



# A summary of existing knowledge

Author: Muriël Booms (University of Leuven)

2018

## VICTIMS OF ROAD TRAFFIC OFFENCES



This project is funded by  
the Justice Programme  
of the European Union



**moderator**  
forum voor herstelrecht en bemiddeling



**RONDPUNT**  
JE BONDGENOOT NA EEN  
VERKEERSONGEVAL

## COLOFON

### **A summary on existing knowledge**

Editorial adress

Rondpunt vzw  
Uitbreidingstraat 518 bus 2.01  
2600 Berchem  
Belgium

Responsible publisher

KU Leuven, LINC  
Hooverplein 10  
B – 3000 Leuven  
Belgium

Contact details

+3216 32 40 10  
[www.kuleuven.be](http://www.kuleuven.be)

# Table of contents

INTRODUCTION	3
<b>CHAPTER I: ROAD TRAFFIC VICTIMISATION</b>	<b>5</b>
<b>I.1 Victims of road traffic offences: conceptual and legal framework</b>	<b>5</b>
I.1.1 Victims of road traffic offences: a definition	5
I.1.2 The legal qualification of victims of road traffic offences	5
<b>I.2 It was 'just' an 'accident'...</b>	<b>6</b>
I.2.1 Recognising trivialisation	6
I.2.2 The root causes of trivialisation	6
I.2.3 Consequences of trivialisation	7
<b>I.3 ... but what about the various consequences?</b>	<b>7</b>
I.3.1 Physical consequences for road traffic victims	8
I.3.1.1 <i>Direct physical injuries</i>	8
I.3.1.2 <i>Psychosomatic consequences</i>	9
I.3.2 Psychological consequences for road traffic victims	9
I.3.2.1 <i>Victimisation by a road traffic offence as an extraordinary experience</i>	9
I.3.2.2 <i>Psychological disorders</i>	10
I.3.3 Socio-economic consequences for road traffic victims	10
I.3.3.1 <i>Social and relational consequences</i>	11
I.3.3.2 <i>Professional consequences</i>	11
I.3.3.3 <i>Financial consequences</i>	11
<b>CHAPTER II: THREE CENTRAL TOPICS</b>	<b>13</b>
<b>II.1 Information and support</b>	<b>13</b>
II.1.1 Information	14
II.1.1.1 <i>Providing information about...</i>	14
II.1.1.2 <i>Information from whom?</i>	16
II.1.1.3 <i>How should information be communicated?</i>	16
II.1.2 Information about support	19
II.1.2.1 <i>Informing about support ...</i>	19
II.1.2.2 <i>... is not enough!</i>	19
II.1.3 Support	20
II.1.3.1 <i>Victim support services: the framework...</i>	21
II.1.3.2 <i>... insufficient to take responsibility for all support</i>	22
<b>II.2 Interdisciplinary cooperation</b>	<b>22</b>
II.2.1 Interdisciplinary cooperation in the aftermath of a RTO: basic considerations	23
II.2.2 How to cooperate interdisciplinary?	24
II.2.2.1 <i>The establishment of a protocol</i>	24
II.2.2.2 <i>Case management</i>	26
<b>II.3 Restorative justice</b>	<b>26</b>
II.3.1 Restorative justice: the (limited) legal framework	27
II.3.2 RJ in the context of RTO	27
II.3.2.1 <i>Not just any other form of RJ</i>	28
II.3.2.2 <i>I need contact...</i>	28
II.3.2.3 <i>... don't I?</i>	28
CONCLUSION	30
BIBLIOGRAPHY	32

## INTRODUCTION

During the last decades, the attention for victims of crime has increased. This trend is, amongst others, evident at the level of the European Union. A case in point is the Directive 2012/29/EU of the European Parliament and the Council of 24 October 2012 establishing minimum standards on the rights, support and protection of victims of crime (further: European Directive 2012/29/EU). This fully binding legislation obliges the member states to integrate minimum rights for victims of crime in their own national legislation. All too often, victims of road traffic offences (further: RTOs) are overlooked in this process (Herbert, Kinable, Aeron-Thomas & Westland, 2015, p. 5).

Involvement in a RTO is described as an extraordinary experience, but it does occur quite regularly (cf. I.3.2.1; Aertsen & Hutsebaut, 2010, p. 42). The latest figures of road traffic collisions on Europe's roads, for instance, report that in 2015, 1.090.042 crashes that involved personal injury took place. These events have cost 26.134 individuals their lives (DG Mobility and Transport, 2017a, p. 104). The Directorate-General for Mobility and Transport (2017b) furthermore estimates that for every death on the roads of Europe, four persons are permanently injured (e.g. damage to the brain or spinal cord), eight individuals suffer serious injuries and fifty persons have to endure minor trauma. Overall, annually 1.448.100 persons are injured by road traffic collisions (DG Mobility and Transport, 2017b).

These figures fail to adequately reflect the actual impact RTOs have. They, more exactly, hide the personal drama in which more people are involved than only the direct victims (Meunier & Dupont, 2017; Rubbens, 2007, p. 3). The environment, such as parents, partners, children, brothers and sisters, friends and classmates, also get indirectly affected by the death or serious injury of their loved one and are forced to – at least temporarily but often on a more long term – change their daily life (Meunier & Dupont, 2017; Rubbens, 2007, p. 3). On top of that, insufficient road traffic safety and victimisation due to RTOs provide a relatively high impact on public health (Aertsen & Hutsebaut, 2010, p. 19).

Despite the high prevalence of victimisation due to RTOs and the considerable likelihood of being involved in it – as victim or as 'offender' (Rubbens, 2007, p. 4) – only little attention has been paid to this type of victim and its environment. More specifically, RTOs and its consequences are frequently trivialised and the needs of its victims are often denied (Herbert et al., 2015, p. 5). This lack of sufficient recognition and consideration can lead to secondary victimisation. This the experience of being victimised for a second time – not only by the incident but by the own environment and actors involved in handling with the consequences as well<sup>1</sup> (Herbert et al., 2015, p. 5).

This summary of existing knowledge is written in the context of the EU-project 'Victims of road traffic offences', supported by the Justice Programme of the European Union<sup>2</sup>. The aim of this project is to raise awareness for victims of RTOs in order to better support this group and avoid secondary victimisation. This summary should be regarded as a stepping stone for other activities that take place within this project.

---

<sup>1</sup> Please note that defining the concept of secondary victimisation is not without difficulty. The experience of being twice is rather subjective and therefore difficult to measure. However, it is without a doubt that victims can experience a large burden due to the way they are treated (Biffi et al., 2016).

<sup>2</sup> JUST/2015/JACC/AG/VICT/9276.

It provides an overview of the existing knowledge concerning victims of road traffic offences, but focusses primarily on three core topics of the EU-project: 'information and support', 'interdisciplinary cooperation' and 'restorative justice'. The existing knowledge is gathered from (mostly Belgian<sup>3</sup>) scientific research, grey literature and websites.

The summary of existing knowledge starts with a more general chapter on victimisation by RTOs. Here, a definition is presented, the trivialisation of RTOs is discussed and their consequences for victims are outlined. The second chapter presents existing knowledge on the three main topics of the EU-project discussed above. A conclusion is presented in the last, third chapter.

---

<sup>3</sup> The use of mainly Belgian/Flemish research can, on one hand, be explained by the fact this summary is carried out by institutions in this country. Such research is, consequently, easily accessible. However, and more importantly, considerable attention has been paid to victimisation by RTOs in Belgium/Flanders. An example is the 'States-General for the support of victims of road traffic offences' in which several good practices concerning cooperation, training and adequate referral are discussed and recommendations are made to enhance the support of victims of RTO (Flemish Parliament, 2007).

## CHAPTER I: ROAD TRAFFIC VICTIMISATION

In this first chapter of the summary of existing knowledge, road traffic victimisation is discussed more generally. The conceptual and legal context is presented first. Afterwards, the existing tendency to trivialise RTOs is touched upon and finally, the various consequences of victimisation by RTOs are outlined.

### 1.1 Victims of road traffic offences: conceptual and legal framework

The conceptual and legal framework that exists regarding victims of RTOs is discussed in this first section. More concretely, a definition of this victim-type is presented, followed by a discussion of its place within the legal (European) context.

#### 1.1.1 Victims of road traffic offences: a definition

In relation to the EU-project, victims of RTOs are described as 'persons who are victim of criminalisable behaviour on the road, such as involuntary injuries, hit-and-run, drunk driving and excessive speed driving'. An extensive interpretation of this victim type can be pursued by relying upon such broad definition. First, aside from those who lose their lives due to RTOs, this description includes (seriously) injured victims as well. They often suffer various long-lasting consequences and therefore deserve recognition and support. In addition, since the group of victims in the context of road traffic victimisation is much larger than only the person directly involved in the crash, everyone who feels devastated due to a RTO can be considered a victim within this definition. They can be referred to as indirect road traffic victims and more concretely entail the bereaved relatives who have lost a loved one due to a RTO and the relatives of a (seriously) injured victim (Flemish Parliament, 2007, p. 11; Herbert et al., 2015, p. 9). Article 2 of the European Directive 2012/29/EU does not include the latter category of relatives of injured victims and limits its scope to bereaved family members. However, due to the far-reaching impact of victimisation by RTOs, we believe both categories should be granted particular rights and attention when dealing with the crime's consequences. Within the EU-project, both categories of relatives are, thus, considered.

Two additional linguistic sensitivities are important against the background of RTOs. First, due to the often-unintentional nature of these offences, the 'perpetrators' are in the Dutch-speaking world referred to as the 'one who caused' the incident ('veroorzaker'). Concepts that can be used in the English language are 'author' or 'actor party'. Second, organisations for road traffic victims advocate for the use of road traffic 'crashes' or 'collisions' instead of road traffic 'accidents'. In the latter, they claim, the excuse of the offence being something beyond the control of the actor is embedded. In addition, the word 'accident' can also be used after a slippage of milk, which downplays the long-lasting and serious consequences they can have. Instead, 'crash' or 'collision' does not presume innocence or guilt and is therefore stated as more suiting (Roadpeace, 2011).

#### 1.1.2 The legal qualification of victims of road traffic offences

Countries deal with the qualification of victimisation due to RTOs differently. While they are approached as criminal offences in some states, others treat them in a merely administrative way. The way RTOs are qualified, however, determines whether the European Directive 2012/29/EU establishing minimum standard on the rights, support and protection of victims of crime is applicable for victims of RTO or not (European Commission DG Justice, 2013, p. 7; Herbert et al., 2015, p. 6).

In 2015, the European Federation of Road Traffic Victims (further: FEVR) has examined the qualification of RTOs in fifteen of its member states (Herbert et al., 2015, p. 8). Seven out of these fifteen countries indicated road victims are considered victims of a criminal offence (Belgium, France, Luxemburg, Portugal, Romania, Scotland and England and Wales) and six indicated this is partially true or rather undetermined (Bulgaria, Greece, Ireland, the Netherlands, Slovenia and Spain). In two countries they are not considered as victims of a criminal offence at all (Germany and Italy).

These differences do not only lead to an unequal approach of road traffic victims between the different member states. More importantly, the inequality fails to ensure that all direct and indirect victims of traffic offences are given minimum rights. Some countries solved this issue by establishing provisions to ensure the rights of road traffic victims are pursued in another manner, for instance in the Netherlands where a 'presumption of victimhood' is introduced<sup>4</sup>.

