Country Fact Sheets

Women’s CSOs needs assessment to prevent and combat gender-based violence
The study was carried out by INDERA SL at the request of Calala Women’s Fund jointly with the Mediterranean Women’s Fund (MedWF) and the Ecumenical Women’s Initiative (EWI).

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INDERA Gender Consultancy SL is a Spain-based advisory firm working with public and private institutions and civil society organizations facilitating gender responsive change-processes through leadership training, capacity building, research and policy advice.

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Introduction

This study analyses the women’s civil society organisations (CSO) landscape in Albania, Bosnia-Herzegovina, Croatia, Cyprus, France, Greece, Italy, Kosovo, Montenegro, Serbia and Spain. It identifies the challenges women’s CSOs face and their needs to prevent and combat gender-based violence (GBV).

Gender-based violence is a pervasive phenomenon which continues an upward trend throughout both the EU and ascending countries. This situation has been further exacerbated by the recent COVID-19 crisis which has given rise to increasing instances of reported, (as well as under-reported), domestic violence in which a significant proportion of victims are both women and children. Furthermore, the Russian-Ukrainian war has caused massive migratory flows of women and children fleeing for their lives to neighbouring countries. Their increased vulnerability has exposed them to increased risks of GBV and exploitation as they struggle to find a place of safety. Civil Society Organisations (CSOs), in particular women’s CSOs play a crucial role in combating GBV and providing essential support services to victims. However, in the current climate, the critical challenge for CSOs everywhere is securing access to funding streams to enable them to function effectively so they can make a difference regarding GBV.

Women’s CSOs are of particular significance as among all civil society movements, women’s and feminist movements have made the biggest contribution to advancement in our societies. Their combined actions have had a significant impact on public policies, norms, and representations. No other peaceful struggle for social justice has had such an impact on social relations despite the essential role of women’s and feminist CSOs in building a harmonious society, they receive little support. Faced with serious attacks on women’s rights, they are constantly redefining their priorities and must readjust their work, in an incessant process of awareness-raising and advocacy, carried out either in deafening silence or rarely under favourable conditions. These organizations constantly live in a double insecurity: one physical, their detractors - including, sometimes, their governments - can become particularly violent towards them, and the other economic: they have few financial resources. Indeed, 75% of women’s associations in the world have an annual budget of less than 50 000 Euros. Several factors keep them in this situation: their operation on a voluntary basis, the absence of legal recognition in their country, the scarcity of subsidies granted by their own governments, the absence of flexible, multi-annual or dedicated funding for their operations, or their lack of visibility, networking, and language barriers.

Gender-based violence and violence against women and girls

A study in the United Kingdom estimated the costs of gender-based violence (GBV) in 2019 in the UK at 43 435 820 061 Euros. Most of these costs are related to the physical and emotional consequences of violence, the judicial system, as well as health and social services. In 2021, the European Institute for Gender Equality (EIGE) has extrapolated from that study and concluded that the cost of GBV across the EU is 366 billion Euros a year.


Gender-based violence against women represented 79% of all costs of GBV. In this the costs of intimate partner violence against women in the EU-27 was almost 152 billion Euros, representing 87% of all costs of GBV.  

In Europe, statistically, violence against women is far more dangerous to the female population than terrorism or cancer. As many as 45% of European women have been victims of physical and/or sexual violence.  

The magnitude of the GBV phenomenon is such that it has been recognized as a public matter of concern in every country of the EU and has prompted action to combat and prevent it. Each country adopted its own definition of GBV and its own rules to address the issue. Yet, this alone has proved insufficient. As a result, the Council of Europe established the Convention on Preventing and Combating Violence against Women and Domestic Violence, also known as the Istanbul Convention. This Convention is the first international instrument aiming to eliminate violence against women by setting out comprehensive legal and policy measures to prevent such violence and protect and assist victims. Although the interest in financing to advance gender equality and women’s rights has grown over the years, unfortunately there has also been social and political resistance against gender justice in some countries and a severe under-resourcing of the work of women’s CSOs, who have been key actors in advancing the recognition, persecution, criminalization and prevention of VAWG, (Violence Against Women and Girls), as a form of GBV. This is putting the relentless work of women’s activists, who promote gender equality and provide the necessary support for women and children who are victims/survivors of GBV, at risk.

The UN has warned that progress made towards gender equality over a generation could be wiped out with a deepening crisis catalysed by the COVID-19 pandemic. But even before COVID-19, the least financed UN Sustainable Development Goal was Goal 5 on gender equality and the empowerment of women and girls.  

The COVID-19 global crisis has shown again that women’s CSOs have not only been crucial to recovery, but have also been the driving force for social change.

Women have been amongst the most powerful voices and forces in highlighting the emerging vulnerabilities and demanding equitable recovery and gender responsive policies in light of the onsetting pandemic. Although women’s CSOs who call out marginalization and discrimination are often seen as challenging the ‘social order,’ it has been these movements, drawing on their extensive grassroots and advocacy experience, that have revealed the challenges with which vulnerable groups in society are faced.

With the ratification of the Istanbul Convention many EU countries and ascending EU countries have adjusted their legal frameworks accordingly. However, much work needs to be done for this to become a true supporting instrument to women and their diverse realities. A lot of lip service has been paid with strong claims, while inadequate resources have been invested in preventing and combating GBV on the front line. Strong claims do not amount to a lived reality if political will does not translate into financial commitment.

