1. About the Project

The *Improving National Victim Services Through Transnational Unity and Strategy* (INVICTUS) project seeks to address gaps in national victim support systems across six participating Member States: Bulgaria, Croatia, Finland, France, Italy, and Portugal. By engaging national partners in collaborative research and knowledge-sharing, the project facilitates the development of effective strategies to improve how victims of crime are identified, referred, and supported.

Through coordinated action and stakeholder engagement, the project aims to build stronger, more responsive national victim support frameworks. Based on research methodology developed by the Dutch consortium partner Slachtofferhulp (SOH), partners are supported in conducting desk research, CNA, and MES to map current services, assess systemic challenges, and identify good practices. These findings form the foundation for the creation of National Action Plans tailored to each country's context.

INVICTUS is coordinated by Victim Support Europe (VSE) and implemented in partnership with national victim support organisations. The project is funded by the European Commission under the eJustice action grant scheme focused on victims' rights and procedural safeguards.

2. Methodology

This report builds on desk research and stakeholder consultations. The desk research was informed by research reports, academic publications, and official documents issued by public authorities, including decisions and statements from oversight bodies.

The stakeholder consultations were carried out through an online survey and interviews. The online survey, conducted in May 2025, gathered responses from representatives of various stakeholders, including the public sector and NGOs providing services for victims of crime. The survey invitation was sent by email to representatives of relevant stakeholders, including wellbeing services counties[1] (social and healthcare services), NGOs providing services for victims, as well as law enforcement and judicial authorities (courts, prosecutors). A total of 40 individuals responded. The largest respondent groups were victim support professionals from NGOs (n=24), representing both general and specialized services. The majority of NGOs provided services both locally and nationwide. Social and healthcare professionals (n=12) formed the second largest respondent group. In addition, the National Assistance System for Victims of Human Trafficking, a national expert authority, together with respondents from public authorities and the judicial system, contributed additional perspectives to the survey.

Two focus group discussions and four individual interviews (N=10) were conducted in May and June 2025 to complement the survey findings. The interviewees included victim support professionals (n=7), an attorney, a psychotherapist, and a police crime investigator. Altogether, the stakeholder consultations engaged 50 professionals representing diverse organizational and professional backgrounds. Participants represented organizations from across Finland, ensuring broad geographical coverage from different regions of the country.

The report also draws on findings from the Mapping of Existing Services (MES) online survey, conducted during April–May 2025, which targeted organizations providing victim support services. The survey aimed to gain insight into the landscape of national victim support frameworks. In total, 11 organizations responded: six were shelters from different parts of Finland and five were organizations providing general and specialized victim support services.

[1] The Wellbeing Services Counties (WSC) were established as part of the administrative reform of healthcare, social welfare, and rescue services. On January 1, 2023, the responsibility for organizing these services was transferred from municipalities to 21 WSCs. The duties of the WSCs include providing primary and specialized healthcare, social welfare services, support for children and families, mental health services, and emergency medical services. Additionally, the WSCs are responsible for organizing social services to address needs arising from domestic violence and other forms of violence, abuse, and mistreatment. The WSCs operate as self-governing entities, and their funding is primarily sourced from the central government. https://stm.fi/en/wellbeing-services-counties

3. Results

3.1. Prevalence and Helpseeking

Self-reported victimisation

The 2023 National Crime Victim Survey (NCVS) shows that about 6% of Finns aged 15–74 reported experiencing physical violence at least at the level of a slap during the previous year. Around 4% reported violence causing injury, less than 2% reported sexual violence, and roughly 9% reported threats of violence. These rates are similar to 2021, but violence was more common among young people, and women reported threats and different forms of physical violence more often than men. (Beuker & Näsi 2024)

Respondents of the Police Barometer were asked whether they had been victims of certain types of crime during the past two years. The most common experiences were property damage (6%), theft (5%), cybercrimes such as data breaches, fraud or identity theft (4%), and armed threats (0.2%). (Vuorensyrjä et al., 2023)

The FRA's Fundamental Rights Survey (FRS) also provides insights into crime experiences in Finland. Among Finnish respondents, 39% reported harassment in the previous year and 55% in the preceding five years. About 10% reported experiencing physical violence in the past year and 14% over five years. Property crimes were less common: 6% reported burglary in the previous year, 17% consumer fraud, and 3% online banking or payment card fraud. Despite these figures, police reporting rates were very low: only 9% of victims of physical violence reported their experience, compared to 53% of burglary victims and 35% of online banking or card fraud victims. (FRA, 2021)

- **Harassment**: By far the most common crime experience in Finland. In the FRS country comparison, 55% of Finnish respondents said they had been subjected to some form of harassment (e.g., insulting comments, name-calling, or threats) in the five years before the survey, and 39% during the preceding 12 months. This is well above the EU-27 average of 29%.
- **Physical violence**: Across the EU-27 28 % of respondents experienced physical violence in the previous 12 months and 9% in the preceding five years. In Finland, the chart suggests about 14% had experienced violence in five years and roughly 6–10% in the last 12 months—above the EU average, though precise data are lacking.
- **Reporting to the police**: In Finland, only 9% of victims of violence in the five years before the survey said they reported their most recent incident to the police. The EU-27 average was 30%, with France and Germany reaching around 40%.

The FRS data indicates that harassment is the most common crime experience in Finland, followed by threats and physical violence. Property crimes affect smaller shares of the population, but reporting behaviour varies strongly by crime type. Violence and harassment are rarely reported to the police, while property crimes are more likely to come to official attention. The survey also highlights that Finland has one of the lowest police reporting rates in the EU, suggesting that the actual number of crimes is higher than recorded in official statistics.

Finnish respondents (FRA 2021)

Offence	**Experienced %**	**Reporting %**
Harassment	39	n/a

In-person harassment	36	n/a
Consumer fraud	17	6
Cyber harassment	12	n/a
Physical violence	10	9*
Burglary	6	53
Online banking or payment card fraud	3	35

* Reported by the respondent or somebody else

3.1. Reporting to the police

Across Finnish surveys, police reporting remains low except for property crimes. The Police Barometer 2022 found that nearly half of respondents had at some point had property stolen and one sixth had experienced sexual violence or harassment. Reporting to the police ranged from 78 – 82 % for property crimes to about 11 % for sexual offences (Vuorensyrjä et al., 2023). In the National Crime Victim Survey 2023, only 18 % of those assaulted said the incident was reported. Among children and adolescents, reporting was even rarer: only around 11 % of ninth graders who experienced unwanted sexual interactions and 2 % who experienced violence told the police. These figures indicate that while sizeable proportions of Finns, including youth, experience crime, most do not f report incidents to law enforcement (Beuker & Näsi, 2024).

Between 2020 and 2021, approximately 10 – 13 % of those who had experienced physical violence involving at least a slap reported the incident to the police. In 2023, the proportion rose to 18 % (23 % of men, 15 % of women), yet only about 2 % of all respondents overall had reported their victimisation to the police, meaning that most violence remains outside official statistics (Beuker & Näsi, 2024).

Reporting rates vary markedly by crime type. For property crimes such as car theft, about 82 % of victims report the offence to the police, whereas for assault the reporting rate is around 49 % (Vuorensyrjä et al., 2023). For intimate partner violence, the reporting rate is approximately 33 %, and for sexual violence only about 11 % of victims make a report (European Union Agency for Fundamental Rights, 2021). Hate crimes are particularly under-reported–up to 80 % of such incidents go unreported (Senta, 2024). Victims of human trafficking often do not report their situation due to fear of deportation, mistrust in authorities, or language barriers (Jokinen, Ollus, & Pekkarinen, 2023). These patterns underscore that reporting behaviour depends heavily on both the type of offence and the victim's circumstances.

According to the *FRA's Fundamental Rights Survey (2021)*, Finland had the lowest reporting rate for violence in the EU: only about 9 % of victims who had experienced violence in the previous five years reported the incident to the police. By comparison, the EU-27 average was around 30 %, and in countries such as France and Germany, the rate approached 40 %. This highlights Finland's notably low level of reporting violent crimes compared to other EU member states.

Reported victimization by crime type during the past two years (Vuorensyrjä et al., 2023)

Crime type	**Repondents (%)**	**Reported to the police (%)**

Car theft	n/a	82
Burglary or attempted burglary	n/a	78
Property damage	6	55
Theft	5	67
Sexual harassment or violence	3	11
Assault	1,5	49
Armed threat	0,2	42
Cybercrime (e.g., data breach, fraud, identity theft)	4	43
Other crime or harmful act	4	46

3.2. Barriers to reporting a crime

A victim's decision to report a crime is shaped by multiple interrelated factors. The type and severity of the offense play a major role, as more serious crimes are generally seen as requiring official action. The relationship between victim and perpetrator can complicate reporting, especially when the offender is a family member or partner. Fear of retaliation or harm to oneself and loved ones may also discourage victims from contacting authorities.

Cultural norms and community attitudes influence whether victims perceive reporting as acceptable or shameful, while trust in authorities and the justice system affects confidence in receiving fair treatment and protection. In addition, victims' level of awareness—such as understanding their rights, the reporting process, and available support services—can determine their readiness to act. Finally, access to financial, social, and psychological resources provides victims with the stability and support necessary to follow through with a criminal complaint.

Table: Factors Influencing Victims' Decision to Report a Crime (Based on CNA stakehoder consultations)

Factor	**Description**
Type and severity of the crime	More serious offenses (e.g., violence, sexual crimes) are more likely to be reported, while minor offenses may be seen as not worth reporting.
Relationship between victim and perpetrator	If the offender is a close person (family member, partner, acquaintance), reporting may be hindered by loyalty, fear, or dependence.
Risks to self and loved ones	Fear of retaliation, escalation of violence, or harm to close ones can discourage reporting.
Cultural factors and community attitudes	Social norms, stigma, and normalization of certain crimes may prevent victims from seeking justice.

Factor	Description
Trust in authorities and the justice system	High trust increases the likelihood of reporting, while skepticism or negative past experiences reduce it.
Informational readiness	Knowledge of rights, the reporting process, and available services empowers victims to take action.
Resources and support	Financial security, social networks, and psychological support make reporting easier; lack of resources can leave victims isolated.

