

From Complaint to Care: Understanding the Social Work Journey within Police-Based Women Support Services

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Abstract

Women approaching police services for domestic violence, harassment, family conflict, sexual violence, stalking, threats and other forms of vulnerability often require support extending beyond legal and law-enforcement responses. Social work intervention can provide psychosocial assessment, counselling, crisis intervention, safety planning, advocacy, referral and follow-up support. However, the experiences of women and the perspectives of police personnel and social workers regarding this integrated intervention remain insufficiently explored. The present qualitative study aims to understand the journey of women from initial police complaint to social work intervention, referral, follow-up and continuing care. An exploratory qualitative design will be adopted. Purposive sampling will be used to recruit women service users, social workers/counsellors and police personnel associated with police-based women's support services. Data will be collected through semi-structured in-depth interviews and analyzed using reflexive thematic analysis. The proposed analysis focuses on the processes through which women enter support systems, experience police and social work responses, negotiate professional and family relationships, access referral services and experience continuity of care. The anticipated themes include entering the system, being heard and recognized, transition from complaint to care, the social worker as a bridge, negotiating professional boundaries, safety beyond the police station, continuity of care and movement from protection towards empowerment. The study seeks to contribute to social work practice by identifying mechanisms for strengthening police–social work collaboration and developing a more integrated, woman-centered response to crisis and violence.

Keywords: Police-based social work, women support services, social work intervention, police–social work collaboration, counselling, crisis intervention, qualitative research, thematic analysis.

1. Introduction:

Police services represent one of the most important institutional points of contact for women experiencing violence, harassment, threats and other forms of vulnerability. For many women, approaching the police is not merely a legal decision but also an attempt to obtain safety, recognition, guidance and access to resources. The initial complaint may therefore represent the beginning of a much broader psychosocial journey.

Traditional approaches to policing tend to emphasize law enforcement, investigation, protection and maintenance of public order. However, women's experiences of violence and crisis frequently involve

interconnected psychological, social, economic, familial and legal dimensions. A woman experiencing domestic violence, for example, may simultaneously face emotional distress, economic dependence, family pressure, concerns regarding children, housing insecurity and uncertainty about legal procedures. Addressing such circumstances requires interventions that extend beyond the immediate police response. Social work offers a complementary professional framework. Social workers can undertake psychosocial assessment, provide counselling, facilitate communication, support decision-making, connect women with appropriate services and promote access to resources. They may also act as a bridge between women and multiple institutional systems, including police, healthcare, legal services, shelter services and community organizations.

The relationship between police and social work is therefore potentially significant. Police personnel may provide immediate protection and legal intervention, while social workers may address psychosocial and social dimensions of the woman's situation. Effective collaboration between these professional groups can create a more comprehensive response.

However, the intervention process should not be understood only from the perspective of institutions. The woman's own experience is central. A service may formally provide counselling or referral, yet the woman may experience barriers related to communication, trust, confidentiality, family pressure, accessibility or continuity of care.

The concept of “**From Complaint to Care**” captures this entire journey. It shifts attention from the complaint as an isolated event towards the continuum of support that may follow **complaint → assessment → counselling → safety planning → referral → follow-up → rehabilitation and empowerment**.

The present qualitative study therefore explores this journey through the perspectives of three interconnected groups: women service users, social workers/counsellors and police personnel.

2. Review of Literature

2.1 Women and Police Services

Police institutions are often the first formal mechanism through which women seek protection when experiencing violence or threats. The nature of the initial police response can influence subsequent help-seeking and engagement with formal support systems.

Research on policing and violence against women has highlighted the importance of accessibility, respectful communication, procedural fairness and responsiveness. A woman's interaction with police can influence her willingness to continue seeking institutional support.

The literature also indicates that women's needs are not exclusively legal. Women may require emotional support, information, safety planning, healthcare, shelter and economic or community resources.

2.2 Social Work Intervention with Women Experiencing Violence

Social work intervention adopts a multidimensional approach to women experiencing violence and crisis. Common interventions include:

- psychosocial assessment;
- individual counselling;
- crisis intervention;
- family intervention;
- safety planning;
- advocacy;

- legal and service referral;
- resource mobilization;
- follow-up;
- rehabilitation;
- empowerment.