There is an emerging international political consensus about the causes of GBV and what is needed to prevent and combat it, including the necessary services for victims/survivors of GBV. Research shows that responding to violence against women and girls (VAWG) requires multiple interventions due to the dimensions and types of abuse occurring:

A. The legal framework of a country needs to specify that all forms of VAWG are a crime.

B. Shelters, medical, psychological and legal assistance need to be offered to women to support them in leaving violent and abusive relationships. In this regard, specialized services need to address particular vulnerable groups of women such as migrant, refugees, ethnic or racial minorities, women with disabilities, LGBTQI people, etc.

C. Gender-sensitive education and training of professionals (judges, police, social welfare centres, health workers, etc.) on the specific dynamics of GBV and VAWG as well as inter-institutional collaboration are key to improve the attendance and support of the victims/survivors of GBV through these institutions, and,

D. Broad preventive measures have to be applied in public education, social marketing, etc. to address gender stereotypes as a root cause of GBV, including the engagement of men and boys.

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According to UN Women, violence against women remains the most widespread and pervasive human rights violation in the world. However, it is rarely raised as an issue, or given priority without the consistent advocacy work from the women’s and feminist movement. Moreover, due to cultural, social, educational and economic reasons many men and women are not aware of it, are acting against it, or prioritize it. For this reason, women’s CSOs have always played a key role in preventing and combating VAWG, raising awareness about this pervasive form of GBV, and putting it on national and global policy agendas.

Women’s CSOs are essential as “women organizing as women generate social knowledge about women’s position as a group in society. When social groups self-organize, they develop an oppositional consciousness as well as a set of priorities that reflect their distinctive experiences and concerns as a group”.9 They challenge the dominant social gender order and highlight the fact that violence is not a merely a problem of deviated individual behaviour, but a structural problem of concern for society as a whole.

This challenges the view that GBV is just a ‘women’s issue’ subordinate to other, seemingly more important universal goals, such as environmental protection, better wages and working conditions, and employment. This is also reflected in the fact that no GBV index has been harmonized10 across all EU countries. The EIGE Gender Equality Index11 for example does not measure the variable ‘violence’ as it is a non-harmonized category, meanwhile the categories work, money, knowledge, time, power and health are harmonised. There is a need for all countries to get a consensus about the meaning of GBV to define measurable indicators.

Country Needs Assessment

To identify the specific needs of women’s CSOs to prevent and combat GBV and VAWG a needs assessment for the following countries was carried out: Albania, Bosnia-Herzegovina, Croatia, Cyprus, France, Greece, Italy, Kosovo, Montenegro, Serbia, and Spain.

Assessment Methodology

The Methodology adopted consisted of the following phases:

1. Literature Review – a review of the legal and policy framework with respect to GBV in each of the 11 regions listed above. Where available, data relating to current trends were examined to establish context. A review was also carried out of current initiatives at grass-roots level and the project portfolio of EU supported initiatives. This resulted in the Change Activities Model comprising 4 categories of activities which was then used as a baseline for the field research.

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10 For example, Spanish law differentiates between GBV (committed by the male partner or ex-partner of the woman victim against the woman or her minor children) and domestic violence (committed in the home by any member of the family according to Article 173.2 of Spanish Criminal Law). However, the Autonomous Community legislation of Catalunya has extended the concept of GBV, considering any form of violence against women as GBV, including that which occurs outside the context of partners and ex- partners. Hence it is non-harmonized at national level.

revealed the following priorities identified by women’s CSOs:

**Direct Victim Support Activities:**
1. Provision of counselling and psychological support to victims/survivors of GBV
2. Provision of Legal advice to victims/survivors of GBV
3. Providing access to shelters for women victims of GBV.

**Indirect Victim Support Activities:**
1. Activities to promote the implementation of adopted laws in the field of preventing GBV
2. Lobbying/advocacy to influence policy and decision-making processes
3. Activities preventing GBV (Tackling gender stereotypes as root causes of GBV, i.e. engagement of men and boys, etc.

**Community-building and Outreach activities:**
1. Gender-sensitive education and training of professionals on the dynamics of GBV in the work of judges, police, social welfare centres, health workers, etc.
2. Coordinating strategic cooperation between CSOs and other stakeholders, public or private sector entities
3. Awareness raising and communication/information’s activities aimed at creating links and animating communities in the field of preventing GBV (i.e. youth)

**CSO capacity building**
1. Fundraising training sessions with a specific focus on flexible funding
2. Support on monitoring, evaluation, impact assessment and reporting during and after project implementation
3. Knowledge building/thematic training on gender, child rights, EU values, laws, policies on preventing and combating GBV as well as specialized training on specific topics, such as, parental alienation syndrome, trauma, legal aspects, Government requirements (licensing), training on watchdog and advocacy methods, policy monitoring and lobbying.

Furthermore, there are other key aspects that have been highlighted during the needs assessment, which are essential to advance in preventing and combating GBV at national and EU level.

Furthermore, there are other key aspects that have been highlighted during the needs assessment, which are essential to advance in preventing and combating GBV at national and EU level.
For all women’s CSOs a main priority is the ability to access flexible funding in order to render day-to-day operations sustainable.

Many of the grass roots organizations have an average annual budget of 10 000 to 20 000 Euros, and are the only point of contact for victims looking for help and support. However, the work they do goes unrecognised.

This leads to another key aspect, namely, the need to recognize and support the work women’s CSOs are doing to combat and prevent GBV. Women’s CSOs are the frontline access points for women victims/survivors of GBV and for women at the risk of becoming a victim of GBV. They are the extended family/community support, the contact points to which women go for safety and understanding. Hence this key position needs to be taken into account through active policies promoting their work and through sufficient financial resources.

A lot of grass-roots awareness raising is happening through community activities, by women’s CSOs, they are the backbone of equal societies, and they are also strong in coming together for lobbying and advocacy to address local councils and holding them accountable.