Many victims choose not to report their experiences to authorities. This reluctance can stem from a complex interplay of personal, social, systemic, and practical factors. A central issue is that victims may not always recognize their experiences as crimes. This is common in domestic violence, where abuse has become normalized. Shame and stigma are particularly significant in cases of sexual and intimate partner violence, where cultural and gender norms may discourage disclosure. For example, some men avoid reporting victimization because admitting it is seen as showing weakness. Many victims do not file a police report because of fear, dependence on the perpetrator or feelings of shame. Additional barriers include distrust in authorities due to previous negative experiences, the belief that reporting will not help, fear of retaliation, fear of deportation or residence-status issues for migrants, geographic distance to a police station and language barriers.

Young men often refrain from reporting violent incidents because they are perceived as minor or are linked to situations in which they were intoxicated. Another reason may be fear of exposing their own criminal activity. Members of ethnic minority groups may avoid the police because issues are often dealt with within their own community.

Practical and systemic barriers also play a role. Long distances to police stations, lack of transportation, language difficulties, and problems using digital reporting platforms can make reporting difficult. Limited knowledge about rights, procedures, or available support services further reduces victims' access to justice. Property crimes are often reported mainly for insurance purposes, as many victims see little benefit in engaging with the criminal process. Trust in the authorities is another decisive factor. Many victims have negative perceptions of the police or the justice system, believing that their reports will not be taken seriously or that nothing will be done. This distrust is particularly evident in marginalized communities, where internal conflict resolution is often preferred.

Relationships with perpetrators complicate matters further. Emotional, financial, or legal dependencies—such as fears of losing child custody or residence status—make reporting risky. Victims may also fear retaliation or escalation of violence. In cases of sexual violence, stalking, and intimate partner abuse, power imbalances and the difficulty of gathering sufficient evidence often discourage victims from contacting authorities.

The burden of the criminal process, including its length, emotional toll, and potential financial costs, can be a decisive factor. Limited personal resources and a desire to avoid re-traumatization often lead victims to choose silence over engagement with the system. Many victims also lack the personal resources or support systems needed to navigate a complex and often retraumatizing legal process. Limited personal resources and the exhaustion caused by trauma symptoms can make the burden of reporting feel overwhelming.

Finally, the criminal process itself can deter reporting. Victims anticipate long, emotionally taxing, and costly proceedings, with the risk of re-traumatization. Limited personal resources and the exhaustion caused by trauma symptoms can make the burden of reporting feel overwhelming.

In sum, the decision not to report a crime is rarely due to a single reason. It results from a combination of fear, shame, social and cultural pressures, distrust in institutions, and practical obstacles**.** Effective responses therefore require not only improvements in accessibility and efficiency of the justice system but also broader cultural change and stronger support structures for victims. Policy responses should focus on improving institutional trust, simplifying reporting mechanisms and ensuring cultural and linguistic accessibility.

Breaking Barriers: The Role of Support Services in Facilitating Reporting

Research shows that rape victims in Finland rarely report assaults to the police—nationally, fewer than 4% do so (Piha, 2019, cited in Arponen et al., 2023). However, among clients of the Helsinki Seri Support Centre, more than 60% filed a police report (63% in Arponen, Antfolk, Korjamo, & Korkman, 2023; 64% in Arponen, Korkman, Antfolk, & Korjamo, 2024)—a rate far higher than the national average. This finding highlights the critical role of institutional support in overcoming barriers to reporting.

At the Seri Support Centre, victims receive psychosocial support, medical care, and legal guidance, as well as the opportunity to file a police report directly with professional assistance. These services reduce fears of not being believed, feelings of shame, and the impact of rape myths that often discourage reporting (Mulder et al., 2021; Reich et al., 2022). The evidence suggests that provided support functions as a decisive mediating factor: while demographic and situational variables do not strongly predict reporting (Arponen et al., 2024), the presence of supportive structures makes reporting more feasible and less intimidating. Expanding such centres and strengthening cooperation with the police could substantially improve victims' access to justice and increase reporting rates.

Table: Barriers to Reporting a Crime

Barrier	**Examples**
Uncertainty about whether it's a Crime	The victim may not recognize the act as a criminal offense (e.g., domestic violence, persecution).
Practical obstacles	Physical distance to a police station or lack of transportation Limited digital access
Lack of knowledge or skills	Unfamiliarity with the reporting process Difficulty navigating electronic services Language barriers Uncertainty about available support services and what to expect during the process
Distrust of authorities	Previous negative experiences with the police or justice system Fear that the police will dismiss or ignore the report
Shame and guilt	Feelings of shame about the incident Self-blame ("I did something wrong") Fear of social stigma

Barrier	Examples
Cultural barriers	Masculine norms may discourage men from identifying as victims ("weakness"). Social pressure and cultural norms discourage reporting. Fear of exclusion or disapproval from the community
Relationship with the perpetrator	Close relationship with the offender (e.g., family member, friend) Desire to protect the perpetrator from the consequences of criminal proceedings Feelings of loyalty or solidarity (e.g., if the perpetrator is undocumented) Financial or emotional dependency on the perpetrator
Fear of the perpetrator's reaction	- Threats of violence or retaliation - Concerns for the safety of children or other loved ones
Fear of negative consequences	- Risk of losing child custody - Loss of legal residency or fear of deportation - Worry about being wrongly accused or criminalized - Potential harm to loved ones
Uncertainty about the outcome	- Concerns about lack of evidence ("it's just my word against theirs") - Doubts about being believed or the perpetrator being held accountable
Burden of the criminal justice Process	- Lengthy, emotionally exhausting legal proceedings - Potential financial costs and time demands
Limited personal resources	- Lack of time, money, or emotional capacity to pursue justice - Desire to avoid confronting the perpetrator - Wish to move on and forget the incident

3.3. Barriers to seek formal support

Several interrelated factors prevent crime victims from seeking formal support, linked both to individual experiences and to the structures of the service system. Many of these factors are the same as those that hinder reporting to the police. Feelings of shame, self-blame, fear of not being believed, distrust in professionals and fear of stigmatisation discourage people from seeking help. Many victims simply do not know about available services. Feelings of shame and self-blame are particularly common among victims of sexual offences and domestic violence. Shame is also pronounced among victims of online crimes and fraud, such as romance and investment scams. The low rate at which men seek support services reflects gender norms, in which becoming a victim of violence is associated with shame and perceived as conflicting with cultural expectations of masculinity. Seeking support may also be experienced as a loss of agency and as stigmatisation

through being labelled a "victim." In addition, fear of exposure in small communities can prevent victims from seeking services.

For many, the threshold to access services is too high because the system is perceived as confusing. Many do not know what kinds of support services exist or how to access them. Professionals also lack sufficient expertise and may not always recognize violence or know how to address it. A lack of information and insufficient service guidance mean that services are not found or that victims lack the strength to seek them. Responsibility often falls on the victim to seek services independently, which can feel overwhelming. Non-native speakers and undocumented migrants often do not know which services they are entitled to use, nor can they find help in their own language. Low-threshold services are not sufficiently available to all victim groups: for example, fraud victims lack a clear support pathway, and in many areas, services are too distant or altogether unavailable.

Distrust of authorities and previous negative experiences raise the threshold for seeking help. Some victims avoid support services for fear of child welfare notifications or the initiation of criminal proceedings. In cases of domestic violence, barriers to seeking support may include both protecting the perpetrator and fear of retaliation or escalation. Victims' own circumstances—such as lack of resources, mental health or substance abuse problems, poor socioeconomic position, or reduced functioning—also prevent them from seeking help. The most vulnerable victims may lack even the practical means, such as a phone, money, or the ability to manage their affairs.

3.4. Needs and Available Services

Table: Are there adequate support services available to meet the needs of victims? (CNA online survey, N=40)

	No %	Yes %	No answer %
Psychosocial support	79	17	5
Peer support	76	5	19
Practical support	57	21	21
Legal support	38	45	17
Restorative support	26	26	48

Psychosocial support

Among the CNA survey respondents, psychosocial support services in Finland was widely perceived as insufficient. Nearly four out of five (79%) respondents stated that psychosocial support services (counselling, psychotherapy, therapy groups) are insufficiently available. Only 17% considered the services adequate.

Regional inequalities further complicate the situation. In the capital region, there are multiple providers and, in some cases, clients can obtain appointments quickly. However, there are not enough resources for long-term support, and waiting times for psychotherapy can stretch up to two years. Support is often short-term – for example, limited to five sessions – even though recovery

from violence and the duration of criminal proceedings can last for years. In Lapland, services are extremely limited and often only available remotely, though smaller client numbers make it possible to form longer and more personal support relationships. In South Karelia, a variety of services exist, but provision is fragmented, and long-term support is referred to other providers.

Across all regions, key challenges include insufficient resources, long waiting lists, and a fragmented service system. Clients do not always find the right service, or referrals fail, which can reduce motivation to seek help. Psychotherapy in particular represents a major bottleneck: there are too few therapists, expertise varies greatly, and clients may wait a long time to find a suitable professional. In some cases, public mental health services have directly informed clients that they are unable to provide the necessary support.

Respondents emphasised the need for long-term, timely, and low-threshold support that does not require complex referral systems. Services should be equally accessible across Finland, regardless of postal code. Both the public sector and NGOs require more stable funding and additional staff. Respondents also highlighted the importance of targeted services for men, multilingual support, and regular training for professionals in trauma-informed approaches. Awareness of available services and the smoothness of referral pathways should also be improved, for example through nationwide campaigns.

In summary, current psychosocial support services do not meet victims' needs. They are too limited in scope, too short in duration, and distributed unequally across regions. Without increased resources, better coordination, and long-term solutions, many victims will continue to be left without the support they need at the time they need it most.

Key Findings

Long-Term and Timely Support

- Current services are often limited to a small number of sessions (e.g., five), which is inadequate given that criminal processes may last several years.
- Respondents emphasized the need for continuous, long-term psychosocial support.
- Access should be immediate and timely, reducing current long waiting periods.

Regional Disparities and Equal Access

- Service availability differs greatly between municipalities and wellbeing counties.
- In many areas, no counseling, crisis centers, or specialized psychosocial support are available.
- Equal service provision should be ensured across the country, regardless of postal code.

Low-Threshold Services

- Services should be easy to access, rapid, and available without complex referral systems.
- "Less bouncing between providers" was a recurring concern.
- Local in-person services are necessary, as not all victims can use digital or remote services.