The person-in-environment perspective is particularly relevant because women's experiences are influenced by family relationships, economic circumstances, community structures and institutional systems.

2.3 Police–Social Work Collaboration

Police and social workers have different professional mandates. Police personnel primarily operate within legal and institutional frameworks, while social workers emphasize psychosocial functioning, empowerment, advocacy and social resources.

Collaboration between these professionals can create opportunities for complementary intervention. Police personnel may identify psychosocial needs and facilitate referrals, while social workers may help women understand available options and access additional services. At the same time, differences in professional priorities can create challenges involving:

- confidentiality;
- information sharing;
- role boundaries;
- family intervention;
- women's autonomy;
- institutional expectations;
- case follow-up.

2.4 Counselling in Police-Based Women's Services

Counselling can provide women with a confidential space to communicate concerns, understand options and process emotional experiences. In police-linked settings, counselling may also facilitate communication between women and police personnel.

However, counselling within institutional settings requires clear professional boundaries. The social worker or counsellor must balance institutional requirements with ethical principles such as confidentiality, informed consent, self-determination and respect for the service user's autonomy.

2.5 Crisis Intervention and Safety Planning

Women approaching police may be experiencing immediate or continuing threats. Social work crisis intervention may therefore involve:

1. identifying immediate risks;
2. assessing available support;
3. developing a safety plan;
4. facilitating emergency referrals;
5. connecting the woman with appropriate services;
6. arranging follow-up.

Safety planning is particularly relevant because intervention should not end with the immediate police complaint.

2.6 Continuity of Care

A significant issue in integrated intervention is what happens after the initial response.

A woman may receive counselling on one occasion but still require:

- continuing psychosocial support;
- medical assistance;
- legal guidance;
- shelter;
- financial assistance;
- family support;
- employment-related assistance;
- rehabilitation.

Therefore, continuity and follow-up represent important components of social work intervention.

2.7 Research Gap

Although existing literature has examined violence against women, policing, counselling and social work separately, there remains a need to understand the **complete service journey across professional boundaries**. The present study addresses this gap by examining the experiences and perspectives of: **Women + Social Workers + Police Personnel within** a single qualitative framework.

3. Methodology

3.1 Research Approach

The study adopts a **qualitative research approach**.

The qualitative approach is appropriate because the study seeks to understand experiences, meanings, perceptions, professional relationships and intervention processes.

3.2 Research Design

An **exploratory qualitative design** will be adopted.

3.3 Research Paradigm

The study will be located within an **interpretivist paradigm**, recognizing that participants construct meanings based on their experiences and social contexts.

3.4 Study Setting

The study may be conducted in selected **police-based women's support services, women police stations, counselling centers and associated support organizations in Bengaluru**.

3.5 Participants

Three participant categories will be included:

Category	Proposed sample
Women service users	12–15
Social workers/counsellors	10–12
Police personnel	10–12
Total	32–39

Final recruitment will be guided by information power and thematic sufficiency.

3.6 Sampling

Purposive sampling will be used to identify participants with direct experience of the phenomenon. Maximum variation may be used to capture diverse experiences.

3.7 Data Collection

Data will primarily be collected through:

- semi-structured in-depth interviews;
- key-informant interviews where appropriate;
- limited observation of service processes, where permitted.

Each interview may take approximately **40–60 minutes**.

3.8 Data Analysis

The data will be analyzed through **reflexive thematic analysis**. The process will involve:

1. familiarization;
2. transcription;
3. initial coding;
4. grouping related codes;
5. development of candidate themes;
6. review of themes;
7. definition and naming of themes;
8. interpretation.

3.9 Ethical Considerations

The study will ensure:

- informed consent;
- confidentiality;
- voluntary participation;
- right to withdraw;
- secure data storage;
- privacy during interviews;
- trauma-sensitive interviewing;
- avoidance of unnecessary probing;
- appropriate referral mechanisms when distress arises.

4. Thematic Findings

Important: Because this is a proposed qualitative study rather than a completed dataset, the following should be presented as **anticipated/emerging themes or a thematic framework**, not as fabricated empirical findings. Once interviews are completed, participant quotations and final themes should replace these proposed findings.

Theme 1: Entering the System – From Crisis to Complaint

Women may describe the decision to approach police as a significant turning point. Their initial concerns may include fear, uncertainty, safety and expectations of receiving protection.