## 1.2 It was 'just' an 'accident'...

The reluctance to ensure that the needs of direct and indirect road traffic victims are met, is based in a more general tendency to trivialise RTOs and their consequences (Goossens, 2017, p. 17; Rubbens, 2007, p. 3; Van Suetendael, 2016–2017, p. 3). This part will, after stating some examples of this trivialisation, provide potential explanations for its occurrence and discuss the consequences of minimising the involvement in a road traffic collision.

### 1.2.1 Recognising trivialisation

Rubbens (2007, p. 3) mentions several recognisable examples in which the minimalisation of RTOs is visible. She, for instance, points to the norm blurring of road traffic violations such as driving 'a little' too fast and drinking 'one' glass too many, while these actions can have tremendous consequences. The media coverage of a road traffic collision also reflects this trivialisation; the total number of casualties is reported on as a fait divers, in the same sentence as the total length of the traffic jam that was caused by it. Finally, the way RTOs are handled in court – or not at all (cf. 1.1.2) – points to a banalisation as well. In Belgium, these cases are for instance dealt with together with rather minor traffic offences such as drunk driving and speeding, while murder and assault – which often have similar consequences as road traffic collisions – are handled by a more special court.

### 1.2.2 The root causes of trivialisation

Despite the far-reaching consequences road traffic victims have to endure, RTOs and their effects are often banalised. Three causes are discussed in the existing literature.

First, the rather unintentional nature of RTOs is seen as partially responsible for the tendency to minimise its consequences. That is, even when aggravating consequences are present, they are often not committed on purpose. Goossens (2007, p. 17) states that this unintentional nature leads to the inclination to condemn and punish these events less in comparison to other offences. They are not perceived as 'real crime' which arises only moderate understanding for victims of RTOs (Goossens, 2017, p. 17; Rubbens, 2007, p. 3).

---

<sup>4</sup> This is more broadly discussed in another activity within the EU-project, being the paper on interdisciplinary cooperation.

In addition, the minimalisation of road traffic victimisation can be a result of societies' and decision-makers' attitude that death and disability on a large scale are acceptable, as a "human sacrifice deemed necessary to maintain high levels of mobility" (Mohan, 2003, p. 684) and "collateral damage in a society where economic-merchandise is seen as more important than physical integrity" (D'Hondt, 2013, p. 286). Although governments take action to reduce the number of casualties, their basic attitude seems to be that RTOs are an unfortunate series of events that are unavoidable – despite the fact individuals driving is often the cause (De Langhe, 2011–2012, p. 10; Mohan, 2003, p. 684).

Finally, Rubbens (2007, p. 4) indicates that the trivialisation might also be a 'self-protective' strategy. More concretely, the chance of being involved in a traffic collision – as a victim or as an author – is real and taking part in traffic is unavoidable. A constant awareness of this vulnerability would have a high impact on one's freedom and carelessness of movement. Thus, owing to the banalisation of the consequences, one does not experience such restriction. However, awareness of the far-reaching consequences is important in stressing our own responsibility and the results of our own behaviour.

### 1.2.3 Consequences of trivialisation

On one hand, the trivialisation impacts the direct and indirect victims. They endure impact on almost every part of their existence; the physical mobility and emotional, social, material, relational and professional life (cf. 1.3) are affected and figuring out a way to adapt to this new reality takes time. The latter can be hindered by a lack of understanding due to the tendency to minimise the consequences and by making (implicit) statements that one should just accept the happening quickly (De Langhe, 2011–2012, p. 10; Rubbens, 2007, p. 3). Additionally, the trivialisation also explains the insufficient attention that has been given to the consequences of RTOs by professionals, both in the field and scientifically (De Langhe, 2011–2012, p. 1). Inadequate awareness for the process of road traffic victims has caused limited or not adapted assistance and/or legislation (Rubbens, 2007, p. 3). This can lead to secondary victimisation.

On the other hand, the trivialisation of RTOs has consequences at the level of the potential authors of a road traffic crash. By banalising these offences, individuals are attributed less responsibility for their own behaviour in traffic which could lead to more RTOs, potentially with victims (cf. 1.2.2; Rubbens, 2007, p. 4). This, however, does not imply that the trivialisation leads actual actor parties of RTOs to take less responsibility for their committed acts towards the persons they victimised.

### 1.3 ... but what about the various consequences?

It seems to be hard to realise the far-reaching direct and indirect consequences that families who are affected by a RTO must endure (Meelberghs, 2009–2010, p. 1). Aside from the physical consequences, other aspects of human life (e.g. mental health, social and emotional, professional and economic life) are often on a long term or even persistently affected (Meunier & Dupont, 2017, p. 5). Feys (2016, p. 15) presents the consequences of a deadly traffic collision (although we argue the same idea can be applied in the context of seriously harmed individuals) as a cluster bomb – the crash as the first larger bomb, followed by several smaller explosions in the environment and on different aspects of life.

In comparison to other types of victims, road traffic victims and their (bereaved) family members endure divergent consequences that occur on short, medium or long term (Aertsen & Hutsebaut, 2010, p. 15). The consequences are never identical and result in the fact victims have to contact several different agencies and services such as the police, hospitals, rehabilitation centres, the juridical world, insurance agencies and



several support services (Rubbens, 2007, p. 7; Van Suetendael, 2016–2017, p. 33). The long process of coming to terms with the aftermath of a RTO is often hindered by a lack of understanding, as discussed in the previous part on trivialisation (Rubbens, 2007, p. 3).

A lack of understanding of the impact of victimisation by RTOs among professionals can cause extra emotional and even (psychosomatic) physical harm due to not knowing how to act or provide support (Herbert et al., 2015). This can, in other words, cause secondary victimisation. Therefore, being fully aware of the concrete endured consequences is important. In the following, these are presented in a general way<sup>5</sup> since a more detailed description would exceed the purpose of this summary.

### 1.3.1 Physical consequences for road traffic victims

The most evident consequences of victimisation by RTOs are physical injuries (Meelberghs, 2009–2010, p. 11). In general, more serious injuries have larger consequences for the individual. However, minor injuries such as a whiplash can cause long-term implications as well (Meunier & Dupont, 2017, p. 5). Especially given the fact slight and moderate injuries represent the clear majority of impairments, they constitute a significant proportion of societies burden of injury (Meunier & Dupont, 2017, p. 5; Weijermars et al., 2017, p. 26). In what follows, both direct physical injuries and psychosomatic reactions to a crash are discussed.

#### 1.3.1.1 Direct physical injuries

In their overview of the existing knowledge on the various consequences for road traffic victims, Meunier and Dupont (2017, p. 9) state that not much research has directed its attention to the physical impairments resulting from traffic crashes. Studies that focused on this topic show divergent prevalences, which is largely caused by the way it is measured (cf. note 3).

The existing research has examined the restrictions on activity and participation caused by a traffic crash more often. Meunier and Dupont (2017, p. 10) state that these studies all point to the existence of an important part of survivors of traffic collisions that must live with permanent functional handicaps. The majority of seriously injured victims seem to not have recovered 1,5 years after the event, 45% of those less seriously wounded are not completely repaired after a year and moreover, the overall situation of road traffic victims can worsen on the long term (Meunier & Dupont, 2017, p. 10; Weijermars et al., 2017, p. 26). The domains most frequently impacted by physical injuries are physical health (mobility, fatigue, pain), discomfort, mental health, daily activities and social life (Meunier & Dupont, 2017, p. 10; Weijermars et al., 2017, p. 26). The restrictions related to daily activities seem to fade away in the passing of time. Limitations concerning pain and discomfort, however, stay. Problems with cognitive functioning remain present the longest but are less frequent (Meunier & Dupont, 2017, p. 10).

Several factors, such as speed, kind of road user, the nature of the crash, the victim's age and physical strength influence the seriousness and location of the injuries (Meelberghs, 2009–2010, p. 11; Meunier & Dupont, 2017, p. 4). In addition, an older age, the female gender, psychological and medical comorbidity, lower quality of treatment and an ongoing exposure to the compensation process are predictive of physical and functional consequences of RTOs (Weijermars, et al., 2017, p. 37).

---

<sup>5</sup> Please note that the concrete prevalence of consequences varies between different studies. This is caused by, amongst others, the use of different methods, different types/locations/seriousness of injuries, different methods of transport and different environmental features (i.e. age, gender, comorbidity, ...) (Meunier & Dupont, 2017, p. 5).

### *1.3.1.2 Psychosomatic consequences*

Road traffic victims and/or their (bereaved) relatives can also experience physical consequences that are not directly caused by the collision but rather result from being involved in a shocking experience (Aertsen & Hutsebaut, 2010, p. 44). These implications are, in other words, caused by a psychological state of mind. It concerns reactions such as stress, fatigue, headache, high blood pressure, muscle pain, gastrointestinal problems, sleeping problems and nightmares (Aertsen & Hutsebaut, 2010, p. 44; Feys, 2015, p. 15).

### *1.3.2 Psychological consequences for road traffic victims*

The unwanted and unexpected feature victimisation by RTOs tends to have often results in a traumatic impact. This effect is found to be the most persistent compared to other consequences; where physical consequences seem to have reached a ceiling after twelve months, psychological ones have not (Aertsen, Christiaensen, Hougardy & Martin, 2002, p. 271; Meunier & Dupont, 2017, p. 14; Weijermars et al., 2017, p. 26). In addition, relatively minor injuries can lead to more profound psychological effects. They do often not occur directly after the experience, but rather after a couple of weeks/months (Weijermars et al., 2017, p. 28). Interestingly, these consequences are comparable between the victims and authors of the RTO – although the latter seem to experience higher feelings of guilt (Goossens, 2007, p. 17). Predictive factors for experiencing psychological consequences due to victimisation by RTOs are the female gender, being a child/adolescent (compared to adults), negative emotionality and believes during the revalidation, prior emotional problems, a perceived threat to life and perceptions and memories of the event as 'horrific' and 'frightening' (Weijermars, et al., 2017, p. 37).

The reason victimisation by RTOs is often perceived as an extraordinary experience is discussed first. The concrete psychological disorders which may be the result of such event are presented subsequently.

#### *1.3.2.1 Victimisation by a road traffic offence as an extraordinary experience*

Despite the fact victimisation by RTOs occurs quite often (cf. introduction), people tend to believe it only happen to 'others' (Aertsen & Hutsebaut, 2010, p. 45). This is a result of people's general inclination to see the world as predictable and orderly. If an individual is involved in a road traffic collision, the intensity of the consequences shatter three basic assumptions underlying this orderly world: the belief in one's personal invulnerability, the perception of the world as meaningful and understandable (i.e. people get what they deserve and what happens is predictable) and the positive self-esteem (due to being confronted with a feeling of helplessness and a loss of personal autonomy) (Aertsen & Hutsebaut, 2010, pp. 45-46). This shattering of meaning explains the extraordinarily impact RTOs have on life.

Victims need to rebuild this set of assumptions after a crash, which occurs in the context of a cognitive restructuring of the event. Victimisation is a social process that starts with the criminal offence and is followed by a cognitive decision in which the person impacted by the offence assesses whether (s)he perceives him/herself as a victim and, if so, whether (s)he adopts the victim label (Dignan, 2005, p. 30). The label is sometimes rejected specifically owing to its passive connotation or is not assumed due to the perception the victimisation is only trivial. The way the event is restructured cognitively influences the process of rebuilding the shattered set of assumptions. The stronger the idea of an orderly and predictable world was before the event, the more difficult coming to terms with the new situation is. Since these assumptions are less strong among children, they are believed to be able to restore these beliefs more quickly (Janoff-Bulman as in Aertsen & Hutsebaut, 2010, p. 46). However, children might also suffer more from the experience due to the fact

their self-esteem is still developing.