Funding and Resources

- Both public sector and NGO services suffer from insufficient resources.
- Funding cuts for NGOs have reduced service capacity and coverage.
- Sustainable, long-term funding must be secured, alongside an increase in staff (e.g., trauma therapists, crisis workers).

Targeted Services and Professional Expertise

- Male-specific services are lacking, as universal services are often perceived as "female-oriented."
- More expertise is needed in trauma-informed care, intimate partner violence, and multilingual support.

- Professionals should receive regular training and be encouraged to proactively recognize and address support needs.

Awareness and Referral Systems

- Services are not always widely known, and referral practices are inconsistent.
- Clearer service naming and improved referral pathways are needed.
- A nationwide awareness campaign, for example through maternity and health clinics, was suggested.

Structural Integration and Cooperation

- Psychosocial support should be integrated into wellbeing services, not left mainly to NGOs.
- Healthcare currently prioritizes physical care over psychological care (e.g., in sexual assault support centers).
- Stronger cooperation between different service providers is required.

Regional Insights

Capital Region (Helsinki and surroundings)

- Multiple services exist.
- Appointments can sometimes be obtained fairly quickly.
- Still insufficient for long-term needs; services are often short-term.
- Insufficient support for long-term needs; psychotherapy queues up to 1–2 years. Guidance works if the client finds the right entry point, but self-navigation is difficult.

Variation in psychotherapy quality and expertise

- Upper Lapland (Northern Finland)
- Very limited service availability, often only remote services.
- Rovaniemi has some NGOs (Girls' House, shelters).
- Smaller client numbers allow longer and more personal support relationships.
- However, few options to refer clients forward → services are less comprehensive.
- Few referral options, leaving gaps in service provision.

Eastern Finland

- Services exist, but provision is fragmented.
- Effective cooperation with NGOs
- Long-term support is outsourced; local resources are sufficient for initial or shorter-term contacts.

Areas for improvement:

- Ensure long-term and continuous support aligned with recovery and legal processes.
- Reduce regional disparities: equal services across Finland.
- Develop low-threshold access points: simple, fast, less bureaucracy.
- Secure sustainable funding and increase human resources (therapists, crisis workers, trauma specialists).
- Expand targeted services: male-specific, multilingual, trauma-informed support.
- Strengthen awareness and referral systems through clear pathways and national campaigns.
- Integrate psychosocial support into wellbeing services and enhance cooperation between sectors.

3.5. Legal Support

Less than half of respondents (45%) considered legal support services sufficient, while 38% found them insufficient and 17% were unsure. This suggests that although nearly half perceive current services as adequate, a significant proportion find them lacking, highlighting clear room for improvement. The relatively high share of respondents who were uncertain also points to possible gaps in awareness or accessibility of information about available services.

Improving access to legal support requires increased resources and structural reforms. Funding for legal aid offices and interpretation services must be raised so that services are genuinely available nationwide, including evenings and weekends. Service quality and practices should be standardized across the country to ensure that access to services does not depend on one's place of residence or the policies of a particular office. Financial barriers must be reduced by expanding free legal aid, considering debts in eligibility assessments, and covering lawyer fees more broadly with state funding. Access to legal support can be strengthened by appointing a legal support person early, providing low-threshold counselling, plain-language and multilingual guidance, and developing remote services. These measures are required to ensure that every victim of crime receives equal access to the legal support they need, regardless of their financial situation, place of residence, or language skills.

Respondents highlighted several issues in accessing legal services in Finland:

Equality and Regional Coverage

- Access to legal support varies significantly between regions: in large cities, services are more available but overburdened, while in small municipalities – especially in Northern Lapland – services are scarce or entirely lacking.
- Practices differ across legal aid offices, leading to unequal treatment.
- The interpretation of eligibility criteria for state-funded legal aid varies between legal aid offices and among staff.

Resource Shortages and Quality Issues

- Public legal aid offices cannot respond effectively to urgent criminal cases.
- No legal counsel is available during evenings or weekends for interrogations.
- Waiting times are long, delaying urgent cases like restraining orders.
- Service quality is inconsistent, and there is a shortage of skilled counsels.
- More staff, resources, unified practices, and quality monitoring are needed.

Financial Barriers

- Lawyer fees are prohibitively high, deterring victims from seeking help.
- Legal aid does not cover all stages (e.g., mediation, pre-trial, early proceedings).
- Debts are not considered in eligibility assessments, excluding many victims.
- Offenders may misuse the justice system to harass victims, raising their costs.
- Broader state coverage of lawyer fees and easier access to free legal aid are needed.

Information, Guidance, and Language

- Many victims do not know their rights or receive timely updates on proceedings.
- Language barriers are significant: services are available only in Finnish, Swedish, or English.
- More plain-language materials, interpretation services, and remote digital services are needed.

Recommendations

Resources

- Adequate funding and staffing must be secured for legal aid offices, and interpretation services to ensure timely and accessible support.

Equality and Coverage

- Legal support should be equally available nationwide, with unified practices and quality standards applied across all regions.
- Eligibility criteria for granting the legal aid should be applied consistently nationwide to guarantee equal access regardless of region or office.
- Access to legal aid should be expanded by lowering income thresholds, considering debts in assessments, and broadening state coverage of lawyer fees.

Information and Guidance

- Victims should receive clear, plain-language, and multilingual information, and authorities (police, social services) must actively guide them to legal support services.

Victim Support

- Victims should be assigned a legal support person at an early stage, and specialized services must be developed for victims of financial crime, online fraud, and identity theft.

Victim Support and Low-Threshold Services

- NGOs and welfare regions should provide free initial assessments and legal advice.
- More free, low-threshold counselling and clearer information about rights are needed.
- Special groups such as victims of financial crime, online fraud, and identity theft require dedicated service channels.

3.6. Practical support

The survey results show that most respondents consider practical support services insufficient. More than half of the respondents (57%) believe that there is not enough practical support available. Only about one-fifth (21%) considered the services sufficient, while the same share (21%) could not give an assessment. The result reinforces the picture that also emerged from the open responses: there are significant gaps in the availability of practical support, especially in the post-crisis phase and when viewed regionally. This underlines the need to increase resources, strengthen service accessibility, and develop concrete everyday support for crime victims.

In Finland, anyone facing domestic violence can go to the shelter on their own initiative or under the guidance of an authority or another party, also anonymously if necessary. Shelter stays are always free of charge for the client. In 2024, shelter capacity in Finland was moderate overall but unevenly distributed: Eastern and Southeastern Finland and the west coast experienced lower pressure, while Central Finland, Northern Ostrobothnia, and Southwest Finland frequently faced shortages. Shelters in the Helsinki Metropolitan Area were heavily burdened, though the wider network helped prevent complete capacity gaps. Kainuu (eastern Northern Finland) was particularly vulnerable with only one small unit, and in Lapland (northernmost Finland) accessibility is hampered by very long distances, such as the 500 km journey from Utsjoki to Rovaniemi. Anyone in need can seek help at any shelter, regardless of their municipality of residence, and if one shelter is full, clients are directed elsewhere. In 2024, a total of 1,318 persons were referred from one shelter to another due to lack of space, most of them in the capital region and in Southwest Finland. Overall, capacity still falls short of

international recommendations, and regional disparities point to the need for increased capacity and a more balanced distribution of services.[2]

The findings from stakeholder consultations highlighted that the availability of practical support is often inadequate, especially after the acute crisis service phase. Victims need long-term, concrete, and low threshold "hands-on" support that helps them manage everyday life, safety, and interactions with authorities. Fragmentation of services and being referred from one service provider to another ("service hopping") were seen as major obstacles. A particular gap identified was the lack of supported housing after shelter stays and insufficient practical everyday assistance.

Respondents also underlined the importance of very practical assistance, such as accompaniment to police interviews, help with transportation costs, ensuring safety measures, and childcare during court proceedings.

Improving the availability of practical support requires accessible, and low-threshold service network. Support must be comprehensive and long-term, covering not only acute crisis care but also everyday life management, safety, and interactions with authorities. The needs of specific groups must be met, with coordinated support so victims can access help in one place. The role of wellbeing services counties was seen as crucial: they should develop services, appoint coordinators for domestic violence work, and play an active role in building regional cooperation structures to promote cooperation across sectors. Awareness and guidance among professionals must also be strengthened to ensure that victims are referred to services in a timely manner.

Regional differences must be addressed to ensure equal access to support in Northern Finland, sparsely populated regions, and Swedish-speaking areas. A unified, flexible, and well-resourced service network is essential to guarantee that all victims of violence receive the practical, hands-on support they need, regardless of where they live.

Regional disparities in service provision:

- Northern Finland**:** Long distances to the nearest shelter and limited resources hinder access. RIKU carries much of the responsibility, but its capacity is insufficient.
- Helsinki Metropolitan Area and large cities: High demand creates resource pressure for shelters and victim support services. While more services exist, the need is also significantly greater.
- Swedish-speaking areas**:** The availability of Swedish-language services is weak in some regions.

Positive developments

- The number of shelter places has increased in recent years.
- Some shelters allow pets or arrange pet care during shelter stays, which lowers the threshold for victims to seek help. However, this is not yet nationwide.
- Support provided by social and crisis emergency services was seen as highly valuable in serious crime situations.

Areas for improvement

[2] Nipuli, S., & Mielikäinen, L. (2025). *Shelters for victims of domestic violence 2024: More clients in shelters than ever before* [Tilastoraportti 36/2025]. Finnish Institute for Health and Welfare. https://urn.fi/URN:NBN:fi-fe2025053056359

- **Continuity:** Long-term, concrete support for housing, finances, childcare, and interactions with authorities after the shelter or crisis service phase should be ensured.
- **Resources and regional coverage:** Shelters and social services must be strengthened; services should be developed especially in Northern Finland and sparsely populated areas.
- **Low-threshold and one-stop-shop services:** Service hopping should be reduced, one-stop service points and outreach work must be established, and access to support should be simplified.
- **The needs of specific groups:** Male-specific services should be developed; support for migrant women and victims of honour-based violence must be strengthened; the availability of Swedish-language shelter services should be secured.
- **Practical everyday assistance and safety planning:** Help with appointments, transportation, safety measures, and daily arrangements should be provided; tailored services such as cleaning support for families of homicide victims and childcare during court cases must be included.