Calala Women’s Fund, the Mediterranean Women’s Fund (MedWF) and Ecumenical Women’s Initiative (EWI) in their role as intermediaries are crucial to strengthening women’s CSOs in providing a support network and access to much needed resources. They support women’s CSOs in building their financial management skills, and exercise due diligence in all their process and procedures, identifying how to prioritise their needs and make efficient use of their resources.

As intermediaries they offer proactive support and not only Helpdesks. For example, using the technique of storytelling, intermediaries have established yearly training sessions for new grantees, teaching something called ‘the most significant change story technique’. These trainings have been extremely insightful, because they showed that the grant offered not just the big political and cultural changes but also impulsed important personal changes and changes in relationships.

These techniques are key for understanding the impact of the intermediaries’ grantmaking and they are motivational for the grantees as they discover the levels of change that they were responsible for bringing about.

As grant givers the intermediaries also strengthen the view that monitoring and evaluation is not about doing what the funder expects, but that it is about themselves, what they need to understand what they are doing and how to be most impactful.

Building managerial capacities of women’s CSO as well as leadership and teamwork through three-years transitional grants is also key as very often, women’s organizations, specifically in the region where there is not a long history of civil society mobilization, were led by very charismatic women and intergenerational knowledge transfer is needed to take the organization forward.

In the tables below the most immediate identified needs are presented per country, the detailed analysis of each country can be found in the Country Fact Sheets in this document. Whilst each interviewee was asked to highlight the top 3 most immediate needs, for some countries, interviewees, stressed the importance of more than 3, as indicated across the tables below.
### 1. Direct Victim Support Activities:

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<tr>
<th>Activity</th>
<th>ALB</th>
<th>BIH</th>
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<tbody>
<tr>
<td>Providing access to shelters for women victims of GBV.</td>
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<td>Provision of shelter and support services (translation) to women/girls refugees from wars and conflict (i.e. Ukraine).</td>
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<td>Provision of medical support to victims/survivors of GBV.</td>
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<td>Provision of counselling and psychological support</td>
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<td>Provision of Legal advice to victims/survivors of GBV.</td>
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<td>Provision of GBV specialized support (trauma work, FGM, child marriage, etc.)</td>
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<td>Provision of collective care activities and group support for victims/survivors and families.</td>
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<td>Support with GBV digital/cyber violence, reporting, etc.</td>
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<td>Outreach to vulnerable groups at risk/victims of GBV.</td>
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<td>Women’s economic empowerment for financial independency.</td>
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### 2. Indirect Victim Support Activities:

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<th>Activity</th>
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<tbody>
<tr>
<td>Watchdog and monitoring activities on EU and international policies (i.e. IC), EU legal and policy documentation.</td>
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<tr>
<td>Activities to promote the implementation of adopted laws in the field of preventing GBV.</td>
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<tr>
<td>Lobbying/advocacy to influence policy and decision-making processes.</td>
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<td>Research and analysis aimed at informing policymaking at EU and national level.</td>
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<tr>
<td>Developing standards and procedures to repair the damage caused by GBV, standardising legal processes across regions.</td>
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<tr>
<td>Research on gender-based-violence, incl. new forms of GBV.</td>
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<td>Collection of data for statistical monitoring of all forms of violence, disaggregated by sex, age, etc.</td>
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<td>Activities preventing GBV (Tackling gender stereotypes as root causes of GBV, i.e. engagement of men and boys, etc.</td>
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</table>
## 3. Community Building and Outreach Activities:

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<tr>
<th>Activity</th>
<th>ALB</th>
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<tbody>
<tr>
<td>Building coalitions and partnerships among CSOs in the field of GBV prevention.</td>
<td>X</td>
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<td>Facilitating intergenerational knowledge transfer among CSOs.</td>
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<td>Coordinating strategic cooperation between CSOs and other stakeholders, public or private sector entities.</td>
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<tr>
<td>Awareness raising, communication, information activities, creating links and animating communities in the field of preventing GBV (youth work on peer and cyber violence, etc.)</td>
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<td>Community building and community-based mobilisation with direct involvement of the target groups.</td>
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<tr>
<td>Gender-sensitive education and training of professionals on the dynamics of GBV in the work of judges, police, social welfare centres, health workers, etc.</td>
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## 4. CSO Competency Building:

### Technical and methodological support for the preparation and implementation of activities of CSOs:

- Project/programme design and development. | X | X | X | X | X |
- Helpdesk during application phase. | X |
- Support on monitoring, evaluation, impact assessment and reporting during and after project implementation. | X | X | X | X | X | X | X | X | X | X | X | X |
Country Fact Sheets