Possible subthemes

- hesitation before approaching police;
- expectations of immediate help;
- fear of not being believed;
- uncertainty regarding procedures;
- emotional distress at first contact.

Theme 2: Being Heard – Communication and Recognition

The quality of interpersonal interaction may influence how women perceive the service. Possible dimensions include:

- respectful communication;
- opportunity to explain the situation;
- feeling listened to;
- clarity of information;
- emotional reassurance.

Theme 3: From Complaint to Care

A key analytical issue is the transition from a legal complaint to a broader psychosocial intervention. Social work may be provided:

- counselling;
- psychosocial assessment;
- emotional support;
- crisis intervention;
- safety planning;
- referrals.

The theme examines how the intervention expands from “**What happened?**” to “**What does this woman need now?**”

Theme 4: The Social Worker as a Bridge

Social workers may operate as intermediaries between different systems.

The social worker may connect:

Woman ↔ Police ↔ Family ↔ Legal Services ↔ Healthcare ↔ Shelter ↔ Community

This theme can examine advocacy, communication, referral and coordination.

Theme 5: Negotiating Professional Boundaries

The study may identify differences between police and social work approaches. Police may focus on:

- legal procedures;
- protection;
- investigation;
- immediate safety.

Social workers may focus on:

- psychosocial needs;
- counselling;
- autonomy;
- family and social context;
- rehabilitation.

The qualitative analysis can examine how professionals negotiate these different priorities.

Theme 6: Safety Beyond the Police Station

Intervention may extend beyond the immediate complaint. Possible areas include:

- safety planning;
- emergency accommodation;
- medical referral;
- legal support;
- financial resources;
- family/community support.

This theme highlights the importance of addressing women’s broader social environment.

Theme 7: Continuity of Care – What Happens Next?

A critical question is whether support continues after the initial intervention. Possible issues include:

- follow-up calls;
- repeat counselling;
- referral completion;
- access to external services;
- case closure;
- continuing psychosocial needs.

Theme 8: From Protection to Empowerment

The final analytical theme may explore whether women move from dependence on institutional protection toward increased awareness, choice and agency. Possible indicators include:

- understanding available options;
- confidence in decision-making;
- access to resources;
- stronger support networks;
- increased awareness of rights.

5. Discussion

The proposed study conceptualizes police-based women's support not as a single institutional encounter but as a **continuum of care**.

The first important issue is the transition from **complaint to comprehensive intervention**. A complaint may identify a legal problem, but the woman may simultaneously experience psychological distress, social isolation, family conflict, economic insecurity and safety concerns. Social work provides a professional mechanism for identifying these interconnected needs.

The second issue concerns **professional complementarity**. Police personnel and social workers operate from different professional orientations. Rather than viewing these differences solely as barriers, the study can examine how their respective expertise may contribute to a more comprehensive response.

The third issue concerns **women's voices**. Institutional assessments of service effectiveness may differ from women lived experiences. A qualitative methodology therefore provides an opportunity to understand how women themselves interpret communication, counselling, referrals and follow-up.

The fourth issue is **continuity of care**. Effective intervention may require support beyond the immediate police encounter. Referral mechanisms and follow-up therefore become important components of social work practice.

The fifth issue concerns **empowerment and autonomy**. Social work intervention should ideally support women in understanding their options and making informed decisions rather than simply directing them toward predetermined outcomes.

Discussion

The study highlights that women's interaction with police-based support services should be understood as a journey from **complaint to care**, rather than as a single legal or administrative process. Women approaching police may experience multiple needs, including safety, emotional support, counselling, legal guidance, family assistance and access to social resources. The proposed themes indicate that the initial

police contact can serve as an important entry point for psychosocial assessment and social work intervention.

The role of social workers is particularly important in bridging the gap between police procedures and women's psychosocial needs. Social workers can provide counselling, crisis intervention, safety planning, advocacy, referral and follow-up support. Effective collaboration between police personnel and social workers can therefore facilitate a more comprehensive response to women's needs. However, differences in professional roles, confidentiality, information sharing and institutional expectations may create challenges that require clear protocols and professional boundaries.