3.7. Restorative support

In Finland, mediation in criminal cases is a public service where volunteer mediators mediate between the parties to a crime and assist them in the negotiations. The purpose is to discuss the offence, the parties' experiences and emotions concerning it and agree on ways to compensate for the damages or reach a settlement that both parties can accept. Provisions on mediation are laid down by law. Participation is always voluntary and free of charge. Mediation is a procedure either parallel or supplementary to the criminal process and aims to prevent reoffending. The Ministry of Social Affairs and Health leads, steers and monitors the mediation services at national level. The Finnish Institute for Health and Welfare (THL) is responsible for organising mediation across the country, and services are provided through local mediation offices. Typical cases include property crimes, damage to property, and minor assaults.

The findings of the CNA survey indicate that the availability of restorative services varies markedly across Finland: in the capital region waiting times are long, in Eastern Finland the situation has deteriorated, while Northern Finland shows relatively good access. Despite challenges, the overall system is fairly comprehensive, and developments in youth mediation, such as group and peer mediation offering innovative ways to resolve conflicts, are viewed as particularly positive.

A legislative reform that took effect in January 2025 prohibits mediation in domestic violence cases. The reform was designed to strengthen victim protection and emphasize the seriousness of intimate partner violence, but it has also divided opinion. Supporters maintain that the ban safeguards victims from further harm and prevents perpetrators from exerting continued control. Critics, however, see the ban as overly broad and categorial. Many emphasized the need for a more nuanced approach that distinguishes between different types of close relationships, ensuring victim protection without removing constructive alternatives such as mediation in cases (e.g. violent incidents between siblings) where it could be more appropriate than a criminal procedure. Before the reform, mediation often served as a gateway to support services, enabling referrals to counseling, therapy, or NGO-based programs. With the ban, this referral pathway is no longer available in domestic violence cases. In smaller municipalities, where s service options are already limited, the ban has created gap in support provision, denying some victims access to mediation they would have preferred as part of their recovery process. Overall, the findings suggest the need for a more nuanced and case-sensitive approach, one that prioritizes victim safety while still allowing restorative pathways in cases where mediation may offer a constructive complement to the justice system.

Key obsevations

- Mediation is particularly beneficial in cases of minor property crimes and conflicts between young people.

- Special strength in youth mediation: Development of group mediation and peer mediation seen as positive, offering young people constructive ways to address conflicts collectively.
- Provides an important pathway to guidance and support services for victims and offenders.
- Overall coverage is fairly good**:** In addition to mediation offices, NGO projects, and shelter non-residential services provide restorative support.
- Some regions report that mediation services function well overall, with remote services complementing accessibility.

Regional differences

- Capital region**:** Mediation offices exist across all welfare areas, but waiting times are long (3–4 months for initial contact).
- Northern Finland: Mediation usually starts within a month and access is relatively smooth.
- Eastern Finland: Situation has worsened; queues have lengthened and limited resources restrict service delivery.

Ban on mediation in domestic violence cases (effective January 2025)

Supportive perspectives**:**

- Mediation is unsafe due to the inherent power imbalance in domestic violence. It may enable perpetrators to maintain control over victims.
- The reform is seen as a strong signal that domestic violence is taken seriously.
- Before the ban, some cases of serious assault had been mediated, raising concerns about suitability.

Critical perspectives**:**

- The ban is too strict and indiscriminate. It prevents mediation even in cases where it could be more appropriate than lengthy court proceedings (e.g., violent incidents between siblings or by minors against parents).
- Mediation was useful in minor DV-cases, as it required offenders to take responsibility and led to concrete agreements (e.g., behavioral contracts), which fines or non-prosecution decisions rarely achieve.
- Feared the reform would “sweep the problem under the rug,” leaving NGOs with limited resources to carry an even greater burden.
- Some view the reform as politically motivated rather than genuinely improving victims’ situations.
- The ban removes the possibility to refer parties to support services through mediation.
- The already congested justice system will face increased pressure, with law firms being the main beneficiaries.
- Victims of domestic violence may lack safe spaces or processes in which they can address their experiences.

Areas for improvement

- Access to services: Restorative services should be made available at an early stage in accordance with the victim’s needs. Clear guidelines and professional training are essential, with particular attention to ensuring that victims are never pressured into mediation.
- Improved regional availability: Service provision should be strengthened especially in areas with long waiting times or limited options. Equal access across all regions is necessary to avoid disparities between municipalities.
- Flexible and case-sensitive legislation: While protection of victims must remain paramount, legislation should allow for more nuanced distinctions between different types of close relationships. For example, sibling or youth-related conflicts may be more constructively addressed through mediation than through criminal proceedings.

- Integration with support services: Mediation should function as a structured referral pathway to counselling, therapy, and NGO-based programs. Ensuring this linkage would strengthen the support system around both victims and offenders.
- Strengthening restorative alternatives alongside the justice system: Mediation should be viewed not as a substitute for, but as a complement to, the formal criminal process. This parallel approach allows for both accountability and constructive solutions, while safeguarding victims' rights.
- Raising awareness: More information on mediation and restorative justice should be made available to victims, offenders, and professionals, so that all parties are aware of the opportunities, safeguards, and limitations of the system.

3.8. Peer support

Peer support in is recognized as a valuable form of support for victims, yet the responses highlight that its implementation is uneven. More than two-thirds of the CNA survey respondents considered peer support services to be insufficient. Services tend to concentrate in larger urban areas and in Southern Finland, leaving rural areas, smaller municipalities, and the northern regions with significantly fewer opportunities. While online groups have partially bridged this gap, they are not a universal solution, since digital literacy and access remain barriers for some victims, particularly older populations or those in vulnerable circumstances.

In many urban areas, particularly in Southern Finland, peer support services are relatively well-developed, while in northern and rural areas the opportunities are far fewer. Online peer support groups have been introduced and expanded in recent years, especially during the COVID-19 pandemic, allowing victims from more remote regions to participate. However, not all victims can benefit from online services due to digital literacy challenges, lack of equipment, or personal preference for face-to-face support.

Funding emerges as the most critical structural issue. Because peer support is largely provided by NGOs, services are heavily dependent on unstable project-based funding, which undermines continuity and the ability to develop new forms of support. Budget cuts to NGOs directly reduce the number and variety of groups available, weakening long-term support structures. This dependency on NGOs without sustainable state-level resourcing creates a vulnerability in the system.

Another challenge is coordination and visibility. Victims and even professionals such as social workers often lack clear information on what services exist and how to access them. This fragmented system risks excluding many potential participants simply due to lack of awareness. Coordination across organizations, municipalities, and service providers would not only increase visibility but also reduce overlaps and create more coherent pathways to peer support.

Quality and professionalism are also significant concerns. The shortage of professionally guided groups creates risks, as unsupervised peer groups may unintentionally harm rather than support victims. Responses strongly emphasize the importance of ensuring professional facilitation, establishing quality standards, and providing adequate training for peer facilitators and experience experts. Without such measures, peer support may remain uneven in quality and potentially unsafe for vulnerable participants.

Stigma and social barriers further complicate the picture. In small communities, fear of being recognized discourages participation, making face-to-face groups difficult to establish. Online groups can mitigate this, but they cannot replace the need for safe, accessible, in-person options.

To ensure equal and safe access to peer support, development efforts should focus on broadening access across regions and victim groups, strengthening coordination and communication, ensuring stable funding and professional facilitation**.** Peer support must be embedded more firmly within

victim support structures rather than remaining primarily an NGO responsibility vulnerable to political and financial fluctuations.

Areas for improvement

- Services should be expanded and diversified (different groups, online + face-to-face, nationwide).
- Funding and resources must be secured (stable NGO support, facilitator training).
- Coordination and communication should be improved (clearer system, better outreach).
- Quality and safety must be ensured (professional facilitation, standards, accountability).

3.1. Victim Groups Lacking Adequate Support Services

This study identified several victim groups whose needs are not adequately met by the current service system. The findings indicate that victim support services in Finland are unevenly available and often fail to meet the needs of the most vulnerable groups. For vulnerable groups, the problem is not only the lack of services, but also that existing services fail to reach them. Belonging to certain groups increases vulnerability to victimisation and impedes access to assistance.

Particularly vulnerable groups include migrant women, people with substance abuse or mental health issues, children, persons with disabilities, Roma, undocumented migrants and victims of human trafficking, LGBTQ+ minorities, elderly people and victims of honour-related violence. These groups face overlapping barriers such as discrimination, stigma, language obstacles, lack of accessibility, regional disparities, and insufficient psychosocial or trauma-sensitive support.

Children and young people often lack direct support, as assistance is mainly offered to parents. Disabled victims and the elderly struggle with accessibility, long distances, and insufficient psychosocial support. Migrants, Roma, and undocumented victims encounter additional barriers due to cultural gaps, language, and legal risks. Migrants and language minorities need culturally sensitive and multilingual support. LGBTIQA+ people, young people, older people and those with substance-abuse problems also require tailored services.

Support services for elderly victims, particularly those experiencing domestic violence, are described as fragmented and short-term in nature. While occasional projects or initiatives exist—especially in metropolitan areas—sustainable and long-term services remain rare. For professionals, this lack of established structures makes it difficult to build consistent and reliable collaboration, leaving many older victims without adequate support. The result is a service environment where vulnerable elderly victims often face significant risks without the reassurance of continuous assistance.

Victims with disabilities are identified as a group that is especially underserved. Victim support professionals emphasized that these individuals are often left almost entirely without tailored support. The challenge arises partly because recognizing victimisation can be complex; some victims with disabilities may not perceive when they are being exploited or taken advantage of. This creates a situation where neither the victim nor the service system fully addresses the harm. Practitioners acknowledge that the lack of resources is not due to indifference but rather to systemic difficulties in providing adequate, specialized support. Consequently, this group remains among the most marginalized within victim services.

School bullying victims and their families frequently fall through the cracks of the support system. The field is characterized as inconsistent and fragmented—whether a child receives help depends largely on chance. Some children endure bullying throughout their school career without lasting intervention. For victim support workers, these cases generate profound powerlessness: unlike with many other victim groups, there are almost no tools or structured solutions available. Support efforts are often limited to helping the child and their family cope day by day, both physically and emotionally. Parents commonly approach services in desperation, and even referrals from schools or

police rarely lead to sufficient assistance. The scarcity of long-term, coordinated support leaves many children and families without the help they urgently need.