Women’s CSOs need assessment to prevent and combat gender-based violence
Albania

Women’s CSOs needs assessment to prevent and combat gender-based violence

LEGAL AND POLICY FRAMEWORK


Post-communist Albania has been prolific in producing legal measures to punish GBV behaviours. Among them, the first important legal measure was Law No. 9669/2006, “On Measures against Violence in Family Relations;” a proposal developed by the civil society and supported by 20,000 signatures. This law has been amended four times so far (law 9914/2008, law 10.329/2010, law 47/2018, law 125/2020). These were crucial amendments. Law 10329/2010 (1) established a coordinated network of central and local institutions that provide immediate support to victims of domestic violence; (2) set up the National Centre for Victims of Violence; (3) sought to increase the number of reports made to police and the number of court protection orders for victims. (4) sought to ensure capacity building of professionals dealing with victims of domestic violence. Law No. 47/2018 followed recommendations of the CEDAW Committee (2016) and GREVIO (2017). It strengthened safeguards and procedural measures for a more effective response to domestic violence and protection of victims (including children) through the issuance of the Precautionary Emergency Protection Order, preceded by a risk assessment, for each case handled. Police officers now must perform risk assessments after identification of the victim, report the domestic violence cases and issue preliminary protective orders. These preliminary protective orders allow the police to remove the perpetrator of violence from the residence before the court has issued an actual protection order. It also ordered Courts to create a database of special domestic violence cases. Additionally, for the first time, protection was provided to women and girls in intimate relationships without having formal ties with the perpetrators, such as marriage or cohabitation. Law 125/2020 laid down the measures for immediate removal of the perpetrator from the joint residence through Emergency Protection Order (EPO) issued by Police, or through Emergency Protection Order/Protection Order (PO) issued by the Court within the time limit specified in these orders, specific rehabilitation programs for perpetrators, creation of an EPO/PO register, etc.

The second important one was Law No. 9970/2008 “On Gender Equality in Society.” It legally grounded the CEDAW Convention in Albania. Another important one was Law No. 23/2012. It amended the Criminal Code regarding beating, threatening, injuring the spouse, former spouse, cohabitant or ex cohabitant, or close sex or close marriage relations to the offender. Law No. 143/2013 is also worth mentioning. It gave victims of GBV or trafficking the right to receive legal assistance. This was reinforced by Law No. 111/2017 that guarantees free legal aid for victims of domestic violence and of sexual abuse. Finally, Law No. 35/2020 amended the Criminal Code once again including the criminalization of psychological violence, protection of persons in a relationship or former intimate relationship with the perpetrator of the criminal offense, etc., thus, harmonizing the content of this article with Article 3 of the Istanbul Convention and amendments to the law on domestic violence. The law further provides for toughening the sentences for certain actors of such criminal offenses. It is worth noting that in Albania rape, including spousal rape, is a crime. Yet, “the government did not enforce the law effectively. Authorities did not disaggregate data on prosecutions for spousal rape. The concept of spousal rape was not well understood, and authorities often did not consider it a crime.” Among the several recommendations made by the Grevio Report there are specific important ones regarding rape, asking Albania to amend its definition to bring it in line with the Convention (see Page 74). According to the US Report the same is true for sexual harassment “The law prohibits sexual harassment, but authorities rarely enforced it.”

Women’s CSOs from Albania have confirmed the extant gap between the text of the law and the reality of its enforcement and have pointed that as a consequence, the true reach of the law in key aspects of the phenomenon of GBV is limited. As a result, both the preventative measures are not solid deterrents of criminal conducts and the punishing side lags too.
FACTS

The Albanian Institute of Statistics (INSTAT) published information based on a survey carried out in 2018: “More than half of Albanian women and girls aged 15-74 years old have experienced one or more of the five different types of violence (intimate partner violence, dating violence, non-partner violence, sexual harassment and/or stalking), during their lifetime.” 6 1 in 2 women or 52.9% have been at least once a victim of GBV, 47% of women have experienced violence from their intimate partner, 18% of women were victims of sexual harassment, 1 in 5 women experienced physical and/or sexual violence, and 18.2% had experienced non-partner violence.”7

According to the European Commission, “In 2021, the police identified and treated 5.312 cases of violence and other crimes committed in domestic relations, a 13% increase against 2020. Among them, 3.266 cases of domestic violence were handled with a request for a protection order and 1.630 cases were referred to prosecution offices. In both instances, a slight increase on the 2020 figures was recorded. 638 perpetrators of domestic violence were arrested and 123 detained. Domestic violence increased during the lockdown period. Eighteen women and girls were murdered within family relationships in 2021, compared with six in the previous year.”8

According to the Albanian Directorate of Police, in 2018 there were 37 reports of victims of physical or sexual harassment. 15 of them by underaged victims and 22 by adults.9

According to the Albanian Government, “The National Counselling Line for Women and Girls 116-117 is a 24/7 service that operates pursuant to Istanbul Convention standards. In 2020 it received 5597 phone calls and conducted 650 face-to-face counselling sessions, while it also has provided legal assistance and support during the court procedures for 750 cases.”10 In the same report, the government informs that in 2020 the LILIUIM rape centre has treated 24 cases (10 girls 7-12 years of age, 11 girls 13 to 18 years of age, 2 women 19-25 years of age and one woman 26-46 years of age.

In the case of Albania, there is a clear consensus (even the government itself agrees as stated in the 2021 document in response to Grevio cited above), that official data does not reflect reality.

The 2019 OSCE-led Survey on the Well-being and Safety of Women for Albania concluded (1) Cultural norms and attitudes in Albania support women’s obedience to men, and sexual violence in intimate partner relationships is widely accepted. (2) Violence against women is under-reported, and women are not consistently accessing services or receiving protection. (3) There are gaps in the legislation, the implementation thereof and data collection. The magnitude of their findings cannot be overstated and are worth citing “88% think that violence against women is common and 53% think that it is very common.” “Only 3 % of women who have experienced violence at the hands of their current partner reported what they considered their most serious incident to the police.” “Few women have actually accessed those services – just 1% of those who have experienced physical and/or sexual violence contacted a women’s shelter or a victim support organization following the most serious incident.” “53% of women who have been sexually harassed talked to no one about their experiences; most women say that they were able to deal with it themselves.” “97% of those who experienced current partner violence did not report it to the police, and the same is true for 84% of the most serious incidents of previous partner violence. This may be linked to the belief, held by 48% of women, that domestic violence is “a private matter” that should be kept within the family.”11
WOMEN’S CSOs LANDSCAPE - Challenges and Needs

Lack of information and awareness on facing violence legally, fear, shame, and stigmatization prevent an unknown number of women in Albania to speak up on violence against them and receive support. Such a deeply seated cultural norms oblivious to criminal nature of GBV has several consequences starting with the underreporting of cases, the fact that legal changes result not from societal demands and the fact that the law does not truly work to deter perpetrators and hence to prevent GBV. There is no way to know the extent to which the measures in place are working or not either. Hence, Albanian women’s CSOs are the ones that attend women, victim/survivors of violence with their multiple services often on a voluntary basis. They depend almost entirely on donors and their sustainability remains a challenge. The fact that many GBV victims cope in silence and do not resort to the existing infrastructure masks the GBV infrastructural deficits and the lack of adequate training of those in charge of managing cases of GBV.