### *1.3.2.2 Psychological disorders*

Several psychological disorders can result from the extraordinary experience of victimisation by RTOs. The concrete prevalences differ widely (Meunier & Dupont, 2017, p. 29). In the following, the most-studied disorders are shortly discussed.

Trauma-related stress disorders, such as acute stress disorder (further: ASD) and post-traumatic stress disorder (further: PTSD) are examined quite often (Aertsen & Hutsebaut, 2010, p. 48). Studies show that ASD – which can occur within the first month after the traumatic experience – is suffered by 13% of the adult road traffic victims. The prevalence of PTSD, again for adult victims, is situated between 8 and 12% after three months, 10 and 25% after six months and 7 and 17% after a year. The comparability of studies involving child victims is low, which complicates stating a certain percentage (Aertsen & Hutsebaut, 2010, pp. 48-54). A study did find that 45% of the brothers and sisters of victims who died due to the crash still suffer from PTSD until 7 years after the event (but need for caution due to low sample size study). Parents whose child died due to a traffic collision also experience PTSD on a long term (Aertsen & Hutsebaut, 2010, pp. 71-75).

Anxiety, another regularly-examined psychological consequence, is often divided into general (i.e. disproportionate anxiety and concern) and specific anxiety (i.e. anxiety related to a certain object/situation) (Aertsen & Hutsebaut, 2010, p. 58). The prevalence of adult road traffic victims suffering from general anxiety varies from 13,4 to 17% after three months and 13 to 19% after six months. It occurs on the long term as well; a study found that 28% suffered general anxiety after five years (Aertsen & Hutsebaut, 2010, p. 58). Specific anxiety – also referred to as phobic travel anxiety – occurs in 4,7 to 22% after three and 3,6 to 17% after six months. Although the means of transportation do usually not lead to different psychological consequences, an exception exists concerning passengers in a vehicle; they are more likely to obtain a phobic travel anxiety (Weijermars et al., 2017, p. 29).

Depression is another psychological consequence road traffic victims can endure. Concerning adult victims, studies have found that 5 to 10% suffers from depression after three months and 6 to 16% after a year (Aertsen & Hutsebaut, 2010, p. 60). For a considerable minority, depression is suffered on a long term. The more time passes, however, the more difficult the causal link with the traffic crash can be proven. Brothers, sisters and parents of victims who died due to a collision can suffer from depression as well (Aertsen & Hutsebaut, 2010, p. 75).

Other disorders that are studied less, but seem to be relevant as well, are feelings of powerlessness due to a lack of control over the situation (Feys, 2015, p. 15; Van Suetendael, 2016–2017, p. 29), feelings of guilt – especially by authors of the collision but also by victims and their parents – which are related to a damaged self-esteem (Aertsen & Hutsebaut, 2010, p. 47; Feys, 2015, p. 15) and anger towards the situation, the other party or oneself (Feys, 2015, p. 15; Van Suetendael, 2016–2017, p. 31).

### **1.3.3 Socio-economic consequences for road traffic victims**

The social, familial and professional life of road traffic victims is, in addition to the physical and psychological consequences, also influenced (Meunier & Dupont, 2017, p. 15). These levels of impact are discussed in the context of 'socio-economic consequences'.

### *1.3.3.1 Social and relational consequences*

The victim's physical and emotional difficulties impact the lives of the family/close relatives as well (Aertsen & Hutsebaut, 2010, p. 82). Several studies have found higher levels of stress and suffering within the close family after a crash. In addition, a higher severity of the event leads to a higher probability the relatives receive aid, family support, have to move to another home and/or have difficulties in day-to-day social, emotional or affective life (Weijermars, et al., 2017, p. 32).

Consequently, it will not be surprising that victimisation by RTOs tends to impact social relationships. Research has, for instance, found that the interpersonal relationship can be negatively impacted. Nonetheless, some studies point to the possibility of a positive influence on this relationship as well (Aertsen & Hutsebaut, 2010, p. 82). In the context of more general social relationships (i.e. broader than the close relatives), studies have found that around 15% of the victims of RTOs experience a decline of these contacts (Aertsen & Hutsebaut, 2010, p. 82). This decline can be explained by the societal trivialisation of the consequences of road traffic crashes, an imbalance between the objective severity level perceived by the social environment and the subjective perception by the victim and the fear of family, friends and acquaintances to talk about the collision due to feelings of shame, guilt and not wanting to hurt the victim. This, however, sometimes results in no contact at all (Aertsen & Hutsebaut, 2010, p. 80).

### *1.3.3.2 Professional consequences*

Victimisation by RTOs tends to impact the professional life as well. Weijermars et al. (2017, p. 32) state that, based on a summary of studies, the vast majority of victims seem to report time off work/studies after a crash and a substantial part is obliged to take long sick or even definite leaves. According to the overview given by Aertsen and Hutsebaut (2010, p. 82), around 25% of the victims cannot return to the previous work situations, others need to change work or get assigned another specific task. Also family members are often obliged to take time off or change the working situation totally (Weijermars et al., 2017, p. 32).

Furthermore, research states that more severe physical or psychological complications increase the probability of a long or definite leave, just as older age and suffering concentration problems (Weijermars, et al., 2017, p. 37). Finally, the social life is influenced by not being able to return to a working situation as well (Feys, 2016, p. 16).

### *1.3.3.3 Financial consequences*

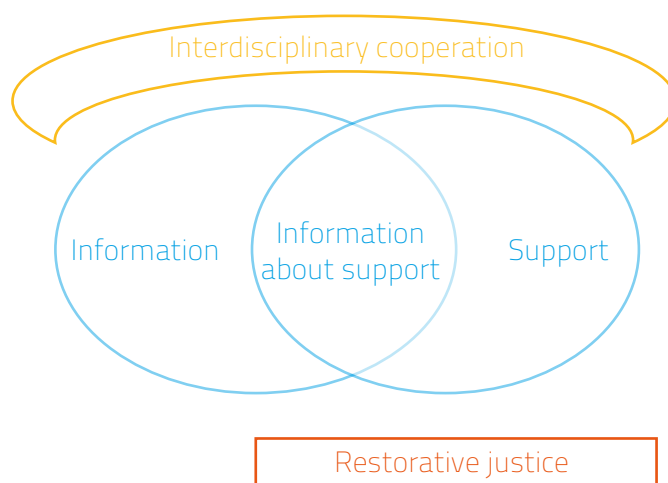
Finally, road traffic victims and their relatives often endure financial consequences due to the crash (Weijermars, et al., 2017, p. 32). The monetary impact can be a direct result of the collision and for instance entail material damage and medical costs due to physical injury. However, indirect financial impact such as loss of income owing to not being able to work and lawyers' fees is common as well (Aertsen et al., 2002, p. 19). The financial consequences are generally dealt with through insurance agencies. However, the concessions often take long, especially when it still has to be established who is responsible for the crash (Van Suetendael, 2016–2017, p. 28). In addition, although all financial costs of the collision should be reimbursed, road traffic victims often have to pay a substantial part – often resulting from indirect financial consequences – themselves (Aertsen & Hutsebaut, 2010, p. 88; Feys, 2015, p. 16). For some compensation has a symbolic value – it is the worth society places on the death of a loved one. For others, it is regarded as blood money (Feys, 2016, p. 17).

Solely this process has been found to cause frustration and psychological suffering. Some studies have even discovered a positive relationship between PTSD and asking for compensation, but the direction of this relationship is unclear (Aertsen & Hutsebaut, 2010, p. 88).

## CHAPTER II: THREE CENTRAL TOPICS

Road traffic victims and/or their (bereaved) relatives endure several physical, psychological and socio-economical consequences. In dealing with these impacts, they have to get in touch with several agencies and services on short, medium and long term (Rubbens, 2007, p. 7; Van Suetendael, 2016-2017, p. 33). The chance of them being secondarily victimised in these contacts with professionals is rather high (Feys, 2016, p. 18).

The aim of the EU-project 'Victims of road traffic offences' is to gain more recognition for road traffic victims, to develop clear information for this group, to improve the effectiveness and accessibility of support, to facilitate interdisciplinary cooperation and, overall, to prevent this secondary victimisation. In addition, the potential role of restorative justice (further: RJ) in the context of RTOs is examined. This second chapter provides an overview of the existing knowledge on these core topics of the project, classified into the parts: information and support (II.1), interdisciplinary cooperation (II.2) and restorative justice (II.3). In **FIGURE 1** the three discussed parts are presented (which will return at the start of every sub-part). These themes are interrelated in that information and support can only be granted effectively when interdisciplinary cooperation is established, and that restorative justice can play an important role in informing victims about support and rendering such support itself. While discussing these topics, the European Directive 2012/29/EU is referred to. Note, however, that whether victims of RTOs can benefit from this Directive depends on whether it is implemented in the first place and secondly, on how RTOs are qualified - as criminal offences or as acts that are handled administratively (supra; European Commission DG Justice, 2013, p. 7; Herbert et al., 2015, p. 6).

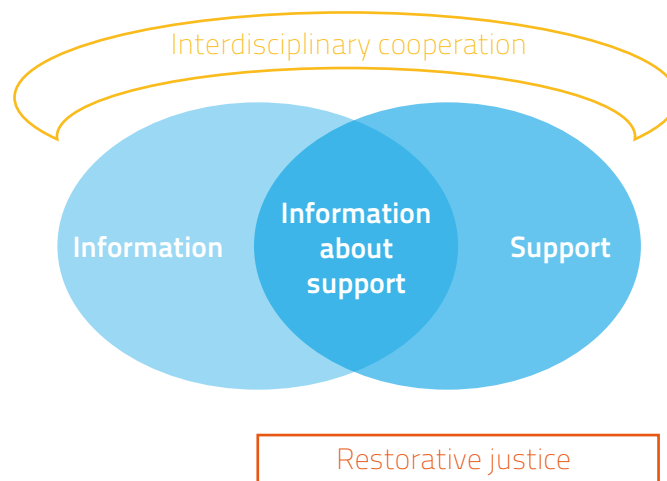


**FIGURE 1** Schematic presentation central topics

### II.1 Information and support

Road traffic victims and/or their (bereaved) relatives are not always properly informed about their rights and the support they can appeal to (Herbert et al., 2015; Flemish Parliament, 2007, p. 95). This lack of knowledge is caused by an inadequate existence of clear and understandable information and insufficient means to communicate it. In the study of Herbert et al. (2015), victim associations of fifteen European (FEVR) countries indeed indicated road traffic victims were only to a limited extent aware of their rights.

This first part consists of three sections (see **FIGURE 2**). The first section focusses on the need for information. Insight is given into what information is important, in what way it should be communicated and who is responsible for informing victims. Secondly, existing knowledge is outlined on how to inform victims of RTOs about the support they are entitled to. The final part focusses on support in general and support services in particular.



**FIGURE 2** Schematic presentation information and support

### II.1.1 Information

Acquiring information is one of the most important needs of victims in general (Victim Support Europe, 2013, p. 19). This is not any different for road traffic victims and/or their (bereaved) relatives. Road traffic collisions are perceived to be radical events with intensive consequences and a feeling of control over these circumstances can be obtained by receiving the essential information (Flemish Parliament, 2007, p. 69).