Male victims represent a clear blind spot. Although men are increasingly affected by property crimes, fraud, IPV and sexual violence, existing services are largely designed for women. Men often perceive help-seeking as weakness, fear stigma, and are not reached by current communication. This highlights the need for male-sensitive services, outreach, dedicated male victim channels, and awareness campaigns that normalize help-seeking.

Key development needs include adapting services to individual needs, strengthening gender-sensitive approaches, increasing cultural sensitivity, ensuring accessible facilities, and improving the availability of interpretation services. A more comprehensive approach is required, one that also considers mental health, disability, and the position of children. In addition, targeted communication and new service channels are needed to lower the threshold for seeking help and to ensure that all victim groups are reached.

Unmet Needs: Hate Crime Victims and the Limits of Support Systems

The study *Mapping of the Needs of Hate Crime Victims* (Senta et al., 2024) offers an in-depth examination of how victims of hate crimes experience support services and what gaps remain in practice. The Finnish case study illustrates both the extent of the problem and the limitations of current responses.

Findings of this study indicate that hate crime is far more common than police statistics suggest. For example, the 2020 National Self-Report Delinquency Study found that 6% of Finnish youth had been victims of hate crimes within a single year, with common motives tied to ethnicity, religion, sexual orientation, gender, or language. EU-wide studies indicate even more severe patterns: 14% of people of African descent in Finland reported experiencing racist physical violence in the last five years, and more than half reported racist harassment. Other vulnerable groups include Roma, Sámi, migrants, persons with disabilities, and LGBTIQA+ youth.

Despite such prevalence, under-reporting remains a defining challenge. Victims often do not recognise incidents as hate crimes, or they mistrust that the police will respond appropriately. Children's experiences, in particular, are frequently dismissed as mere "bullying." Existing support services are fragmented and general, with limited referrals. Health and social services are in principle accessible, but language and cultural barriers often prevent victims from using them effectively. Civil society organisations (CSOs) contribute important support, but with limited resources and insufficient formal integration into official systems.

Interviews with professionals reveal recurring obstacles: uncertainty about the legal definition of hate crime, lack of knowledge among authorities, limited awareness among victims, and weak referral pathways. Many victims therefore remain invisible, their needs unmet.

In sum, the report underscores that while Finland has a functioning victim support system, it does not adequately address the specific and compounded harms of hate-motivated crime. Victims often fall through the cracks, facing both the trauma of the offence itself and barriers to seeking justice and care. The report recommends systematic training for authorities, clearer communication of victims' rights, stronger cooperation with civil society, multilingual service provision, and in the longer term, specialised services for hate crime victims.

Support needs of vulnerable victims and the role of NGOs – views of Finnish justice authorities and expert bodies

In autumn 2024, the Finnish Ministry of Justice invited statements to inform the work of the funding working group for the Victim Policy Action Programme (VN/24181/2023-OM-39). The request focused on the role and significance of NGO-provided victim support services for the smooth

functioning of the criminal process and the realization of criminal liability. Respondents were also asked to assess the role of these services in relation to vulnerable victim groups. Statements were submitted by the following authorities and expert bodies: HEUNI (European Institute for Crime Prevention and Control, affiliated with the United Nations), the Ombudsman for Children, the National Police Board, the Prosecution Service, the Court Administration, and the Equality Ombudsman.[3]

Across these statements, respondents emphasized that the role of NGOs is particularly important for victims in vulnerable positions. Groups most frequently mentioned included children (very young children, boys as victims of sexual violence, children with disabilities, migrant children, and children in child protection), victims of domestic and sexual violence (including honour-based violence and forced marriage), victims of human trafficking and labour exploitation, persons with disabilities and the elderly, and migrants, undocumented persons, minorities such as Roma, as well as socially marginalized women with substance use problems or criminal backgrounds.

The factors contributing to vulnerability were described as varied and overlapping. They include power imbalances between offender and victim; feelings of shame, guilt, and fear; cultural and linguistic barriers; lack of knowledge of the criminal justice process; illiteracy and limited access to information; traumatic experiences; and distrust of authorities. For children, vulnerability is further linked to their dependency on adults and their stage of development.

The statements also highlighted that NGOs play an essential role in supporting these groups. NGOs reach victims who would otherwise remain outside official services, and they provide low-threshold, free, and confidential support. They deliver psychosocial and practical assistance, act as support persons during criminal proceedings, help victims understand the different stages of the process, and support them in reporting crimes and coping throughout often lengthy proceedings. NGOs also carry out outreach work, reveal hidden forms of victimization, and develop new forms of support that complement official services.

Despite this essential role, the statements pointed to several challenges. Fragmentation and overlap of services make it difficult for victims to find the right support and may create blind spots in service provision. Regional disparities mean that victims in smaller towns and rural areas often have less access to adequate services. Insecure and short-term funding threatens continuity, staff retention, and expertise. Respondents also noted that if NGO resources diminish, essential support tasks risk shifting to police, prosecutors, or courts, even though these authorities lack both the mandate and the capacity to provide comprehensive psychosocial support. This could slow down criminal proceedings and weaken the realization of victims' rights.

The statements demonstrate broad agreement among authorities and expert bodies that NGO-provided victim support services are indispensable for ensuring victims' rights and for the effective functioning of the criminal justice system. This role is particularly significant for victims in vulnerable positions, whose participation in criminal proceedings often depends on the support and accompaniment provided by NGOs.

Key observations

[3] Finnish Ministry of Justice. (2024). Statements submitted in response to the request to inform the work of the funding working group for the Victim Policy Action Programme (VN/24181/2023-OM-39). Helsinki: Ministry of Justice.

- Vulnerability arises from multiple, overlapping factors including trauma, fear, shame, cultural and linguistic barriers, lack of knowledge of the justice system, dependency, and distrust of authorities.
- Victims in these situations are often unable to participate in criminal proceedings without targeted support. NGOs bridge this gap by providing trust-building, culturally sensitive, and trauma-informed services.
- NGO services complement, but also extend beyond, what authorities are able to provide, particularly in terms of psychosocial support, outreach to hidden groups, and practical assistance for vulnerable victims.
- Weaknesses in the current system include fragmentation of services, uneven regional availability, and insecure, short-term funding. These undermine equal access to services and continuity of provision.
- If NGO resources decrease, essential support tasks risk shifting to police, prosecutors, or courts, who lack both the mandate and the capacity to provide them. This could prolong proceedings and weaken the realization of victims' rights.

Recommendations

- Stable and long-term funding frameworks are needed to ensure continuity of services and retention of professional expertise.
- Stronger coordination among service providers helps to reduce fragmentation and to improve referral pathways for victims.
- Equal nationwide access is best promoted through a combination of local, mobile, and digital service models.
- Recognition of NGOs as essential partners in the justice system reinforces their role in safeguarding victims' rights.
- The development of specialized expertise, including child-sensitive, gender-sensitive, culturally competent, and disability-inclusive approaches, enhances the quality of support available.
- Expanded outreach activities are important for identifying hidden or hard-to-reach groups, such as undocumented persons and marginalized women.
- Integration of NGO perspectives into policy development and justice system reforms ensures that field-level experience and innovative practices inform decision-making.

Strengthening Structural Responses to Intimate Partner Violence: Towards Comprehensive Prevention and Victim Support in Finland

Intimate partner violence (IPV) continues to be a pressing public health and social issue in Finland. The structures, coordination mechanisms, and services for preventing such violence differ markedly between the wellbeing services counties, leaving individuals with unequal access to support depending on where they live. Despite existing national guidelines, prevention and support efforts remain fragmented. Niklander and Krogell (2024) stress that addressing these disparities requires permanent coordination, robust cross-sectoral collaboration, and legislation to ensure equal services and long-term sustainability in IPV prevention and victim support. They emphasize that each wellbeing services county should establish a dedicated IPV coordinator to guarantee systematic and sustainable action. Prevention cannot rely solely on social and healthcare services; it must also involve the education sector, youth services, legal services, and NGOs with extensive expertise in preventive work and specialized interventions. Professionals in victim support services, in particular, hold valuable knowledge that should be systematically integrated into service development.

Ensuring equitable access to services for all parties involved—victims, perpetrators, and those exposed to violence—is crucial. Special consideration must be given to vulnerable populations, including older adults, persons with disabilities, and linguistic minorities. Presently, service chains remain fragmented in many areas, with post-shelter support often lacking. A significant challenge lies

in the professional capacity of frontline workers. IPV frequently remains undisclosed unless practitioners explicitly inquire about it. Thus, comprehensive and systematic training in the recognition of violence, risk assessment, and safe disclosure practices is essential, including with respect to specific forms of violence such as honour-based violence and female genital mutilation.

The report's key conclusion is that voluntary recommendations are insufficient. Legislative action is required to establish clear responsibilities, coordination mechanisms, and structural guarantees for municipalities and wellbeing services counties. Only through such legal frameworks can prevention efforts be implemented equitably nationwide.

3.2. Results of the three main objectives

3.3.1 Individual Needs Assessment

According to the findings from stakeholder consultation, the individual needs assessments (INA) are primarily carried out social and health care professionals and victim support workers. Volunteers also conduct assessments especially in first-line support but usually refer the client to a professional if necessary. Sometimes they work together with professionals as pairs. Police and social services conduct assessments when mandatory reporting triggers for example child protection involvement.

The INA is mostly carried out through conversations with the client as part of service needs assessments, usually starting at the first point of contact. Several organizations use structured methods and tools to support the assessment, such as MARAC (multi-agency risk assessment), RIKU's support plan model, and statutory service needs assessments under the Social Welfare Act. Wellbeing services counties use risk assessment forms developed by the Finnish Institute for Health and Welfare (THL) which help to identify, for example, victims' trauma symptoms, financial situation, and children's wellbeing, as well as to guide victims to services that correspond to their support needs. However, in many cases assessments rely heavily on the individual worker's expertise and available resources.

In some cases, the assessment is a single discussion, while in others it develops into a longer-term process with follow-up. Assessments are often repeated during the client relationship at checkpoints or when situations change. However, the frequency varies significantly depending on resources and the duration of client relationships. Clients are usually referred onwards through service guidance, if the organization itself cannot meet all needs.

Transparency towards the victim about what may be shared is considered essential, and consent is always requested if information is to be shared with others, for example for service referral. Exceptions apply to legal obligations, such as child protection reporting and cases of immediate threats to life or health. MARAC working groups were highlighted as a key context where assessment results are shared – always requiring written consent from the victim. In some cases, results may also be shared with interpreters or other support persons if needed for the client's assistance.