For a few years now, the women’s and feminist movement in the country is growing stronger, engaging in spontaneous and organized protests, using artistic expressions, joining in small group thematic gatherings and mainstream media interventions to make their voices heard.

Direct Victim Support Activities

Shelters have restrictive application criteria; accommodation is only temporary, and they have limited bed availability: the Women and Girls’ Centre has ten beds while the National Centre for the Treatment of DV Victims at Kamëz has 18-20 beds. Emergency centres (including medium- and long-term victim accommodation) are not available or do not meet the required standards in all municipalities. Crisis management, accommodation, and first response services in the first 72 hours from a sexual violence assault are provided at the Lilium Centre (2018), the only one of its kind in the country.

The number of DV victims receiving Legal Aid compared to the total of domestic violence incidents, identified by the police, remains low. Legal Aid access of victims from remote areas remains a problem. Victims/survivors of GBV and/or DV lack information on documentation required and eligibility criteria for social housing. Not all municipalities have in place a social housing programme for DV victims.

The main priority identified by women’s CSOs is to counsel and provide psychological and medical help for women victims of GBV. Mental health support through the public health system is rarely offered, although efforts for improvements have been made in the last years. Furthermore, in Albania ‘everybody knows everybody’ and although the Albanian health system foresees that when a doctor identifies signs of domestic violence in one of its patients they should notify the authorities, they often don’t, due to fear of intimidation.

Another immediate need identified is to offer group support activities to women victims/survivors of GBV, offering safe spaces for women to get together and raise awareness about the dynamics of GBV, women’s rights and to empower women to speak up against it.

Indirect Victim Support Activities

The absolute priority is to foster activities that tackle gender stereotypes and the normalization of violence in intimate partner relationships and families. Patriarchal stereotypes of gender roles, homophobic attitudes and GBV are widespread in Albania and women’s CSOs are at the forefront in raising awareness about gender dynamics and how they shape and justify the normalization of all forms of violence at all levels of society.

The implementation of adopted laws and by-laws is another top priority. Given that women’s rights claims have grown stronger in recent years it is crucial to support this movement with applied research and analysis that can inform decision making at national levels.

Due to the deep-seated cultural patterns that accept violence as part of life, it is also a priority to study the links between culture and violence. Irrespective of the fact of underreporting, it is important to stay on top and analyse and monitor ongoing trends and needs that are required to prevent GBV.

Community Building and Outreach Activities

There is a need to help the recent activation of the women’s and feminist movement in Albania to take off and consolidate to offer a different point of reflection for Albanian society. The government is very controlling of CSOs through funding (EU funding, for example, comes to the CSOs through the government which centralizes its disbursement) and any criticism towards the Government results in not receiving any such funding. In this context, it is crucial to ensure a stream of funding that guarantees freedom of action that escapes from and helps to break the current dynamic of government domination of the CSOs landscape so to diminish the current reluctance to collaborate between CSOs.
To help to change mentality, the second priority is to offer gender sensitive education and training of professionals that are involved in the management of cases of GBV but also in all other professions. The local media that could play an important role in challenging social norms and behaviours that condone violence against women reinforces cultural and social norms about gender and directly or indirectly shift blame from male perpetrators of violence and assigns responsibility for violence to women or offers excuses for men’s violence in its reporting.

CSO Competency Building

For women’s CSOs a main priority is to acquire sound technical solvency and strengthen their capacities in the fields of project writing, monitoring, evaluation and report writing. To ensure the successful implementation of projects women CSOs also need to count on helpdesk support during the implementation phase.

Furthermore, fundraising training sessions are key to be able to access and ensure funding from multiple donors.

To be able to respond and to adapt to rapid changes to the woman and feminist landscape, it is crucial that women CSOs receive coaching in strategic thinking and leadership.

Given the reluctance of public authorities to consult with civil society regarding GBV there is a need to receive training in advocacy and lobbying so to increase the effectiveness in having the voices of women’s CSOs heard.

For many women’s CSOs it is key to build knowledge and gender expertise. Given that Albania aspires to become a member of the EU, to receive training on EU values and to start using this language is strategically important to help to change the current mentality.

“Only 3% of women who have experienced violence at the hands of their current partner reported what they considered their most serious incident to the police.”

1 This was further developed through secondary legislation, including the Council of Ministers’ Decision (DCM) No.334/2011 on the establishment and functioning of the Coordinated Referral Mechanism against domestic violence at local level, which is the centerpiece of the country’s coordinated multi-agency response to domestic violence.