#### II.1.1.1 Providing information about...

In article 4 of the European Directive 2012/29/EU, an overview of the information that should be provided to victims of crime at the first contact is presented. In this summary, seven categories of information that are most important for victims of RTOs and/or their (bereaved) relatives are discussed<sup>6</sup>.

First, information about the concrete situation of the crash is necessary (Aertsen & Hutsebaut, 2010, p. 184; Flemish Parliament, 2007, p. 29). It should be specific, correct and impartial information about the event. For instance, statements about who is responsible for the collision should not be made unless one is 100% certain. In addition, contradictory allegations should be prevented since they could lead to confusion (Aertsen & Hutsebaut, 2010, p. 184).

Second, victims and/or their relatives need information about their legal status/case, which needs to be communicated unambiguously by all actors involved (Herbert et al., 2015, p. 9). This information entails

---

<sup>6</sup> The decision is made to not focus on the right to receive information about the case as part of the criminal proceedings, included in art. 6 of the European Directive. Despite this article being important, the scope of this project is on the provision of information in general and not particularly in the context of a trial.

amongst others who should be contacted, how and where certain documents need to be obtained, how the investigation is proceeding, how the judicial process normally evolves and how one's personal belongings can be retrieved (Aertsen & Hutsebaut, 2010; Victim Support Europe, 2013, p. 19). In addition, the information might also be about how to make a formal complaint and how to access legal advice, legal aid, or any other kind of advice (e.g. social security schemes or financial advice) (European Commission DG Justice, 2013; Herbert et al., 2015, p. 15).

More concretely with regard to insurance matters, information about the different types of insurance policies (e.g. liability insurance, legal expenses insurance, workplace insurance, personal accident insurance) that could/should be invoked depending upon the concrete circumstances of the collision should be presented. Insight into the various procedures that might be applicable is essential as well. In some countries, special (compensatory) arrangements exist for, amongst others, vulnerable road users and completely innocent involved parties (Rondpunt, n.d., 74-98).

The fourth type of important information for road traffic victims concerns their contacts with the press. Road traffic victims and/or their relatives are often approached by the media. When responding to this approachment, victims often want to make themselves heard and express their dissatisfaction with regard to the course of the events and/or argue for general adaptations (Meelberghs, 2009-2010, p. 32). Unfortunately, the media do not always present the victim's arguments in the desired way and sometimes certain extra (incorrect) information is added to give their story more sensational value (Meelberghs, 2009-2010, p. 32). In addition, the press sometimes fails to respect the road traffic victims' or their relatives' wish to not respond to their approachment. Both situations can lead to secondary victimisation. The provision of information about victims' rights with regard the press is, thus, essential. They should be made aware of their legal rights (for instance with regard to asking for anonymity and the procedure to make a complaint) and be given advice on how to act when they desire to speak to the press. In this context, it is worth mentioning that professionals (such as the police, juridical and medical personnel) have an important role with regards to providing information to the press as well. These services should be aware of the impact the information they provide can have on the victims when the latter encounter it in the media (Aertsen et al., 2002, p. 327).

Fifth, injured victims of RTOs and their relatives also need to receive information about the medical condition (Flemish Parliament, 2007, p. 15). The concrete communication is essential: information should be presented calmly, in understandable words and complete. The short, medium and long-term consequences should be discussed and more practical medical information has to be provided, such as which hospital or medical services are important, the timetables and an organigram (Aertsen & Hutsebaut, 2010, p. 210; Flemish Parliament, 2007).

For bereaved relatives, information on the organisation of the moment of farewell with the deceased victim is exceptionally important. Most (however not all) relatives have the need to be with the victim immediately during the last moments and/or to say farewell when the body is still warm (Aertsen & Hutsebaut, 2010, p. 162). Sometimes this is difficult, for instance when the body is not yet released because an autopsy is required. The concrete procedure should in any case being explained thoroughly with attention to the used language, the experienced emotions and sensitivities and with respect for the religious and philosophical beliefs (Aertsen et al., 2002, p. 230; Aertsen & Hutsebaut, 2010, pp. 122-123).

The final, seventh, type of necessary information victims/relatives should be made aware of is the existence of support services and how they can be accessed (European Commission DG Justice, 2013, p. 9). This topic is discussed more thoroughly in the II.1.3.



### *II.1.1.2 Information from whom?*

The actor that is responsible for delivering information varies according to the information that needs to be provided. In any case, which information is given by whom should be coordinated and delineated (Hutsebaut, Schepers, Vandendaele & Westland, 2016, p. 13). At this moment, the knowledge of the different sectors involved with road traffic victims and/or their relatives is often insufficient to provide good information.

The police are often the first service victims and/or their environment come in touch with, at the place of the collision or during the communication of the event to the relatives (Feys, 2016, p. 7). Consequently, they have an important informative role. They can answer more concrete questions and give first information about the collision. In addition, more general information about the victims' rights in amongst others the juridical process and victim support services can be provided (infra; Aertsen et al., 2002, p. 271; Aertsen & Hutsebaut, 2010, pp. 181, 194). The contact with the police is important to avoid secondary victimisation: the content of the information and the way it is presented can have a long-term impact on victims and/or (bereaved) relatives (Broucker & Defever, 2007, p. 111).

However, due to being transported to a hospital immediately, injured victims do not always encounter the police. In addition, as is stated in article 4 of the European Directive 2012/29/EU, also victims who wish to not report a crime should benefit from information (European Commission DG Justice, 2013, p. 13). Consequently, hospitals and, at a later stage, revalidation centres and family doctors have an important informative role alongside with the information they provide about the physical condition.

For more practical information about what happened, De Langhe (2011-2012, p. 59) has found that services that intervened shortly after the event often are in contact with victims and/or (bereaved) relatives. Examples of such services are the firefighters and the concrete doctor who has treated the victim.

The insurance representative additionally has an important role in giving insight into the rights of victims and their (bereaved) relatives (Aertsen & Hutsebaut, 2010, p. 261). The representative should provide information about one's rights in general but also more concretely regarding compensation and the settlement of claims (supra, Aertsen & Hutsebaut, 2010, pp. 261-262). Such information needs to be provided proactively and should be independent, correct and complete.

Finally, in addition to the emotional and psychological support and practical assistance, victim support services have an important role in providing information and advice (cf. art. 9§1 European Directive 2012/29/EU; European Commission DG Justice, 2013, p. 24). This informative role is adopted as well by peer groups and national organisations that advocate for victims of RTO and aim to fulfil their needs (such as Rondpunt, a partner of this EU-project). These services can provide an image of all potentially relevant organisations (e.g. specialised services for acquired brain injury or restorative justice services) and inform victims about for instance the communication with the press. They can also assess whether correct and complete information is given by other facilities. Especially with regard to the contact with the insurance agent, such assessment might be necessary. The research of Aertsen and Hutsebaut (2010, p. 277) has, for instance, found that in the encounter with the insurance sector, victims of RTOs and/or their relatives are not always informed duly and are sometimes even pressured in agreeing with certain propositions without being aware of all options.

### *II.1.1.3 How should information be communicated?*

Information should be communicated in a victim-centred way, meaning that the language should be adap-

ted to the target audience and the information should be given at the right timing (Feys, 2016, p. 20). Since this might vary from situation to situation, an individualised approach is necessary. In the following section, the way information should be distributed ideally is discussed.

a) Pro-active distribution of information

The pro-active distribution of information at the first contact with the competent authority is included in article 4 of the European Directive 2012/29/EU. This article implies that information should be given ex officio, without the necessity victims ask or search for it themselves (European Commission DG Justice, 2013, p. 13; Herbert et al., 2015, p.18). Since victims and/or their bereaved relatives might be unable to access information in their grief, the proactive distribution of information is fundamental (infra; Herbert et al., 2015, p. 12).

The European Commission DG Justice (2013, p. 13-14) has outlined some considerations about how information can be provided pro-actively in the wake of the European Directive 2012/29/EU. They state that appropriate models, templates and tools should be developed to make different types of information accessible. De Langhe (2011-2012, pp. 58-59) for instance points to a difference between passive (i.e. victims are given flyers based on which they can seek contact with an organisation) and active informing (i.e. the victims and an involved actor decide together to arrange referrals). Which type is more suiting depends on the victim's personal situation, personal characteristics, the nature of the crime and/or the kind of information that is given (European Commission DG Justice, 2013, p. 14). In addition, the European Commission DG Justice (2013, p. 14) states that all different actors involved should be given responsibility about certain types of information and should be obliged to comply with this responsibility.

Pro-actively obtaining information should not depend on whether the victim/relatives have reported the crime to the police. Consequently, the relevant information should also be available to the general public (for instance through national organisations that stand up for road traffic victims) and at places where victims are likely to go (European Commission DG Justice, 2013, p. 13). For victims of road traffic offences, hospital, revalidation centres and family doctors might be such places.

In the study of Herbert et al. (2015, p. 14), most victim associations of FEVR's member states stated that the way in which all sorts of useful information is distributed to road traffic victims in their country should be improved. Two third of the questioned victim associations indicated that victims in their state have to take initiative to gain information (Herbert et al., 2015, p. 14). In addition, half of the associations pointed out that no generalised procedures were established and whether information was delivered correctly depended from case to case, authority to authority or police department to police department.

b) At the right timing

Aside from the necessity to provide information pro-actively, the fourth article of the European Directive 2012/29/EU states that victims have the right to receive information from the first contact with a competent authority. The extent and detail of the information should, however, depend on the specific needs/ personal circumstances and nature of the crime. In the specific situation of victimisation by RTOs, victims and/or their (bereaved) relatives often experience a state of shock. This state makes comprehending and absorbing certain information at the first contact often difficult (European Commission DG Justice, 2013, p.15; Feys, 2016, p. 20; Herbert et al., 2015, p. 40). Consequently, the (oral) provision of all information from the first contact with the authorities is not advisable.

At this first contact, victims and/or relatives are mainly focused on the concrete circumstances of the collision. More general information about the investigation or the judicial and insurance process is often not opportune at this time. However, this can vary from individual to individual and should, consequently, be assessed specifically in every situation and for every individual (Aertsen & Hutsebaut, 2010, p. 184). In the study of Aertsen and Hutsebaut (2010, p. 185), parents who lost their child due to a RTO indicated that providing a leaflet containing more general information about what actions have to be taken and who can be contacted for a certain issue might be a solution for the inability to process the given information at the first contact. In Belgium, such a guide is created by Rondpunt and is provided for free to all those who have been impacted by a serious traffic offence<sup>7</sup>.

Since the comprehension of victims/relatives at the first contact might be influenced by a state of shock and not all relevant information might be asked at that time, a new contact moment should be arranged (Aertsen & Hutsebaut, 2010, p. 184; Herbert et al., 2015, p. 18). The research of Aertsen and Hutsebaut (2010, p. 194-195) points to the important role one (or more) moment(s) of recontact between the victims/relatives and the police can fulfill in this respect. In practice, such meetings are often initiated by the police since administrative aspects need to be arranged and additional information has to be asked. However, in this meeting victims can ask for certain information they have missed at the first contact as well and the police officer can assess whether there are difficulties in the coping process. If the latter is the case, a referral to (for instance psychosocial) support services can be arranged (infra). The construction of a topic list is recommended since several actions are important during such meetings (Flemish Parliament, 2007, p. 65). Such list should, however, not impede with the more personal and informal nature such contact moment should have (Feys, 2016, p. 13). The concrete timing of the moments of recontact should be aligned with crucial moments such as the funeral, a birthday or the judicial process (Hutsebaut et al., 2016, p. 34). They are a common practice in, amongst others, Belgium but unfortunately are not systemised and generalised. Whether they occur depends on the organisation and capacity of the police district and sometimes, victims have to ask for a moment of recontact themselves – which is not consistent with the above described pro-active approach (Hutsebaut et al., 2016, p. 34).

c) Understandable and individualised information

The information that is provided to direct and indirect victims of RTOs should be understandable and accessible (Herbert et al., 2015, p. 39; Hutsebaut et al., 2016, p. 12). Whether this is the case varies from situation to situation and individual to individual (Feys, 2016, p. 20).