Barnahus model: Assessment of Children's Support Needs

The Barnahus model is a child-friendly and multidisciplinary approach. Its purpose is to investigate suspicions of violence, abuse, or neglect against children while ensuring that the child receives early protection and support. In Finland, the model is coordinated by the Finnish Institute for Health and Welfare (THL) and implemented through five university hospital units specializing in forensic psychology and psychiatry (THL, 2025).

The Barnahus model is a child-centered and multidisciplinary approach where legal investigation and support needs assessment go hand in hand. Its key strength lies in gathering services under one roof, allowing the child to receive protection, care, and long-term support in an integrated and

coordinated way. It emphasizes ongoing assessment and continuity of support. The child's situation is regularly monitored so that interventions can be adapted to changing needs. This ensures that legal proceedings, child protection measures, and therapeutic services progress in parallel, always guided by the child's best interests (Hannonen, 2023).

The assessment of children's needs is carried out through multidisciplinary cooperation among the police, prosecutors, child protection services, health care professionals, and forensic experts.

- Child-friendly hearings: Investigative interviews are conducted by specially trained professionals in safe, adapted environments.
- Health care assessment: University hospital units are responsible for medical examinations as well as psychological and psychiatric evaluations. This ensures that both physical and mental health needs are assessed comprehensively.
- Psychosocial support assessment: The child's family relations, daily safety, schooling, mood, and potential trauma symptoms are evaluated. The child and family are referred without delay to appropriate support services such as crisis intervention, therapy, or family support.
- Protection and safety measures: Child protection authorities assess whether immediate safeguarding actions are necessary, including emergency placement or intensified family support.

Challenges and areas for improvement

The challenges related to the INA arise from a combination of personal, structural, and systemic factors that hinder accurate identification and timely response to those needs. The main challenges identified are the lack of uniformity across organizations, limited resources and capacity, and dependence on individual workers' expertise rather than standardized procedures.

Victims may find it difficult to recognize or articulate their own needs, especially in the immediate aftermath of trauma. The effects of victimization can decrease the victim's ability to identify and communicate their support needs, making it challenging for professionals to gather essential information. Even when support is offered, some victims may be hesitant or unwilling to accept help due to fear, stigma, or negative experiences in the past.

The structural barriers include a lack of clear operational guidelines, inconsistent assessment practices, and insufficient access to services—particularly for marginalized populations, such as those struggling with substance use issues. In cases involving domestic violence, the assessment should be multi-professional – involving social work, health care, police, and NGOs – and it should begin as soon as the victim makes contact. At present, however, assessment is inconsistent and depends on individual workers, which means that many victims are left without comprehensive support. Additionally, professionals often manage high caseloads with limited time and resources, which reduces their ability to conduct comprehensive assessments or provide effective follow-ups. Furthermore, gaps in competence and limited awareness of available support services further weaken the system's ability to respond adequately.

Most respondents considered that the individual needs assessment should be further developed. They emphasized the importance of establishing clearer guidelines and systematic tools, strengthening expertise among professionals and volunteers, and enhancing multi-professional cooperation across social services, health care, police, and NGOs. They also highlighted the need for adequate resources, accessible services, and practical support in guiding victims to services, for example through one-stop service points. Special attention should be given to the child perspective and male-specific crisis expertise. Expertise must also be enhanced in the early identification of intimate partner violence and stalking. Without proper knowledge, assessments risk remaining superficial and early warning signs may be overlooked. Victim support workers also underlined the need for a nationally consistent operational model, ideally based on a clear theoretical framework such as a trauma-informed approach, to provide a shared foundation for practice.

Table: Individual needs assessment: key challenges

Challenge	Examples
Victims' Limited Awareness or Understanding of Their Own Needs	In the acute phase of trauma, victims may struggle to recognize or articulate their support needs. The impact of violence can impair an individual's ability to evaluate their own situation realistically. Support needs often evolve over time and may only become evident after a significant delay.
Communication Barriers	Victims may be unwilling, unable, or unsure how to talk about their experiences. Important information may be left unsaid, either intentionally or due to trauma-related issues: Staff may miss subtle cues or signals if the victim cannot clearly express themselves, leading to unrecognized need for further support.
Reluctance to Accept Help	Some clients may resist support or be ambivalent about making changes, even when assistance is available. This reluctance can stem from fear, shame, distrust, or previous negative experiences with support services.
Structural and Systemic Limitations	Lack of clear guidelines, processes, or standardized tools for assessing needs can hinder effective support. Without a consistent operating model, responses may vary greatly between professionals or services. Lack of continuity and follow-up (changing needs, weak monitoring, poor information flow)
Limited Availability and Accessibility of Services	Gaps in service provision can force professionals to "sell the no" – informing clients that the help they need is unavailable. Certain groups, such as individuals with substance use disorders, often face additional barriers to accessing adequate support.
Resource Constraints	Professionals may lack the time or capacity to conduct thorough, holistic assessments due to high caseloads. Limited staff and time resources reduce opportunities for consistent follow-up and monitoring of changing needs.
Insufficient Knowledge and Competence	Some professionals may lack the training or experience required to accurately assess support needs in complex cases. A lack of awareness about available support services further limits the ability to offer appropriate referrals or guidance.

Table: Individual needs assessment: key development areas

Theme	**Development needs**

Adequate resources	- Adequate time and resources for thorough assessments
Guidelines, tools and models	- Clearer guidelines, systematic assessment tools - Establishing consistent assessment frameworks (e.g., trauma-informed approach)
Strengthening expertise	- More training for professionals and volunteers - Stronger focus on child perspective and male-specific crisis support - Enhanced expertise in the early identification of intimate partner violence
Multi-professional cooperation	- Closer collaboration between social services, health care, police, and NGOs - Improved coordination and information sharing between sectors
Accessibility and continuity of services	- Active support in guiding victims to services (service accompaniment) - One-stop service points

Individual assessment to identify specific protection needs

Pursuant to the Criminal Investigation Act[4], the investigating authority is required to assess the victim's special protection needs during the pre-trial investigation. The criminal investigation authority is primarily responsible for this assessment and, where the victim's circumstances or the nature of the offence so necessitate, must also consult the prosecutor regarding the need for protection or specific protective measures. In particular, special consideration is given to vulnerable categories of victims. The assessment is conducted by the investigating officer, usually at the first interview, following the two-step procedure outlined in the handbook issued by the Ministry of the Interior[5]:

1. Screening (during the first interview/interrogation): Determining whether the victim has specific protection needs, based on personal circumstances (for example, victims under 18 automatically qualify) and the nature of the offence.

2. If needs are found, decide which procedural or safety measures will protect the victim from secondary or repeat victimisation, intimidation or retaliation (e.g. same-gender interviewer, use of separate facilities, video-recorded statement, screen in court, closed court).

The whole process is recorded on a standard form which goes to the unit's head investigator, who considers operational measures, and to the prosecutor, who records any proposed measures on an information sheet that travels with the summons file to the court (the court is not bound by them

[4] Act No. 805/2011, Chapter 11, Section 9a

[5] Ministry of the Interior. (n.d.). *Handbook for the assessment of a victim's protection needs during criminal investigation* (only in Finnish). Ministry of the Interior. https://julkaisut.valtioneuvosto.fi/bitstream/handle/10024/75016/Kasikirja_lopullinen.pdf

but must take them into account). In high-risk cases the police may also alert the victim support service.

1. Inside the police – the completed form is sent to the head investigator, who decides which measures can be implemented immediately.
2. Prosecutor – receives the form; records her/his own recommendation on an info-sheet that travels with the case file.
3. Court – the prosecutor files the info-sheet together with the indictment/summons. The court is not bound by the recommendations but must take them into account on a case-by-case basis.
4. Victim (and, informally, support services) – the assessment is done "in cooperation with the victim"; in some trafficking or high-risk DV cases police may inform a support worker when threats escalate, although this is not yet codified.

The assessment may be revised later if the victim's circumstances change. Courts are also obliged to revisit protection needs during proceedings, following a 2022 Supreme Court ruling. However, implementation remains inconsistent (Liimatainen & Rantaeskola, 2022).

Areas for improvement

- Although the assessment is included in basic police training, not all officers are aware of this obligation. Supervisors are therefore responsible for ensuring that all investigators are familiar with both the procedure and the duty to assess victims' special protection needs.
- Clearer guidance: Police officers need clearer and more practical instructions on when and how to conduct individual protection needs assessments.
- Training and supervision: Regular and mandatory training, as well as stronger supervisory practices, are required to ensure consistent implementation across units.
- Consistency across regions: Practices vary significantly between police departments, which creates unequal protection for victims.
- Facilities and resources: Availability of safe interview rooms, same-gender interviewers, and separate waiting areas in courts should be improved nationwide.

Individual Protection Needs Assessment (Criminal Investigation Act 805/2011)

Aspect	**Description**
Main responsibility	Investigating police officers during the pre-trial investigation
Method/tools	- Standard form and handbook (two-step test: screening + protective measures) - For severe IPV cases the police must also complete a dedicated MARAC risk-assessment form.
Training	Part of basic training; refresher training recommended but implementation uneven
Protective measures	Procedural arrangements (same-gender interviewer, video testimony, screen, separate waiting areas)
Re-evaluation	Possible during investigation or trial, but not consistently applied
Information sharing	Results passed to prosecutor and court; limited coordination with support services

Aspect	Description
Key challenges	Lack of awareness, implementation varies across police units and between police officers; not always systematic, insufficient monitoring, limited facilities
Recommended improvements	Stronger training, clearer guidance, consistent monitoring, better facilities

Key observations

- Uneven implementation & limited awareness
- Training & supervision – although the assessment is in basic police training, not all police officers are aware of this obligation; supervisors must ensure compliance.
- Human-trafficking cases – practitioners note the need for earlier and clearer protection triggers (e.g., automatic notification to support services when the suspect is questioned) – currently no formal guideline covers this.
- Data & monitoring – no central database tracks how often assessments are performed or which measures are ordered, making quality assurance difficult (implied across practitioner feedback).