2 In addition, victims of domestic and other forms of violence and human trafficking are entitled to a number of benefits, such as specialized services and sheltering, as foreseen in the Law 121/2016 on Social Care Services; priority for social housing based on the Law 577/2019 Law on Social Assistance.
LEGAL AND POLICY FRAMEWORK

Bosnia-Herzegovina ratified the UN Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) in September 1993 and its Optional Protocol in September 2002. In March 2013 Bosnia-Herzegovina signed the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention CETS No 210) and ratified it in November 2013, being the sixth member state of the Council of Europe to ratify, despite its complex constitutional structure and decision-making process.

The ratification of the Istanbul Convention by Bosnia-Herzegovina refocused the development of the domestic legislative framework and the establishment of the corresponding mechanisms to address gender equality and women’s rights. Bosnia-Herzegovina was among the first in Europe to adopt the Law on Gender Equality in 20031 and other relevant documents include the Law on the Prohibition of Discrimination, the Gender Action Plan, the “Framework Strategy” on the implementation of the Istanbul Convention and the Criminal Code (CC) of the country. The Gender Equality law defines, among other aspects, the responsibilities of the relevant institutions, (Agency for Gender Equality of Bosnia and Herzegovina, Gender Centre of the Federation of Bosnia and Herzegovina and the Gender Equality Centre of the Republika Srpska), in charge of implementing the “Framework Strategy” stipulating that it covers all forms of violence against women and girls (VAWG) that fall under the Istanbul Convention. However, it does not identify specific offences. In 2018 the “Framework Strategy” expired, and no subsequent state-wide, comprehensive, and co-ordinated policy was adopted, ensuring an all-encompassing and harmonised response to VAWG.2

Although Bosnia and Herzegovina’s legislative framework generally complies with the Istanbul Convention, there is a lack of adequate implementation. Bosnia-Herzegovina is a society infiltrated by deeply patriarchal attitudes and gender stereotypes shaping the responses to VAWG, often considered as minor offences compared to other crimes or tolerated as acceptable behaviour.

The ratification of the Istanbul Convention has led to increased recognition of VAWG as a problem, however, there is still resistance towards changing long-held views.

The biggest issue is the implementation of most, if not almost all legal documents and acts that regulate the topics of gender equality and prevention of gender-based violence, due to the complicated structure of the state and the 13 distinct levels of government (state level, two entities, Brčko District and 10 cantons). At the state level, there is no database on the number of cases and victims of gender-based violence (GBV) and femicide, well as funds intended for the prevention and fight against GBV. There are programs and laws at the entity level that are applied to a certain extent. For example, there are SOS telephone numbers for the Federation of Bosnia and Herzegovina and for the Republic of Srpska, however funding is mostly donor based.

The government of the Republic of Srpska financed 70% of three Safe Houses (in Banja Luka, Modriča and Bijeljina) expecting the remaining 30% to be financed by municipalities from which the women who stay in the Safe House come. In the period from January to September 2022, about 3,000 calls were made to the SOS lines, and most calls were made by women aged 19 to 60.

The entity Federation of Bosnia and Herzegovina is in the process of adopting the Draft Law on Protection from Domestic Violence, which was proposed by the House of Peoples of the Parliament of the Federation of Bosnia and Herzegovina in July 2022. The law has not yet been adopted. In the proposed law, all five Safe Houses in the Federation (in Sarajevo, Zenica, Bihać, Tuzla, Mostar) should receive 40% of funds from the federal budget, and 40% from the cantonal budget (canton where the Safe House is located). The municipalities in whose territory the victim/woman who settles in Safe House has a registered residence should participate in the financing with 20% of the funds.3

In August 2022, the Agency for Gender Equality published a public call for the submission of offers for consulting services for the preparation of situational analyses with the aim of creating the Gender Action Plan of Bosnia and Herzegovina 2023-2027, for the state level and Brčko District. The Gender Action Plan is still in development with no information about its planned publication.
WOMEN’S CSOs LANDSCAPE - Challenges and Needs

In Bosnia and Herzegovina, numerous women’s organizations, and associations deal with GBV prevention and direct support to women and children survivors of GBV (safe houses, free legal aid, economic empowerment, etc). The problem is that almost all of them depend on donor funds because the state, through its programs, regardless of the planned funds, also allegedly depends on donor funds.

The Safe Network has existed since 2001 (as an informal network) and consists of 32 non-governmental organizations and government institutions, which deal with the problem of violence, from the entire territory of Bosnia and Herzegovina (Federation of BiH and Republic of Srpska). For faster and more efficient action, the Advisory Committee of the Safe Network was established in February 2002, consisting of 12 organizations representing 12 different regions.

Unfortunately, the Network is not highly active. Government institutions as well as CSOs have the legal base and adopted numerous documents that enable the fight against GBV, but the problem is the implementation of those documents and the lack of visibility in the public (e.g. cases of femicide, which is not legally regulated, are spoken of in law practice and the media as cases of ordinary murders) and overall the lack of funds for the women’s CSOs that deal with this issue.

FACTS

The issue of violence against women is a widespread concern in Bosnia and Herzegovina. According to an OSCE survey in 2019 two-thirds of women (67%) think that violence against women is common and over a quarter (27%) think that it is very common. Moreover, 48% of women have experienced some form of abuse, including intimate partner violence, non-partner violence, stalking and sexual harassment, since the age of 15. Findings indicate that approximately four in ten (38%) have experienced psychological, physical, or sexual violence since the age of 15 at the hands of a partner or non-partner.4

According to the findings from the Gender Equality Agency of Bosnia and Herzegovina perpetrators of violence against women are in 71.5% of the cases former or current partners. In general, there is a much higher risk of violence against women in intimate partner and domestic relationships than in the wider community. Young women are more subjected to violence than older women (the prevalence rate of violence among women aged 18-24 is 56.38% and 44.2% in the case of women over 65 years). The prevalence of domestic violence is higher in rural than in urban areas (49.2% vs. 44.3%). Material deprivation pronounced patriarchal attitudes, the culture of “tolerance towards violent conflict resolution” as well as alcoholism and the presence of seriously sick or immobile family members are all factors that increase the risk of violence against women.5