The need for understandable information is related to article 3 of the European Directive 2012/29/EU which entails the 'right to understand and be understood'<sup>8</sup>. This article mainly states that based on personal characteristics, victims should be pro-actively assisted to understand and make themselves understood. In addition, the information provided through national practices and schemes should be simple and accessible and available both orally and in written (European Commission DG Justice, 2013, p. 13). Since victims of RTOs are often for the first time confronted with certain societal sectors, the use of clear and simple information in which technical terminology is explained is important.

The European Commission DG Justice (2013, p. 10) additionally indicates that, in relation to the applicability

---

<sup>7</sup> A translation of this information leaflet is developed in the context of the EU-project.

<sup>8</sup> Art. 3 applies to amongst others article 4, the 'right to receive information from the first contact with a competent authority'.

of art. 3 of the European Directive 2012/29/EU on victims of RTOs, the ability for victims to understand might be limited due to the shocking experience of a road traffic collision (Aertsen & Hutsebaut, 2010, p. 184; Herbert et al., 2015, p. 18). This should be assessed individually and considered specifically when providing information. The different models, templates and IT tools that are developed for providing information proactively should thus also pay attention to the victim's actual personal situation and personal characteristics (European Commission DG Justice, 2013, p. 13). A case manager who assists victims in individual cases could be essential in paying attention to the victims/relatives actual situation and in assessing in what way and which information is suitable at what time (Feys, 2016, p. 20).

## II.1.2 Information about support

Aside from more general information, victims of RTOs should be made aware of the existence of support and how they can access it. This section will particularly focus on informing victims of RTOs about support services. The topic of support will be discussed in the next part.

### II.1.2.1 Informing about support ...

Article 4 of the European Directive 2012/29/EU states that, at the first contact with the competent authority, information concerning medical and any other specialist support including psychological support and alternative accommodation should be provided. This information has to be offered pro-actively. In the study of Herbert et al. (2015, p. 29), half of the victim associations indicated this is usually not the case. In addition, this study has shown that in some member states, the provision of information varies between regions, police forces and even between whether the victims were injured or bereaved. The coordination of the provision of information between services (police, hospitals ...) and/or regions is thus necessary to guarantee this right (Herbert et al., 2015, p. 30).

The police have an important role in informing the victim of the availability of victim support. First of all, they are often the first authority who the victim/relatives encounter. In addition, during a moment of recontact, a while after the RTO (supra), the police officer can assess how the initial shock is being processed and whether repeating information about certain support services is necessary (Flemish Parliament, 2007, p. 65). Other agencies that are important in this context are hospitals, revalidation centres and family doctors, peer groups and national organisations for road traffic victims.

### II.1.2.2 ... is not enough!

However, victims are often hesitant for actively asking and/or searching for help themselves. This rather passive attitude is a consequence of the shattered basic assumptions previously discussed (cf. I.3.2; Aertsen et al., 2002, p. 15). Consequently, victims and/or their relatives should not only be told about the existence and functioning of support services (cf. passively informing), but must be supported to get in touch with them as well (cf. actively informing; Herbert et al., 2015, p. 20). A lack of active referrals is even found to be the single greatest barrier to victim's ability to access support services (Victim Support Europe, 2013, p. 19). Accordingly, article 4 of the European Directive 2012/29/EU is linked to article 8§2, stating that the competent authorities who received a complaint or any other relevant entities should facilitate the referral of victims to victim support services. Together, both articles thus indicate that competent authorities do not only have to ensure victims are informed about the availability of support, victims have to be asked whether they want to be contacted by support services as well (European Commission DG Justice, 2013, p. 14).

Victim Support Europe (2013, p. 19, 61) distinguishes between two systems that are applied by countries to respond to the obligation of referral of victims of crime in general: the 'opt-in' and 'opt-out' system. In short, an opt-in system requires the police to ask the victim whether or not (s)he would like to access a support service. If the victim agrees, a referral will be undertaken. Several risks are related to this system. First, the competent authorities have a margin of discretion to determine whether a certain victim is in need of such support or not. This is a risk since all victims react differently in the aftermath of a crime which makes such determination difficult and prone to errors. The responses can also change considerably days, weeks and months after the crime. Another threat concerns authorities not giving appropriate information due to not being fully informed about the range of services. Finally, the way the question is asked might deter victims from taking up the support (e.g. "You don't need any support services, do you?" or "Are you not coping?"). In the second, opt-out, system all victims (or all victims of a specific crime) are referred automatically to victim support services – unless they actively deny. Subsequently, the service contacts the victim through an out-reaching approach and offers support.

The literature on victims of RTOs seems to prefer the 'opt-out system'. Christie et al. (2007, p. 5), in their study concerning the development of support services for victims of RTOs, have for instance found that support should be provided as soon as possible through a proactive approach in which referral is recommended. In addition, a persistent approach was valued by victims in hindsight, since some persons who initially declined changed their mind later (Christie et al., 2007, p. 4). Also in the context of the Flemish 'States-General for the support of victims of road traffic offences', the establishment of a broader automatic referral system was mentioned (Flemish Parliament, 2007). If, however, the 'opt-in system' is being integrated, its problems might be tackled partially by urging police officers to assess whether referral to (psychosocial) assistance is necessary at the moments of recontact (Flemish Parliament, 2007, p. 65). By systemising and generalising these moments, the needs of victims/relatives can be evaluated at different stages of the period of grief.

Irrespective of the referral system that is chosen by a member state, national and local referral arrangements should be established (including simple referral protocols) to ensure that all victims are at least offered support (European Commission DG Justice, 2013, p. 27; Hutsebaut et al., 2016, p. 14). In this context, it is necessary to deal with constraints constituted by personal-data protection rules and with the lack of training of personnel of different agencies on the importance of support and referral to appropriate services (European Commission DG Justice, 2013, p. 27; Janssens, 2009–2010, p. 49). A solution for the absence of knowledge concerning the existing support services could be the creation of social maps with referral addresses for these services or the establishment of one central contact point specialised in the referral to the appropriate victim support services that can be contacted by several services like the police or the hospital's social service. These instruments should be applied specifically to the situation of RTOs, since these victims often need more specialised care, for instance related to an acquired brain injury (Hutsebaut et al., 2016, p. 10; Flemish Parliament, 2007, p. 17).

### II.1.3 Support

The mere provision of information about support is insufficient and concrete assistance in referring road traffic victims and their relatives to the appropriate services is recommended. Additionally, research has indicated that ensuring victims to obtain this support at an early stage after the crime is important since it seems to reduce the medium and long-term consequences for the individual (European Commission DG Justice, 2013, p. 24). Despite its importance, in reality support for victims of RTOs and/or their relatives is often insufficient. As a result, the coping process can be hampered and secondary victimisation can occur (Aertsen et al., 2002, p. 271; Broucker & Defever, 2007, p. 11; Feys, 2016, p. 16).

In the final section of this part, the availability of support for victims of RTOs and/or their relatives is outlined. First, the framework in which victim support services operate is presented, based on the European Directive in general and research on RTOs in specific. Afterwards, the other services that (should) fulfil a supportive role are discussed.

### *II.1.3.1 Victim support services: the framework...*

In the European Directive 2012/29/EU, two articles provide a framework for victim support services. Article 8 states that victim support should be made available as soon as possible and irrespective of whether the crime is reported. In addition, support should be accessible both during the proceedings and an appropriate time afterwards, depending on the victim's needs.

Specialist support services should be developed as well to respond to specific needs potentially deriving from certain types of crime (European Commission DG Justice, 2013, p. 25). Article 9 outlines the tasks of victim support services should fulfil. In short, these services should provide information and advice on the rights of victims, inform and/or directly refer victims to relevant specialist support services, offer emotional and psychological support and deliver practical and financial assistance for issues arising from the crime.

Research stresses three additional tasks and perspectives support services for road traffic victims and/or their relatives should consider. First of all, the literature emphasises the importance of guaranteeing all victims access to support. Thus, aside from the (seriously) injured victims, their relatives and the family of the bereaved victims should also have the possibility to rely on victim support (Herbert et al., 2015, p. 39). Second, an integrated and coordinated approach to road traffic victims of all involved support services from the beginning of the assistance process on, is perceived necessary (Flemish Parliament, 2007, p. 41). The concrete and individual content of this approach should be flexible since the needs of victims and relatives usually change over time (Christie et al., 2007, p. 3). For instance, in the earlier support of victims of RTO, the focus will often be more on the juridical, insurance-technical and practical aspects of the case. Emotional assistance is often more needed after the legal work is concluded (Willebrords, 2009-2010, p. 71). The changing nature of victims' needs also entails that contact should be maintained with victims and/or relatives to ensure that after the 'official' termination of the victim support, the coping process keeps being unproblematic and that no new needs have arisen (Christie et al., 2007, p. 3). The joint approach should lead to a specific proposal for road traffic victims focussing on dealing with all different impacted levels in an integrated way. If this is impossible, at least knowledge of the impact of RTOs is essential to guarantee close assistance, for instance concerning specialised fractures such as acquired brain injury and insurance-technical matters (Flemish Parliament, 2007, p. 41; Hutsebaut et al., 2016, p. 10). Third, special attention should be paid to the (lack of) informal support by the direct environment. Owing to the trivialisation of RTOs (supra), the environment of the victim and/or relatives is often not aware of the drastic character of the consequences endured and experiences difficulties with reacting properly. Since this can hamper the coping process and lead to secondary victimisation, professionals should be aware of and anticipate on this matter (Feys, 2016, p. 16; Flemish Parliament, 2007, p. 22).

The victim support services, as mentioned in art. 8 of the European Directive 2012/29/EU, may be set up as a public or non-governmental organisation and may be organised on a professional or voluntary basis (§4). The research of Herbert et al. (2015, p. 29) shows that in the majority of FEVR countries, NGO's fulfil the role of victim support services. Some are run by volunteers, some by professionals and others by both. All services, irrespective of how they are organised, should be independent of the criminal justice authorities and should only focus on the interest and needs of the victim (Victim Support Europe, 2013, p. 33).

### *II.1.3.2 ... insufficient to take responsibility for all support*

Apart from victim support services, other authorities fulfil assisting roles as well (Flemish Parliament, 2007, pp. 23–24). Taking up such a supportive role often is a result of other articles in the European Directive 2012/29/EU, such as the right to understand or be understood (art. 3), the right for information from the first contact with a competent authority (art. 4), the right to receive information about their case (art. 6) and the right to access victim support (art. 8). However, whether such role is adopted varies widely between different service providers and even within some agencies. In the following, a short overview of the supportive tasks of different authorities is presented. By doing so, the fact support is more far-reaching than just a part of the framework of the victim support services is stressed.