Areas for improvements

- Mandatory refresher modules for all investigators, prosecutors and judges, with on-the-job drills using the handbook and MARAC.
- National minimum standards for interview rooms, separate waiting areas and video-link equipment.
- Digital case-management field that forces the investigating officer to tick either “assessment attached” or “not required (reason)” before a file can progress.
- Formalised early-warning protocol for high-risk trafficking and IPV victims, allowing police to alert support services when the suspect learns of the investigation.

MARAC groups

In Finland, authorities are obliged to assess the risk of severe intimate partner violence (IPV) and the risk of death when a client reports violence. The assessment method used is MARAC (Multi-Agency Risk Assessment Conference), a victim-oriented, multi-professional model developed in the UK. In MARAC meetings, a safety plan is drawn up for the client and an action plan for the authorities.

The assessment of protection needs for victims of intimate partner violence (IPV) is closely linked to the MARAC (Multi-Agency Risk Assessment Conference) process, in which the highest-risk cases are addressed in multi-professional meetings. Coordinated nationally by the Finnish Institute for Health and Welfare, MARAC is a structured method designed to protect victims of serious IPV. It is based on multi-agency collaboration, where professionals from different sectors jointly assess the victim’s risk level and coordinate protective measures.

According to the handbook published by the National Police Board[6], all police officers participating in criminal investigations must be familiar with the principles and procedures of the MARAC tool. The handbook also contains a chapter on the individual assessment of victims in IPV cases. If during the

[6] Liimatainen M., Rantaeskola S. (2022). Toiminnallinen käsikirja lähisuhdeväkivaltaan puuttumiseksi ja ennalta estämiseksi. Publication of the National Police Board, Helsinki.

pre-trial investigation, it appears that a victim may be at risk of severe violence, the MARAC risk assessment must be conducted with the victim's consent using a MARAC form. The handbook also contains a chapter on the individual assessment of victims in IPV cases.

The MARAC process is based on a structured form with 24 risk indicators (e.g., threats with weapons, strangulation, repeated police call-outs, stalking), supplemented by professional judgement. The process begins with a standardized risk assessment, typically completed police officers, social workers, or healthcare professionals. If the risk threshold is met, the case is referred to a MARAC team. These teams include representatives from the police, social and health services, shelters, and NGOs. The goal is to create a tailored safety plan for the victim and ensure coordinated support. Cases are monitored for several months or until safety measures are effective. Information is shared within the multi-agency meeting on the basis of the victim's consent; minutes/action items are distributed securely to responsible agencies; the safety plan is communicated back to the victim/support person.

According to the survey conducted by the Finnish Institute for Health and Welfare in spring 2024 (Heimonen & Niklander, 2024), the most important actors in MARAC groups are the police, Victim Support Finland, child welfare, and shelters. Strengths of the method include multi-professional cooperation, a clear structure, regular meetings, and concrete recommendations. MARAC was seen as an effective way to improve victims' safety, facilitate information exchange, and reduce overlapping work.

Key observations

- MARAC play an essential role in protecting victims of serious IPV in Finland.
- MARAC improves victim safety and inter-agency cooperation
- Victims are more likely to access support services.
- Remote meetings have helped expand MARAC in sparsely populated areas.
- Feedback from the interviews underlined MARAC's value in reducing recurrence of violence and in bringing together a comprehensive support network around victims.
- Finnish Institute for Health and Welfare (THL) has developed MARAC activities in 2023–2024 by strengthening national coordination, expanding the method to new areas and producing training materials.
- Expanding the use of the MARAC tool and other risk assessment methods and their evaluation will be continued and supported through measures included in the Action Plan for the Istanbul Convention.[7]

Regional Comparison of MARAC Implementation

According to the Finnish Institute for Health and Welfare (THL), as of 2024, MARAK teams operated in 22 wellbeing services counties, but practices, resources, and impact varied significantly.

Table: Regional comparison (THL, 2024)

[7] Committee for combating violence against women and domestic violence (NAPE). (2022, June 17). Action Plan for the Istanbul Convention for 2022–2025. Publications of the Ministry of Social Affairs and Health 2022:10.

Region	Status of Implementation	Challenges	Good Practices
Southwest Finland	Established	Information sharing barriers	Regular meetings, active shelter involvement
Uusimaa	Partially implemented	Limited case referrals	Strong police-social services cooperation
Pirkanmaa	Established but under pressure	Lack of training	Close collaboration between police and shelter
North Savo	Emerging	Irregular meeting frequency	Training initiatives underway
Lapland	Partial coverage	Long distances, limited resources	Remote meetings enable participation
South Karelia	Established	Data exchange limitations	Pilot of shared information system
Central Finland	Expanding	Inconsistent referrals	Broad use of risk assessment form

Key challenges

By 2024, Finland had 39 MARAC groups operating across Finland. However, MARAC coverage remains uneven, creating blind spots where victim protection decisions remain unmade. For example, GREVIO (2024) has expressed concern that the MARAC model is not applied in Helsinki.[8] Referral practices are uneven, with most referrals coming from shelters and social services, while police and health care referrals remain insufficient (Heimonen & Niklander, 2024; Finnish Government, 2023). In some regions, only a small fraction of high-risk cases is referred to MARAC despite regular risk assessments. Persistent challenges include lack of training, barriers to data sharing, the absence of a statutory basis, insecure funding, and limited professional awareness of risk assessment obligations.

In their recent decision, the Deputy Chancellor of Justice (DCJ) identified serious failures in police risk assessment and victim protection in a domestic violence case. The case involved a woman who had reported repeated threats, stalking, and restraining order violations before being murdered by her ex-partner. The DCJ found that police did not conduct a comprehensive risk assessment or implement protective measures, despite clear warning signs. The decision further highlighted that Finnish law contains no explicit provisions on risk assessment procedures, and that personnel at the said police department's investigation unit had received no training on the National Police Board's guidelines. Moreover, these guidelines leave unclear how an individual investigating officer should

[8] Council of Europe (2024). Group of Experts on Action against Violence against Women and Domestic Violence (GREVIO). Finland – First thematic evaluation report. Council of Europe. https://rm.coe.int/first-thematic-evaluation-report-finland/1680b2ab48 https://coe.int/en/web/istanbul-convention/grevio

conduct a risk assessment, when the MARAC model must be applied, and how officers should proceed in areas where MARAC is not in use. Referring to Finland's obligations under the Istanbul Convention and the EU Victims' Rights Directive, the ruling stressed the need for systematic, documented risk assessments and coordinated protective actions. The Ministries of Justice, Interior, and Social Affairs and Health were instructed to report by 31 December 2025 on measures to strengthen victim protection.[9]

The recommendations to address identified shortcomings underline the importance of making MARAC a nationwide, legally binding, and well-resourced mechanism. Strengthening training, improving data sharing, and ensuring regular monitoring would increase consistency, reliability, and victim safety across Finland.

Areas for improvement

- MARAC should be adopted uniformly across all regions.
- Systematic and recurring training is required to ensure consistent application of MARAC.
- Clearer procedures are needed on how different actors are invited to participate and how information is shared.
- Legal and technical measures should be introduced to support secure and efficient exchange of information.
- The impact and effectiveness of MARAC should be regularly assessed to guide improvements.
- MARAC should be established in law to guarantee its systematic implementation.

Table: MARAC: Multi-Agency Risk Assessment Conference

Aspect	**Description**
Main responsibility	Multi-agency working groups (police, social services, health care, shelters, NGOs)
Method/tools	24-item MARAC risk assessment form; thresholds for high-risk cases; safety and action plan
Training	THL provides training and e-learning; awareness and coverage uneven across sectors
Protective measures	Safety planning (shelter placement, restraining orders, financial/legal support, peer support)
Re-evaluation	Risks monitored continuously; follow-up MARAC meetings until safety is secured
Information sharing	Shared across agencies in MARAC meeting with victim's consent; agencies implement their part

[9] Office of the Chancellor of Justice of Finland. (2025, March 6). *Police procedures in violence risk assessment and victim protection (OKV/1905/10/2022)*. https://oikeuskansleri.fi/-/vakivallan-riskinarviointi-ja-uhrin-suojelu

Key challenges	Uneven training, lack of legal obligation, incomplete nationwide coverage, resource constraints
Recommended improvements	MARAC should be made legally binding, expand nationwide, harmonise practices, strengthen training, improve data sharing

Child Protection Assessments

When violence against a child is suspected, under the Child Welfare Act, child welfare services are responsible for assessing the child's need for protection. This requires meeting the child in an age-appropriate way and ensuring their safety, often in cooperation with the police and healthcare. The child's best interests are secured through a shared plan between authorities.

In assessing the need for protection:

- Violence is discussed with the child only as much as necessary to avoid interfering with police investigations.
- Interviews should use open-ended, non-leading questions to ensure reliable information.

Assessments must also consider overlapping forms of violence, such as witnessing parental violence, which is itself a form of child abuse. If circumstances appear unsafe, child welfare services remain engaged long-term to ensure safety and end violence. The police support this by sharing relevant information with social services (as required by the Act on the Status and Rights of Social Welfare Clients) and by filing child welfare notifications when minors are present in violent households (Child Welfare Act).

A child welfare client relationship begins after the service needs assessment if it shows that the child's growth conditions or behaviour jeopardise health or development, or the child needs services and support measures as per the Child Welfare Act. In suspected cases of violence against children, police and forensic psychology or psychiatry units are typically involved only briefly. If the child's circumstances are deemed unsafe, child welfare social services take primary responsibility for providing long-term support, ensuring safe conditions, and working to end all forms of violence. Within child welfare, the child's safety should be assessed on an ongoing basis.

LASTA-Model

The LASTA (Lapsen Etua Turvaamassa — Protecting the Child's Interest) model, developed by Finnish Institute for Health and Welfare, is a multi-agency cooperation and information-sharing framework used when child abuse or sexual assault is suspected. Its purpose is to ensure the child's safety and wellbeing while streamlining the investigative and protective processes.