In 2019, 4202 people called the SOS helpline for victims of domestic violence (4103 women (98%) and 99 men (2%)), in 2020 5011 people called (4910 women (98% and 101 men (2%)). Almost all the callers are women and in 2020, during the COVID-19 pandemic, there were 800 more calls registered than in 2019. In the first seven months of 2019, in the safe houses across Bosnia and Herzegovina there were 347 victims of violence against women and domestic violence victims, while for the same period in 2020 that number increased to 519 victims, and they were not accepting new victims during the state of emergency.6

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2 Retrieved March 27, 2023, from https://rm.coe.int/grevioinf-2020-12/pdfa/16809eed4a

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With all the problems that arose due to the COVID 19 pandemic women’s CSO in Bosnia and Herzegovina were key in supporting women during the lock downs. They raised money between them to be able to travel to visit women in remote places and just check in with them. Many organizations were unable to keep up with their work as many did not have access to a laptop or an electronic device to communicate online.

NEEDS identified in the area of Direct Victim Support Activities:

Bosnia and Herzegovina have 8 shelters for women victims of GBV, however there are no Government funds to support and maintain these shelters which are run by women’s CSOs. 8 shelters in a country with 145 smaller and bigger cities. Women’s CSO are working hard to get money to maintain the shelters advocating for state and international donor support. This situation affects the accessibility of shelters as well as the security and support for women using these shelters. Opening more shelters and providing secure financing for existing shelters is a key need identified by women’s CSO’s in the country.

This need is directly related to the need for legal aid and psychological and medical support. Legal aid only exist for social cases and many women are economically dependent on their spouses and are unable to afford the legal costs of a divorce or a GBV related court case. Women coming to the shelters even must go back and live with the abuser in one house as they do not have resources to afford their own space and living costs.

Bosnia and Herzegovina have a well-established legal framework, but the reality is that there is no budget implemented and hence no practical application of these laws. Therefore, women’s CSO are covering the lacking responsibility of the State to provide the population with the corresponding psychological, medical, and legal services. They accompany women, monitor and advocate for the provision of services.

For example, free medical services for women without financial resources.

A key role of women’s CSOs is to empower women economically as financial independency is key to be able to leave an abusive environment. Women’s CSOs support women survivors and women at risk with training, capacity building and setting up their own small businesses (cleaning services, handicrafts, make jewellery, etc.).

NEEDS identified in the area of indirect Victim Support Activities:

In Bosnia and Herzegovina, the work of women’s CSOs is key in activities that monitor and promote the implementation of adopted laws in preventing GBV. They highly monitor the practical implementation of existing laws, make them visible and voice the realities women face and their legal rights which are not put into practice. In hospitals and emergency attendance for example the women’s movement is raising awareness for the need of statistics about GBV cases, professional training of medical staff to recognize signs of survivors/victims of violence even if it is not voiced by the patient, the need for medical reports that serve as proof in court cases that women have suffered GBV, etc. The is a pressing need for resources to ensure and sustain wide reaching monitoring and advocacy work.

There is also a huge need for GBV preventative work in schools and many professional aeras. Cyber violence and peer violence between adolescents is increasing and there is a need to work with the younger generation on the meaning and understanding of violence, security aspects, where to get help, how to say ‘no’ what are your rights, etc.

Women’s CSOs advocate to influence policy and decision-making processes, pushing for the implementation of new laws, with recent work on getting the new law about violence in family relationships approved. In 2006 they achieved the recognition for women survivors of sexualized violence during war as ‘war invalids’, which includes a small monthly pension payment, among other things. However, this law only applies in one part of Bosnia and Herzegovina and resources are needed to extend it to all regions of the country. They are also active in watchdog and monitoring activities on international and EU Conventions, pushing for the correct implementation of the Istanbul Convention and elaborating CEDAW shadow reports. All done with minimum resources.
NEEDS identified in the area of Community Building and Outreach Activities:

Women’s networks are strong in making campaigns to raise awareness and bring out to the public the realities of GBV in the country through presenting statistics, GBV cases, etc.

There is a huge need for broad national activities. Women’s CSOs achieved at local level to collaborate with the police, to get talks and awareness raising, but it needs to be brought to the State’s responsibility. Multiple stakeholder collaboration is urgently needed for State institutions to assume responsibility for the provision of services which currently are solely supported by women’s CSOs, taking care of the most vulnerable groups in society (supporting people with disabilities to access services, Roma women and the problem of early/forced marriages, etc.)

Relatively young associations struggle in the light of existing hierarchies that favours better-known, more popular associations and organizations with more established histories. Smaller associations and organizations may be seen as less relevant or impactful, lessening the recognition they receive for their achievements and roles in local communities. Hence cooperation and support are needed to strengthen smaller women’s associations and maintain their influence and status in society.

“48% of women have experienced some form of abuse, including intimate partner violence, non-partner violence, stalking and sexual harassment, since the age of 15”

NEEDS identified in the area of CSO Competency Building:

The first priority for women’s CSOs in Bosnia and Herzegovina is to get trained on fundraising. The second priority is training and building capacities on how to provide adequate services for and taking care of women victims/survivors of violence. However, a major problem for all women’s CSOs is the lack of structural funds. Most organizations have one or two people employed and the workload is extreme, and many tasks cannot be fulfilled.