First of all, the police have an important role in supporting victims of RTOs. They are often the first professionals victims and/or their (bereaved) family members encounter. In this contact, they should offer direct support and potentially carry out an acute referral to other services. The supportive role emerges during the moment of recontact as well (Aertsen et al., 2002, p. 271). In Belgium, a special victim assisting service exists within the police structure. This service adopts various of the above-mentioned tasks, but each individual police officer must also take his/her responsibility towards victims (Flemish Parliament, 2007, p. 61). The organisation of this service and the actual scope of activities it carries out, however, varies from district to district (Hutsebaut et al., 2016, p. 34). This lack of clarity sometimes causes an overlap with the sector of the more general victim support services and, hereby, creates confusion among the target group when contacted by both agencies. In other districts a gap between this police services and the victim services exists, leaving certain victims and their relatives without any support. The community police officer is also pointed out as being vital the support of victims. (S)he can function as an intermediate between the victim and/or (bereaved) relatives and the police (Flemish Parliament, 2007, p. 65). Whether and how this role is applied in this way varies widely as well.

Support can also be provided at the level of the judicial process, but the concrete way in which this is implemented often differs between judicial districts. In any case, in all Belgian districts a 'justice assistant' will contact seriously injured road traffic victims or the bereaved relatives to offer support throughout the judicial process (Victim Support Europe, 2013, p. 26).

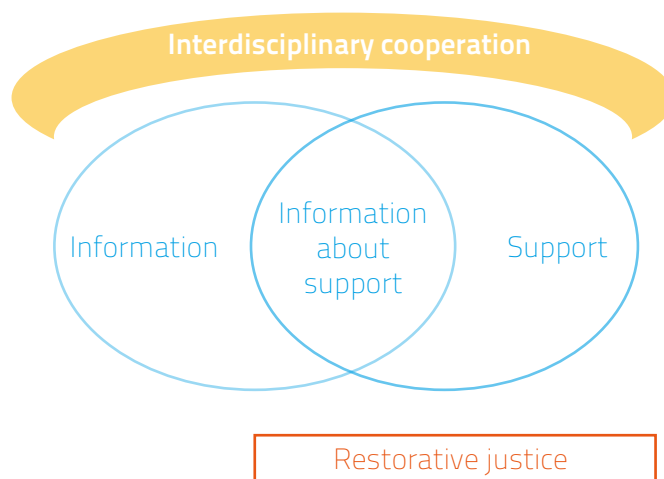
Finally, the medical sector adopts a supportive role as well. Some hospitals, for instance, ensure a psychosocial permanence and create a model where every victim receives a conversation in which psychosocial assistance is offered (Flemish Parliament, 2007, p. 26). In addition, arrangements are sometimes made with revalidation centres to continue this support. Family doctors have an important role in supporting victims as well. However, again, whether these providers within the medical sector offer such support varies greatly—and often it is found to be insufficient (Hutsebaut et al., 2016, p. 9).

The establishment of a clear cooperation between all different services that render support is essential. There is a need for thinking within networks, whereby seamless referral can take place. Only when such networks are established, victims and relatives cannot fall through the meshes (Flemish Parliament, 2007, p. 25). An often-mentioned problem in this context is professional confidentiality which can hinder continuity and cooperation.

## **II.2 Interdisciplinary cooperation**

In the previous parts, the essentiality of cooperation in supporting victims throughout their dealings with

the consequences of RTOs was already mentioned. As presented in **FIGURE 3**, interdisciplinary cooperation<sup>9</sup> can be perceived as overarching to (amongst others) information and support and restorative justice (infra). It is an essential condition for ensuring its provision. In this section, interdisciplinary cooperation is discussed more broadly. A general perspective on cooperation in the context of RTOs is presented and two collaborative models are introduced. A more extensive picture is discussed in the report on interdisciplinary cooperation, another activity within this EU-project.



**FIGURE 3** Schematic presentation interdisciplinary cooperation

### II.2.1 Interdisciplinary cooperation in the aftermath of a RTO: basic considerations

Victims of RTOs and/or their (bereaved) relatives undergo a diversity of consequences. As a result, they cannot rely on only one organisation when handling the impact of the collision (Van Suetendael, 2016–2017, p. 33). The various sectors that can be involved are the police, medical sector (hospitals, revalidation centres, family doctors, health insurance funds), victim support services, insurance companies, juridical authorities (public prosecutor, courts), selfhelp groups, restorative justice services and the educational and employment systems (Herbert et al., 2015).

Secondary victimisation can occur in the contact with every one of these different sectors and the large number of actors makes it unlikely no faults are made (Feys, 2016, p. 18). However, particularly the transition stages – where one has to transit from one (organisation within a) sector to another – are vulnerable for bringing forth secondary victimisation (Maes, Verschuren, Westland, & Hutsebaut, 2009, p. 3). Especially at these moments, cooperation between all different sectors is important.

In the context of interdisciplinary cooperation to support victims of crime, there is a tendency to move away from a categorical approach to specific target groups (such as victims of RTOs) towards a general approach that applies to all categories of victims. In this respect, the concern exists that in pursuing a general

---

<sup>9</sup> Interdisciplinary cooperation is, although often used that way, not a synonym for multidisciplinary cooperation. This will be discussed more thoroughly in other parts of the EU-Project. For now, it is sufficient to know that both types of collaboration rather are on the opposite of the continuum of cooperation. In the context of multidisciplinary cooperation, basic information is exchanged and all involved actors indicate which roles they adopt. Interdisciplinary collaboration, on the other hand, concerns a more active involvement in the domain of other sectors. The actors do not only keep to their own tasks, but also adopt ways of working and give information that would usually be shared by other sectors.



approach, specified knowledge and practice will not be applied when certain types of victims are encountered (Hutsebaut et al., 2016, p. 54). This specified knowledge is, however, vital in dealing with victimisation by RTOs since several rather 'unusual' societal sectors are often involved. Road traffic victims often deal with for instance the medical sector and the insurance companies in the context of receiving compensation for the physical, material and moral damage. Especially concerning the latter feelings of secondary victimisation can occur if the process is not handled sensitively. The moral compensation, for example, is often regarded as 'how much the life of a loved one is worth to society'. A search for a middle ground between accommodating victims of crime similarly without losing an eye for the specified needs certain types of victims have is necessary.

## II.2.2 How to cooperate interdisciplinary?

In the literature on victims of RTOs, several types of interdisciplinary cooperation are (directly or indirectly) discussed. Based on this information, two forms of cooperation are distinguished. The fact that they are discussed separately does, however, not mean they are mutually exclusive. Both are discussed without going into too much detail since the report on interdisciplinary cooperation does so.

### II.2.2.1 The establishment of a protocol

The first cooperation type attempts to deal with the problem that most initiatives to enhance the situation victims of RTO and/or their (bereaved) relatives often stay within a certain sector while an integrated approach is needed (Hutsebaut et al., 2016, p. 54). Therefore, negotiation, cooperation, agreements and protocols should be established between different sectors (Christie et al., 2007, p. 3).

#### a) The protocol's purpose

Protocols have several purposes. First, they encourage the involved services to come to a common understanding of the specific needs of road traffic victims. If such common ground is found, a joint perspective on the goals that should be reached through the interdisciplinary cooperation should be established (Christie et al., 2007, p. 3). Which types of victims are going to be supported and how should the cooperation be promoted to these groups and other not directly affiliated services? The achievement of societal reintegration might, amongst others, be such a goal, both for victims, their relatives and the families who lost someone due to a RTO (Flemish Parliament, 2007, p. 41).

In addition, protocols have to clarify the roles of the collaborating partners and provide a concrete step-by-step plan concerning the tasks of different actors after the crash, on short and long term (Christie et al., 2007, p. 4; Flemish Parliament, 2007, p. 26). A division of responsibilities is necessary to avoid victims are not receiving any support at all (Willebrords, 2009–2010, p. 20). This, however, does not imply total separation is desired. Rather than every sector providing a fully separate service, an integral and coherent victim policy is recommended in which overlap inevitably exists (cf. interdisciplinary instead of multidisciplinary approach; Aertsen & Hutsebaut, 2010, pp. 150–151).

Finally, protocols have to solve confidentiality issues that might occur and, in relation to this, ensure information flow between the different partners (Christie et al., 2007, p.4; Flemish Parliament, 2007, p. 111). Feedback systems on satisfaction of the assistance are necessary to make sure a protocol is not a fixed document which is held onto without questioning its legitimacy (Christie et al., 2007, p. 7).

b) At what level?

The specific arrangement of such protocol for the assistance of victims of RTOs can be situated on two levels that are rather complementary than mutually exclusive.

At a higher, national or regional level, structural agreements should be made about the division of responsibilities and how to make this work. These decisions should enable fluent and effective cooperation on a more local level (Flemish Parliament, 2007, p. 29). In addition, this higher level of cooperation should also be a consulting point for all service who work together in the field (Flemish Parliament, 2007, p. 64). Good practices can be shared – within and between entities – as well (Hutsebaut et al., 2016, p. 35). Examples of cooperation on a higher level are the establishment of councils, for instance at the provincial level, in which important actors of the different services meet regularly (Flemish Parliament, 2007, p. 29).

The local level is responsible for the concrete implementation of the protocol in individual cases. This level needs to create networks based on the general, structural, agreements established on the national/regional level. The creation of such partnerships takes time, especially due to the different backgrounds of all sectors involved in RTOs (Christie et al., 2007, p. 7). Transparent communication, including face-to-face contact, is necessary (Broucker & Defever, 2007, p. 54). Networking can be facilitated through, for instance, training and team-building, regular meetings and the circulation of these minutes afterwards (Christie et al., 2007, p. 3). The existing literature mentions the idea of establishing of a management committee/umbrella organisation that could oversee this cooperation at the case level (Christie et al., 2007, p. 4; Feys, 2016, p. 18). Such committee should be independent from the professionals involved and should make sure collaboration goes well.

c) Strengths and weaknesses

De Langhe (2011-2012, pp. 81-86) examined the strengths and weaknesses of a protocol for the assistance for victims of RTO in a region in Belgium. This analysis is based on the observations of all different partners of the protocol. His study indicates several interesting points concerning working with protocols in the context of victimisation by RTOs.

The use of a protocol is believed to have some important strengths. A protocol enhances knowledge on other organisations and the creation of new networks is promoted. In addition, it can provide a source of motivation owing to a sense of interconnectedness in reaching a common goal and bearing the responsibility for it. The cooperation based on the protocol also allows for existing problems and complaints to be discussed, which underpins its dynamic character. Finally, the protocol's symbolic character – that RTOs are not trivial and deserve to be handled systematically – is perceived as a strength as well. It leads to a persistent consideration of victims of RTO, not only on short-term.

A protocol has weaknesses when too much weight is put on rules and agreements, which is detrimental to its dynamic characteristic. In addition, it often applies only locally – which entails the risk victims of RTO and/or their (bereaved) relatives receive a different treatment depending on where they live or the offence occurs. Furthermore, only when all important actors take part in the cooperation and keep being motivated to do so, good assistance can be obtained. Finally, a protocol is only effective when those involved fulfil their duties and participate in the established networks.