The study further emphasizes the importance of **continuity of care**. Referral alone may not be sufficient; women may require follow-up, continued counselling, healthcare, legal assistance, shelter or livelihood support. A woman-centered approach should respect autonomy, informed decision-making, dignity and safety while recognizing the influence of family and community contexts.

Overall, the proposed **Complaint-to-Care Continuum—complaint, assessment, counselling, safety, referral, follow-up and empowerment**— provides a useful framework for strengthening police–social work collaboration. Integrating social work expertise within police-based women's support services can contribute to a more holistic and coordinated response that addresses not only immediate protection but also women's longer-term psychosocial and social needs.

6. Social Work Intervention Framework

Based on the proposed study, a **Police-Based Integrated Social Work Intervention Model** can be developed.

Stage 1: Engagement

Objective: Establish trust and psychological safety.

Interventions:

- active listening;
- rapport building;
- non-judgmental communication;
- explanation of available services.

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Stage 2: Psychosocial Assessment

Assess:

- immediate safety;
- emotional state;
- family environment;
- social support;
- economic circumstances;
- children/dependents;
- health needs;
- legal/service needs.

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Stage 3: Crisis Intervention

- immediate emotional support;
- risk identification;

- safety planning;
- emergency referrals;
- crisis counselling.

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Stage 4: Individual Social Work Intervention

- counselling;
- problem-solving;
- strengths identification;
- advocacy;
- information provision;
- decision-support.

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Stage 5: Family and Social Intervention

Where appropriate and safe:

- family counselling;
- mediation/communication support;
- strengthening social networks;
- community resource mobilization.

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Stage 6: Referral and Networking

Link women with:

- legal services;
- healthcare;
- shelter;
- financial assistance;
- employment/skill development;
- NGOs;
- child-related services;
- other appropriate community resources.

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Stage 7: Follow-up

- telephone follow-up;
- counselling review;
- referral tracking;
- reassessment of safety;
- identification of emerging needs.

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Stage 8: Empowerment and Rehabilitation

- strengthening decision-making;
- resource access;
- social support;
- livelihood linkage;
- self-confidence;

- long-term rehabilitation.

7. Implications for Social Work Practice

The study can support the development of a more clearly defined **social work role within police-based women's services**.

1. Professional role clarity

Clear protocols can define the responsibilities of police personnel, social workers and counsellors.

2. Joint training

Police personnel and social workers can receive interdisciplinary training in:

- trauma-informed practice;
- gender-sensitive communication;
- crisis intervention;
- suicide/self-harm risk identification;
- child-sensitive practice;
- confidentiality;
- referral systems.

3. Standardized psychosocial assessment

A structured social work assessment can help identify needs that may not emerge through the legal complaint alone.

4. Safety planning

Every appropriate case can include an individualized safety assessment and plan.

5. Referral network

Police-linked social workers can maintain updated referral directories covering:

health + legal + shelter + livelihood + counselling + community services.

6. Follow-up mechanism

A systematic follow-up mechanism can help prevent the service journey from ending with the initial complaint or counselling session.

7. Documentation

Social work documentation should distinguish:

- factual information;
- professional assessment;
- intervention;
- referral;
- follow-up;
- participant's own decisions.

8. Women-centered practice

The intervention should respect:

- dignity;
- confidentiality;
- informed choice;

- autonomy;
- safety;
- non-discrimination.

8. Conclusion

“From Complaint to Care” provides a framework for understanding police-based women's services as a continuum rather than a single point of institutional contact. Women approaching police may require support that extends beyond legal intervention to include psychosocial assessment, counselling, safety planning, advocacy, referral, follow-up and rehabilitation.

A qualitative examination of women service users, social workers and police personnel can illuminate how this continuum operates in practice. It can also reveal areas where professional roles complement each other and where institutional, ethical or communication challenges may interrupt continuity of care.

The central contribution of the study is the positioning of **social work as a bridge between protection and psychosocial care**. Rather than treating the police complaint as the endpoint, the proposed framework views it as a possible entry point into a broader system of support.

The study can therefore contribute to the development of **integrated, woman-centered and multidisciplinary police–social work services**, while maintaining professional ethics, confidentiality, autonomy and continuity of care.

Proposed central model

COMPLAINT → ASSESSMENT → COUNSELLING → SAFETY → REFERRAL → FOLLOW-UP → REHABILITATION → EMPOWERMENT

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