Key actors

- Police: conduct investigation and initiate the process
- Child welfare services (welfare region family services): hold overall responsibility for assessing the child's situation and supporting the family
- Healthcare: examine the child's physical and mental health; forensic psychiatry or psychology units may assist investigations and support welfare services
- LASTA coordinator: typically a specialist from secondary healthcare, collects the necessary data and coordinates follow-up

Process and workflow

1. Data collection: police issue a consultation request when abuse is suspected; the LASTA coordinator gathers data from healthcare records and contacts social welfare to obtain relevant background information

2. Multidisciplinary LASTA meeting: authorities convene to review the compiled data and jointly assess the child's needs; the aim is to determine the most appropriate, child-centered investigative and support approach

Benefits

- Enhances coordinated action among police, child welfare, healthcare, and other services, leading to more efficient response and safeguarding of the child's best interest
- Supports comprehensive data collection that avoids duplicate assessments
- Facilitates referral to Barnahus units when needed

Challenges and limitations

- The model is not yet underpinned by legislation; depends on voluntary adoption, leading to regional inconsistencies
- Access to confidential information (e.g., medical, social records) is limited by existing legal frameworks; coordination meetings rely on informal arrangements
- Resource constraints: successful models depend on dedicated coordinators and local commitment, which may not be sustainable without formal structures
- Variation in practice: implementation differs between regions, with pilot projects operating under varying institutional arrangements and funding

Areas for improvement

- Legal foundation: incorporate the LASTA model into legislation to ensure consistency, procedural clarity, and formal information-sharing capabilities
- Formal coordination roles: establish dedicated LASTA coordinators with sustainable funding across regions
- Training and awareness: increase professional familiarity with the model among police, welfare, healthcare, and judiciary
- National support and monitoring: implement systematic evaluation, standard data practices, and guidance to transition from pilots into widespread, sustainable operations

3.3.2 Referral

The findings of the stakeholder consultations indicated that referral of crime victims to support services in Finland is uneven, fragmented, and highly dependent on individual employees, organizations, and regions. While most organizations do refer victims, the process is not systematic, and practices vary widely across the country.

Police officers are generally aware of Victim Support Finland (RIKU) and often make referrals there, but the level of activity differs between police departments and even individual officers. In some areas, shelters, SERI centres, and social and health services also play an important role, yet regional disparities in service availability create unequal access. Positive developments have been noted where dedicated roles exist, such as domestic violence police officers or violence prevention coordinators, and where guided handover practices are used to connect victims directly with services.

The main actors referring victims include police and shelters. Common service providers are RIKU, police, shelters, social and health services, SERI centres, crisis centres, legal aid, and specialised NGOs.

Most survey respondents (91%) confirmed that their organization refers victims to support services, and a clear majority (86%) said their organization provides victims with information about their rights, the criminal process, and available services. Referrals are typically made by giving contact

information, contacting services together with the client, or through guided handovers with the victim's consent. However, guided handovers are not yet standardised nationwide, and some organizations lack formal referral models.

Despite these practices, major challenges remain. Referral processes are inconsistent and insufficient, leading to unequal access to support. Their quality depends heavily on individual employees, organizations, and regions. Authorities' knowledge of services is often limited, and organizational memory is weak, which fragments practices further. Awareness of services remains low among both professionals and the public.

Regional disparities in service availability exacerbate inequality. Victims are often only given information and left to contact services themselves, even though many lack the strength to do so independently due to trauma. Guided handovers are frequently missing, and NGOs often lack resources for active accompaniment. Fragmented services, long waiting times, lack of coordination, and inconsistent practices between police, social services, and healthcare add to the difficulties. In some cases, clients are also unwilling or unable to commit to services.

A clear majority of survey respondents (83%) saw a need to improve referral practices, and all agreed that victim information practices must be strengthened — views also shared by interviewees. To improve referral practices, standardized procedures should be introduced across organizations and regions to ensure equal treatment of victims. Authorities need continuous training and clear, updated guidance to maintain knowledge and institutional memory. Awareness-raising efforts should target both professionals and the public.

Active support must be strengthened by making guided handovers the norm and by providing NGOs with sufficient resources for accompaniment. Service coverage should be expanded and waiting times reduced to ensure timely access. Finally, systematic cooperation and regular cross-sectoral training are essential to reduce fragmentation and guarantee that all victims receive equal support regardless of where they enter the system.

Referral models and guidelines

- Typical methods: giving contact information, calling the service together with the client, guided handover (with client's consent forwarding contact information directly).
- Many organizations have guidelines, but their scope varies.
- Some lack guidelines entirely, relying instead on tacit knowledge and practices.
- Where guidelines exist, they often focus on specific groups such as children or situations of intimate partner violence.
- In some cases, the client is directly referred to multi-professional teams (e.g. MARAK).

Good practices

- In some areas, referral has improved, especially when specific roles exist (e.g. domestic violence police officer, violence prevention coordinators).
- Accompanying the victim to services together works well in certain regions.

Challenges

- Referral practices are inconsistent, fragmented, depending on dependent on individual employees, organizations, and region.
- Police generally know about RIKU and refer victims there, but practices vary between departments.
- Authorities' knowledge of available services is often limited; awareness among both professionals and the public is weak.
- Regional disparities in service availability
- Victims are often left to contact services on their own, despite trauma and limited coping capacity.

- Guided handover is frequently missing, and NGOs lack resources for active accompaniment.
- Services are fragmented, waiting times are long, and some clients are unwilling or unable to commit to services.

Areas for improvement

Structures and Procedures

- Clear, standardized referral procedures should be introduced across organizations and regions.
- Referral should be systematic and mandatory, not dependent on individual employees.
- Guided handover should be used more often instead of just giving contact information.
- Cross-sectoral cooperation must be enhanced to reduce fragmentation.

Capacity and Training

- Authorities need continuous training and updated guidance.
- Regular joint training should be promoted to ensure that all professionals apply consistent practices.
- NGOs need sufficient resources to provide active accompaniment to victims.

Access and Equality

- Service coverage should be expanded, and waiting times would need to be reduced to guarantee timely support.

3.3.3 Information Provision

Based on the stakeholder consultations, the police and Victim Support Finland (RIKU) were identified as key information providers. Most organizations do provide information, but systematic practices and guidelines are often missing, leading to unequal access for victims. The findings incicate significant inconsistencies in how crime victims receive information about their rights and available services. While there is broad consensus that information should be given as early as possible and repeated throughout the entire criminal process, in practice this does not always occur. The amount and quality of information victims receive depends largely on which authority or service they first contact and on the knowledge of individual professionals.

Victims often struggle to process all information at once, which underlines the importance of referrals to support services where information can be provided in stages according to individual needs. A common problem is the lack of updates after a crime report. Victims may need to wait several months before receiving information on the progress of their case. An online service (“track my crime”) would improve transparency and ensure victims can follow development of their case more easily.

Authorities should also recognize that conditions such as ADHD or autism may affect a victim’s ability to receive and process information. Training is needed to address these issues. For example, the Autism Foundation Finland has provided training for police officers on how people on the autism spectrum process information.

Nearly all respondents emphasized that the provision of information to victims requires significant improvement. Clearer communication, consistent referral to support services, and enhanced professional competence – particularly in the social and healthcare sectors – were seen as priorities. The overall goal is to ensure that every crime victim receives timely, clear, and appropriate information, regardless of which organization they first approach.

Information provision practices

- The majority of respondents (86%) confirmed that their organizations provide information to victims.
- Information is shared verbally, in written form (leaflets, brochures), and digitally (online materials, chat services).
- Practices vary significantly: in some cases, information is systematically provided, while in others it may be missing altogether.
- Some organizations have clear guidelines, but in many cases information provision depends on the knowledge and practices of individual staff members.

Identified gaps

- Information often insufficient; rights and process stages not clearly explained
- Victims are not consistently informed about the progress of their case
- Inconsistent explanations of legal terms and processes by the police
- Varying levels of expertise among social and healthcare professionals
- The complexity and length of criminal proceedings, which victims often find difficult to understand
- Many victims remain unaware of the possibility of protection measure in the court (e.g., avoiding contact with the offender)

Areas for improvement:

- Clearer and more consistent guidelines, and enhanced training for professionals
- Guidance and counselling should begin at the first contact with police or other authorities and continue throughout the service pathway
- Information alone is not sufficient – some victims need practical accompaniment (e.g., booking appointments, support in accessing services), particularly those with substance abuse problems, young people, and victims with migrant backgrounds
- Providing information at the earliest possible stage (e.g., first contact)
- Ensuring timeliness – information should correspond to the stage of the criminal process the victim is currently in
- Repeating information throughout the process, as victims may not be able to absorb everything during the acute crisis
- Strengthening the provision of information to victims about the progress of their case, for example by introducing an online tracking service (“track my crime”) to provide regular updates on their case

4. Discussion and conclusion

This report maps the current state of victim support services in Finland as part of the EU-funded INVICTUS project. The findings are based on surveys, interviews, and document analysis.

The findings confirm that while Finland has a functioning victim support system, it does not guarantee equal support for all. Accessibility, communication, and resources vary significantly between regions, which leaves some victims entirely outside the system. This undermines the realisation of victims' rights and increases the risk of secondary victimization.

A central tension lies between official services and the work of NGOs: civil society organizations fill critical gaps, yet their funding is unstable. If NGO resources decline, responsibility for victim support risks shifting to authorities such as the police, prosecutors, or courts—actors who lack both the mandate and the expertise to provide comprehensive support that meets the victims individual needs.

The MARAC and LASTA models offer promising tools for multi-agency risk assessment. However, their fragmented application and lack of a clear legal foundation limit their effectiveness. National standards and stronger legal anchoring are needed to ensure victim safety and equal treatment across the country.

The report highlights that victims' awareness of their rights, training for authorities, and broader societal attitudes are decisive factors. Stigma and fear still prevent many victims from seeking help, which calls for societal change in attitudes toward victimisation.

Progress requires long-term political commitment, adequate funding, and close cooperation between public authorities and NGOs. This collaboration should be supported by national operational models and consistent practices to ensure that victims' rights are strengthened and that services are genuinely accessible throughout Finland.

Conclusions

Finland's victim support system provides a strong foundation, but services remain fragmented, regionally uneven, and insufficient for many vulnerable groups. Access to psychosocial, legal, and practical assistance still depends too heavily on where victims live, their background, and their personal resources. NGOs play a crucial role in filling these gaps, yet unstable funding puts continuity at risk.

To ensure equal and comprehensive support, Finland needs long-term investment in victim services, stronger legal safeguards, and consistent national standards for needs and risk assessments. Multi-agency tools such as MARAC and LASTA show promising results but require wider and more systematic application. Sustainable funding, better coordination between authorities and NGOs, and nationwide awareness efforts are essential. Only with these measures can Finland guarantee that all victims receive timely, equal, and effective support.

5. Annexes

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