### II.2.2.2 Case management

Case management is another approach to interdisciplinary cooperation, next to the creation of protocols between the relevant sectors. In a Flemish study on how to conceptualise case management for injured victims of RTO, the following definition is established:

*Case management is a kind of process assistance in which persons who are injured due to a road traffic collision and their direct relatives are actively assisted in clarifying their needs for information and assistance, in searching for information and in the creation, coordination and the follow-up of an assistance-package – consisting of possibilities within the social network and, when necessary, professional victim support – that corresponds with their needs and contributes to their reintegration in society and their quality of life. This kind of assistance throughout the trajectory that these persons endure after a road traffic collision is focused on them getting a grip on their life again [translated] (Maes et al., 2009, p. 25).*

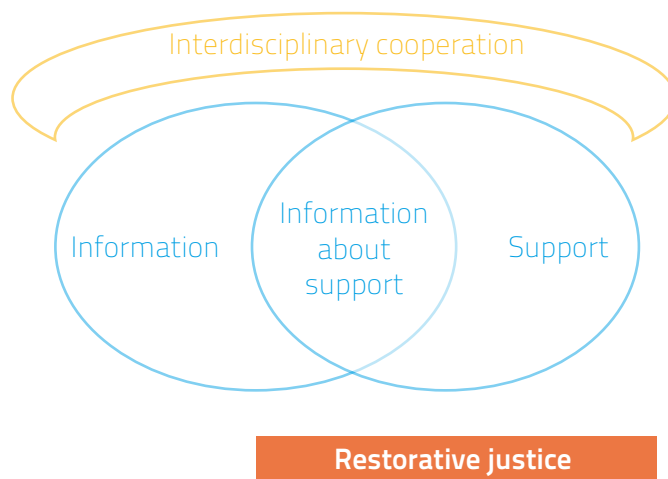
In the context of case management, a case manager guides the victims and their relatives throughout the process and arranges contacts with the necessary actors. (S)he also provides the necessary information – in an individually adapted way and at the right timing (cf. II.1.1.3; Feys, 2016, p. 18). Case managers develop and implement step-by-step plans based on the (often changing) needs of the individuals involved (Christie et al., 2007, p. 4; Hutsebaut et al., 2016, p. 12). The result of case management is a continuity of care whereby particularly the difficult transitions between the involved sectors are assisted (Willebrords, 2009-2010).

The idea of case management for victims of RTOs is interesting but still struggles with issues concerning its concrete implementation (e.g. with regard to its financial implications and long duration). In any case, the project of Maes et al. (2009, p. 81) concluded that case management should be a separate position within an organisation and not implemented in another assisting role. The latter might lead to confusion of the respective roles for the concrete persons but also towards the other sectors. In addition, the model of case management builds upon an active network of organisations – of different sectors – that work together: on their own or as a team in the context of more complex situations (Flemish Parliament, 2007).

## II.3 Restorative justice

Victimisation due to RTOs has a large impact on victims and their direct environment, the authors of the collision and on society in general. The material and emotional consequences are diverse and cannot be solved solely through the classic procedure (Broucker & Defever, 2007, p. 100). RJ can provide an alternative or additional way of coming to terms with the aftermath of RTOs. Hence, it can offer support to various involved parties (see **FIGURE 4**).

This final section of the second chapter aims to provide a general overview of RJ in the context of RTOs. First, the place of RJ in the European Directive 2012/29/EU is discussed. Afterwards, dealing with the consequences of victimisation by RTOs through RJ is elaborated upon. The difference is stated between applying RJ in road traffic cases compared to other types of crime and the intentions of the involved parties to take part in RJ services are outlined. A more detailed picture, accompanied by examples of restorative justice experiences in several countries, is presented in the part on restorative practices in road traffic offences in Europe, which is another activity within the EU-project.



**FIGURE 4** Schematic presentation central topics

### II.3.1 Restorative justice: the (limited) legal framework

In article 2 of the European Directive 2012/29/EU, RJ is defined as “any process whereby the victim and the offender are enabled, if they freely consent, to participate actively in the resolution of matters arising from the criminal offence, through the help of an impartial third party”. More concretely, RJ encompasses several services that can be attached to, run prior to, parallel with or take place after the criminal proceedings (European Commission DG Justice, 2013, p. 32). These services can include for instance victim-offender mediation, family group conferencing and sentencing circles.

Victim Support Europe (2013), in its handbook on the implementation of legislation and best practices for victims of crime in Europe, states that it is important to remember that RJ is not suitable for everyone. Some victims might feel burdened by unwanted responsibility of decision making, may experience fear and/or feel uneasy about seeing the offender. Others might experience disappointment about an inadequate outcome or feel treated disrespected and secondary victimised by the process (Victim Support Europe, 2013, p. 55). Consequently, Article 12 of the European Directive enlists some safeguards concerning RJ to prevent the occurrence of these negative experiences and, potentially, secondary victimisation. For instance, the safety of the victim should be ensured, both parties should voluntarily decide to participate and victims should be informed about the process and its potential outcomes. Especially the latter is important to avoid victims having unrealistic expectations about what can be established. Based on this information, the victim should be able to make informed decisions on whether or not (s)he wants to take part in the procedure.

Finally, article 4 states that the availability of RJ should be informed to victims at the first contact with the competent authorities. The European Commission (2013, p. 33) invites member states to consider establishing referral arrangements for victims looking to participate in RJ services.

### II.3.2 RJ in the context of RTO

RJ services – often ‘victim-offender mediation’ is used – can offer great support for the parties involved in a RTO. When they do not start to communicate spontaneously, a kind of mutual understanding can arise after taking part in RJ. Such understanding can, in its turn, contribute to the rehabilitation of both involved parties in a RTO (Herbert et al., 2015).

### *11.3.2.1 Not just any other form of RJ*

No specified procedure exists concerning RJ in general, and 'victim-offender mediation' in specific, in the context of RTOs (Hutsebaut et al., 2016, p. 48). Nonetheless, special attention to the characteristics of this crime is necessary. Specific recommendations for mediators, related to amongst others the forms of intervention and the establishment of introductory leaflets, could respond to these particularities (Van Suetendael, 2016-2017).

Goossens (2007, p. 17-18) presents three reasons why mediation in the context of road traffic cases differs from other circumstances. First, due to the fact the 'causer-position' is not always that straightforward, the mediator can experience a kind of victim-victim mediation. Since victimisation owing to RTOs often is a result of various contributing factors, it is rather a matter of who is 'more' victim and 'more' offender. When aggravating circumstances are present, this distinction is much clearer. A second important difference is an existing tension between 'culpability' and 'accidentally'. RTOs are often not committed 'on purpose' unlike other crimes that are handled through mediation. However, again, aggravating circumstances lead to a more evident idea of culpability. Finally, several other actors claim a spot in mediation. The process is largely impacted by these actors, such as insurance agents, claiming a position and pursuing their interests.

### *11.3.2.2 I need contact...*

According to research, the involved parties in RTOs experience several emotions such as pain, anger, sorrow, grief, loss and guilt (Rubbens, 2007, p. 8). Several needs exist in relation to these feelings and can be perceived as motives for taking part in the mediation process.

Road traffic victims are in need of information about the collision. They want to know how and why the crash could have happened (Goossens, 2007, p. 15; Van Suetendael, 2016-2017, p. 63). Often victims are not aware of what occurred or, in case of (bereaved) relatives, were not present. Additionally, knowledge of the author and his/her attitudes towards the RTO is perceived to be important (Broucker & Defever, 2007, p. 12; Claes, 2007, p. 15; Rubbens, 2007, p. 8). Are the authors disinterested, do they feel guilty, are they using excuses to explain their behaviour and to what extent has the RTO influenced their life? Victims tend to have a negative image of the author and they want to confirm whether this is genuine (Van Suetendael, 2016-2017, p. 63). In mediation, victims also want to share information about the consequences they have to endure and, in this light, the financial impact of the collision is often discussed (although the concrete arrangements are almost always made through the insurance-technical procedure). Finally, victims hope the process can impact their own coping positively, which would, then, involve a feeling of peace (Van Suetendael, 2016-2017, p. 63).

Authors of RTOs also experience the need for information. They wish to know what the victim's image of him/her and, in reaction to this, show who they really are. Additionally, authors are worried about the victim and the consequences (s)he has to endure, they want to show their sympathy, offer help and answer the victim's questions about the accident (Goossens, 2007, pp. 15-16). Finally, authors often feel guilty (even if they are not legally 'responsible') and from this feeling of guilt they want to restore something for the victim. If the latter succeeds, they often feel better as well. Having contact with the victim is perceived to be important for the author's coping process (Van Suetendael, 2016-2017, p. 71).

### *11.3.2.3... don't I?*

Although mediation can have benefits for both involved parties in RTOs, the personal environment, the po-

lice and public prosecutors, the insurance agencies and lawyers often take a discouraging stance (Rubbens, 2007, p. 8; Goossens, 2007, p. 19). With regard to the personal environment, this reaction is based on fear for the attitude of the other party and the potential (emotional) consequences of the confrontation. The police and public prosecutors are often not duly informed about mediation or its benefits for the involved parties (Broucker & Defever, 2007, p. 101). Finally, insurance agents and lawyers tend to be reluctant to offer or refer to these services out of fear RJ could hamper the negotiations between both parties (Hutsebaut et al., 2016, p. 50). This is rather paradoxical giving the finding of Hulst, Akkermans and Van Buschback (2014) that after a contact has taken place between a road traffic victim and the actor party and apologies have been offered, the handling of the damage through insurance usually proceeds more smoothly.

Aside from the personal environment and professionals who sometimes discourage taking part in RJ services, the involved parties in RTOs perceive other barriers as well. Goossens (2007, pp. 15-17) has, for instance, found that victims are occasionally hesitant in taking part in a mediation due to emotional reasons (being sad and/or angry) or suspicion towards the author of the collision. In addition, Van Suetendael (2016-2017, p. 68-71) has discovered that road traffic victims can be discouraged due to not being acquainted with mediation, out of fear for meeting the other party and experiencing it negatively and because of the timing at which mediation is introduced. Barriers perceived by the authors of RTO are similar. They are hesitant owing to emotional reasons and suspicion towards the victim. Additionally, they fear the victim(s) will make accusations and the mediation will be a continuing discussion about who to blame (Goossens, 2007, pp. 15-17). The actor party might also be hindered due to being afraid of the reaction of the victim (Van Suetendael, 2016-2017, p. 74).

The (limited) practice of mediation in the context of RTO indicates the step to take part in this process indeed is painful, difficult and heavy. However, this practice also shows mediation is satisfactory and contributes to feeling supported and recognised (Rubbens, 2007, p. 9). The direct (face-to-face) or indirect (most often whereby the mediator goes back and forth between the victim and the author, but also by letter or videos) dialog has a potential of restoration, but this is not always achieved. Therefore, the need for assistance by a (neutral) mediator is important (Rubbens, 2007, p. 9).

## CONCLUSION

The summary of existing knowledge aims to provide a stepping stone for other activities within the EU-project 'Victims of road traffic offences'. In the first chapter, victimisation by road traffic offences is contextualised and its consequences are outlined. In the context of the EU-project, road traffic victims are defined as 'persons who are victim of criminalisable behaviour on the road, such as involuntary injuries, hit-and-run, drunk driving and excessive speed driving'. This definition entails, aside from the direct victims, also close relatives of those directly victimised. Road traffic victims (but see I.1.1) can benefit from the rights established by the European Directive 2012/29/EU when RTOs are qualified as criminal acts instead of administrative transgressions. In addition, even when they are handled administrative, strategies might be established to still ensure the Directive is applicable (e.g. the assumption of victimhood in the Netherlands). The existence of the discussion whether RTOs are perceived as 'real crime' does not imply their impact on victims is only limited. In fact, the consequences are far-reaching, exist on different levels (physical, psychological and socio-economical) and are present on short, medium and long term. Rather, (victimisation by) RTOs suffer(s) from a societal trivialisation, at the level of the general public, legislation and among professionals. This banalisation can substitute for a feeling of being victimised twice: by the RTO and by those who are encountered in handling its consequences.

The aim of the EU-project is to avoid secondary victimisation among victims of RTOs by focussing on three topics. In the second chapter of this summary, the existing knowledge on these themes is presented. First, the importance of information and support is stressed. Direct and indirect victims of RTOs need clear and correct information on the concrete circumstances of the crash, their rights (e.g. regarding the media and the moment of farewell), the availability/possibility of support, the legal/insurance case and the physical consequences. The way this is communicated is essential. The information should be provided pro-actively, in an understandable and individualised way with specific attention to timing. As to the availability of victim support, the literature states that providing information is often not enough. The involved professionals should also actively refer victims to support services. This is important due to the passive nature of help-seeking behaviour of victims. In addition, support should not only be provided by specific victim support services. The responsibility to uphold a supportive role also lies with other involved actors.

In order to achieve full and seamless support for victims of RTOs, interdisciplinary cooperation between the different sectors is essential. Regarding this second core theme of the EU-project, different types of cooperation are discussed and several central principles are outlined. The establishment of collaboration is difficult due to the different sectors involved with various backgrounds. However, an intersectoral protocol and/or a system of case management provides promising solutions, although they still need further elaboration. It remains unclear whether a specific collaboration for road traffic victimisation should be established, or whether road traffic victims should be approached more generally together with victims of other crimes. Such question will, amongst others, be explored more thoroughly in the report on interdisciplinary cooperation.

The third core theme of the EU-project concerns the restorative justice approach to RTOs. RJ, and more specific victim-offender mediation, can be promising for the involved parties. Through direct or indirect mediation, information and a personal perspective on what happened can be shared and feelings of concern and guilt can be expressed. However, all too often, RJ seems to be discouraged by the personal and/or professional environment. In addition, the involved parties experience barriers that prevent them from taking part in

mediation. (Limited) practice shows that, although the process is difficult, painful and heavy, mediation can lead to a sense of restoration. More detailed information on RJ and its implementation in different member states is presented in the report on restorative practices in road traffic offences in Europe.



# BIBLIOGRAPHY

## Regulation

Directive 2012/29/EU of the European Parliament and of the Council of 25 October 2012 establishing minimum standards on the rights, support and protection of victims of crime, and replacing Council Framework Decision 2001/220/JHA, *Pb.L 14 november 2012, afl. 315, 57.*

## Literature

- Aertsen, I., Christiaensen, S., Hougardy, L., & Martin, D. (2002). *Vademecum Politie Slachtofferbeweging* [Vademecum Policial Victim Support]. Ghent: Academia Press.
- Aertsen, I., & Hutsebaut, F. (2010). *Kinderen als slachtoffer van het verkeer: onderzoek naar de noden, behoeften en ervaringen van verkeersslachtoffers en hun nabestaanden* [Children as victims of traffic: a study on the needs and experiences of road traffic victims and their bereaved relatives]. Brussels: Academic and Scientific Publishers.
- Biffi, E., Mulder, E., Pemberton, A., Santos, M., Valério, M., Vanfraechem, I., & Van der Vorm, B. (2016). *IVOR Report: Implementing Victim-Oriented Reform of the criminal justice system in the European Union*. Lisbon: Associação Portuguesa de Apoio à Vítima.
- Broucker, M.-R., & Defever, C. (2007). Verkeersveiligheid en verkeersslachtoffers: ontwikkelingen op federaal niveau [Road traffic safety and road traffic victims: developments at the federal level]. *Nieuwsbrief Suggnomè*, 4/07, pp. 10-13.
- Christie, N., Simmons, R., Slaney, J., Bowyer, E. (2007). *Evaluation of the development of support services for victims of road traffic incidents*. London: Ministry of Justice.
- Claes, B. (2007). Getuigenis over bemiddeling na een verkeersongeval [Testimony of mediation after a road traffic accident]. *Nieuwsbrief Suggnomè*, 8(4), pp. 20-22.
- De Langhe, M. (2011-2012). *Evaluatie van het samenwerkingsprotocol verkeersslachtoffers in de politiezone Vlaamse Ardennen* [Evaluation of the cooperation protocol road traffic victims in the police district Vlaamse Ardennen] (Master thesis). KU Leuven: Faculty of Law.
- DG Mobility and Transport. (2017a). *Statistical Pocketbook 2017: EU transport in figures*. Luxembourg: Publications Office of the European Union.
- DG Mobility and Transport. (2017b, 11 6). *Road Safety*. Consulted on: [https://ec.europa.eu/transport/road\\_safety/specialist/statistics\\_en](https://ec.europa.eu/transport/road_safety/specialist/statistics_en).
- D'Hondt, P. (2013). De behandeling van dodelijke verkeersongevallen: een draaiboek [The treatment of deadly road traffic accidents: a roadmap]. In F. Hutsebaut, F. Goossens, & F. Verbruggen (Eds.), *Profs over proffen: wenken vanuit het werkveld bij het afscheid van een academicus* (pp. 285-291). Brussels: Politeia.
- Dignan, J. (2005). *Understanding victims and restorative justice*. London: Open University Press.
- European Commission DG Justice. (2013). *DG Justice Guidance Document related to the transposition and implementation of Directive 2012/29/EU of the European Parliament and of the Council of 25 October 2012 establishing minimum standards on the rights, support and protection of victims of crime, and replacing Council Framework Decision 2001/220/JHA*. Consulted on: <https://e-justice.europa.eu/fileDownload.do?id=05758a3a-9e2e-49a5-a7ec-3737c3ad6876>

- Feys, Y. (2016). Secundaire victimisatie binnen de strafrechtsketen: wat met nabestaanden van levensde licten? [Secondary victimisation within the criminal justice system: what about bereaved relatives of life offences?] *Handboek Politiediensten*, 120(231), pp. 3-25.
- Flemish Parliament. (2007). *Voor een betere opvang en begeleiding van verkeersslachtoffers. Rapport van de stuurgroep aan de Staten-generaal* [For a better support and assistance of road traffic victims. A report of the steering group to the States-General]. Brussels: Flemish Authority.
- Goossens, E. (2007). Herstelbemiddeling naar aanleiding van een dodelijk verkeersongeval. [Mediation after a deadly road traffic accident]. *Nieuwsbrief Suggnomè*, 8(4), pp. 14-19.
- Herbert, F., Kinable, H., Aeron-Thomas, A., & Westland, G. (2015). *Survey of the transposition and the implementation of the European Directive 2012/29/EU on the rights, support and protection of victims of crime in different Member States of the EU from the point of view of road victim associations*. Consulted on website Rondpunt: [https://rondpunt.be/medialibrary/FEVR%20report%20EU-directive\\_345.pdf?download=true](https://rondpunt.be/medialibrary/FEVR%20report%20EU-directive_345.pdf?download=true).
- Hulst, J.E., Akkermans, A.J. & van Buschbach, S. (2014). *Excuses aan verkeersslachtoffers. Een onderzoek naar baten, effectiviteit en methode van het bevorderen door verzekeraars van het aanbieden van excuses aan verkeersslachtoffers*. Den Haag: Boom Lemma uitgever.
- Hutsebaut, F., Schepers, J., Vandendaele, N., & Westland, G. (2016). *Rapport van de Vlaamse Staten-Generaal voor een betere opvang en begeleiding van verkeersslachtoffers, 16 februari 2007. Implementatie van de aanbevelingen: een stand van zaken* [Report of the Flemish States-General for a better support and assistance of road traffic victims, 16 February 2007. Implementation of the recommendations: state of affairs].
- Janssens, N. (2009-2010). *De mogelijke rol van de wijkinspecteur inzake de opvang van verkeersslachtoffers* [The potential role of the community police officer concerning the support of road traffic victims] (Master thesis). KU Leuven: Faculty of Law.
- Maes, B., Verschuren, J., Westland, G., & Hutsebaut, K. (2009). *Eindverslag 'Conceptontwikkeling trajectbegeleiding voor gewonde verkeersslachtoffers'* [Final report 'concept development casemanagement for injured road traffic victims']. Leuven: KU Leuven: Faculty of Psychology and Educational Science.
- Meelberghs, M. (2009-2010). *Verkeersslachtoffers en persberichtgeving* [Road traffic victims and news provision] (Master thesis). KU Leuven: Faculty of Law.
- Meunier, J.-C., & Dupont, E. (2017). *Themadossier verkeersveiligheid nr 10. Menselijke impact van verkeersongevallen* [Thematic file road traffic safety nr 10. Human impact of road traffic accidents]. Brussels: Belgisch Instituut voor de Verkeersveiligheid – Kenniscentrum Verkeersveiligheid.
- Mohan, D. (2003). Road traffic injuries – a neglected pandemic. *Bulletin of the World Health Organization*, 81 (9), pp. 684-685.
- Roadpeace. (2011). *It's a crash, not an accident: Ending a language of neglect and denial*. Consulted on: <http://www.roadpeace.org/wp-content/uploads/sites/19/2017/10/Crash-not-Accident-May-11-2011.pdf>.
- Rondpunt. (n.d.). *Als het verkeer je raakt. Praktische gids na een verkeersongeval* [When you are hit by traffic. A practical guide after a road traffic accident]. Berchem: Rondpunt.
- Rubbens, A. (2007). Naar een betere opvang van verkeersslachtoffers: ontwikkelingen op Vlaams niveau [To a better support of road traffic victims: developments at the Flemish level]. *Nieuwsbrief Suggnomè*, 8(4), pp. 3-9.
- Van Suetendael, M. (2016-2017). *Beweegredenen van betrokkenen bij een verkeersongeval om al dan niet deel te nemen aan bemiddeling: een theoretisch en empirisch onderzoek* [Motives of the persons involved in road traffic accidents whether or not to take part in mediation: a theoretical and empirical research] (Master thesis). KU Leuven: Faculty of Law.

- Victim Support Europe. (2013). *Handbook for Implementation of Legislation and Best Practices for Victims of Crime in Europe*. Brussels: Victim Support Europe.
- Weijermars, W., Meunier, J.-C., Bos, N., Perez, C., Hours, M., Johannsen, H., . . . et al. (2017). *Physical and psychological consequences of serious road traffic injuries. Deliverable 7.2 of the H2020 project SafetyCube*. Consulted on: <https://www.safetycube-project.eu>.
- Willebrords, S. (2009–2010). *De evaluatie van de werking van de diensten Slachtofferhulp inzake verkeersslachtoffers* [An evaluation of functioning of the victim support services concerning road traffic victims] (Master thesis). KU Leuven: Faculty of Law.

**This summary is one of the outcomes of the project 'Victims of Road Traffic Offences', funded by the Justice Programme of the European Union (JUST/2015/JACC/AG/VICT/9276).**

Project partners

**Moderator vzw, Forum for restorative justice and mediation  
Leuven Institute of Criminology, University of Leuven  
Rondpunt vzw, Centre of expertise and ally after a road traffic crash**

Associate partners

**Victim Support Europe  
European Federation of Road Traffic Victims  
European Forum for Restorative Justice**

**Information on the project: [www.rondpunt.be/projecten/eu-project-victims-of-road-traffic-offences/](http://www.rondpunt.be/projecten/eu-project-victims-of-road-traffic-offences/)**

*This publication has been produced with the financial support of the Justice Programme of the European Union. The contents of this publication are the sole responsibility of the author and can in no way be taken to reflect the views of the European Commission.*