Training is urgently needed in how to write project proposals, apply for funds and specifically web and internet related work. Accessing bigger donors, etc. There is also a resistance from local governments to give economic support to feminist and women’s associations. There is little understanding of the importance of how women’s rights and gender equality contribute to healthy family relationships.

Advocacy, lobbying and public speaking skills are quite developed and leaders of women’s CSOs go into other countries and share their experiences.

Improving the skills on monitoring, evaluation and reporting are also needed for project and program purposes, but specifically how to monitor the implementation of laws and how to implement that in your local community and how these transfer into activities.

ABOUT THE STUDY

This study analyses the women’s CSO landscape in Albania, Bosnia-Herzegovina, Croatia, Cyprus, France, Greece, Italy, Kosovo, Montenegro, Serbia and Spain. It identifies the challenges women’s CSOs face and their needs to prevent and combat GBV. The study was carried out by INDERA SL at the request of Calala Women’s Fund jointly with the Mediterranean Women’s Fund (MedWF) and Ecumenical Women’s Initiative (EWI).

Methodology:

Based on a review of the current initiatives at grassroots level in the 11 countries and the project portfolio of EU supported initiatives, a model of activities was created comprising the following four areas: 1) Direct Victim Support Activities: services and activities which are provided directly to the victims of GBV; 2) Indirect Victim Support Activities: monitoring, advocacy, and watchdog activities regarding the adoption and implementation of laws and policies to combat and prevent GBV as well as research, awareness raising and preventative activities. 3) Community and Outreach: activities to strengthen stakeholders’ collaboration, networking and community building; 4) CSO Competency Building: activities to strengthen women’s CSOs structural, technical, financial and operational capacities.

Stakeholder interviews with women’s CSOs and experts from the 11 countries, together with desk research provided information and data about legal and policy frameworks, actors, tools and methods in the area of GBV and VAWG to identify needs to support actions with potential in prevention, protection, prosecution, service provisions, partnership building and prevalence.

The data provided in this study was collected in March 2023. More information at: www.calala.org
LEGAL AND POLICY FRAMEWORK

Croatia has ratified the UN Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) in September 1992 and its Optional Protocol in March 2001. In January 2013 Croatia signed the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention) and ratified it in June 2018. However, both the Istanbul Convention and the CEDAW Convention are almost never used in the legal processes against violence against women, despite being above the national law.

Family violence was defined by the Criminal Code, through the adoption of the first Act on Protection against Domestic Violence in 2003. This led to improvements in the field of combating domestic violence, including strategies for prevention, sanctioning, and suppression. At the same time, the first Gender Equality Act and the Anti-Discrimination Act were passed to create equal opportunities for women and men and the Office of the Gender Equality Ombudsperson was set up as an independent body to combat gender-based discrimination and to advance gender equality. In 2004 the Government of Croatia established the Office for Gender Equality and coordinators were appointed in local and regional self-government units.

Despite significant progress in legislation, provisions are either not sufficiently implemented or implemented to the detriment of the survivors of violence. There have been provisions tackling violence against women but within the framework of trafficking in persons, sexual violence, domestic violence without naming violence against women as such. It took six years to draw up a new National Plan for the Protection and Promotion of Human Rights and Combating Discrimination for the period from 2022 to 2027. However, this has yet to be enacted and implemented.

Deficiencies in the application of the provisions of the Istanbul Convention and international and European legal regulations have inhibited further progress. Croatia has not fully recognized the structural nature of violence against women and girls as gender-based violence. Due to a lack of understanding of GBV by institutions, gender-neutral approaches are adopted which fail to create a necessary connection between gender inequality and GBV. Research by AWHZ shows that 46% of women were not satisfied with the conduct of the police after reporting violence, 14.2% have personally experienced double arrests and 17.3% have been processed as second accused in cases of domestic violence. The Croatian legislator does not distinguish GBV from other forms of domestic violence.

The justice system in Croatia does not provide victims with adequate redress or access to compensation for damages from perpetrators which is a serious shortcoming. In addition, the growing trend in religious fundamentalism is impacting women’s reproductive rights and violates women’s rights to equality.

FACTS

In 2017 the Gender Equality Ombudsperson under the General Police Directorate of the Ministry of the Interior initiated Femicide Watch, an observatory for comprehensive monitoring, data collection, analysis and reporting of femicide cases. Femicide in Croatia accounts for 25-30% of all murders of which a significant number are women killed by their intimate partner.

According to EIGE the COVID-19 pandemic in Croatia gave rise to a higher risk of violence against women committed by an intimate partner. During the pandemic, women’s organizations reported a sharp increase in the demand for support services for female victims of violence which further exacerbated pre-existing gaps in funding provisions for victim support services.

According to the 2019 FRA’s Survey II, 55% of women who experienced physical and/or sexual violence, experienced it in their own home. 16% of lesbian women, 8% of bisexual women and 18% of trans people were physically or sexually attacked in the previous five years. 28% of women experienced harassment in the previous five years, and 19% in the previous 12 months. 33% of women with disabilities experienced harassment in the previous...
WOMEN’S CSOs LANDSCAPE - Challenges and Needs

The condition of human rights in Croatia continued to worsen in 2021, as demonstrated in the illegal and violent pushback of refugees and migrants from Croatia into neighbouring countries and the further deterioration of the institutional framework for the development of civil society⁷. The National Strategy for Creating an Enabling Environment for Civil Society has still not been brought through and the criminalisation of civil society organisations working on issues of asylum and migration continues to be a serious threat.

The consequences of the COVID-19 pandemic continue to emerge. During the pandemic the problem was that victims were isolated from access to support services but now the challenge is that there are insufficient numbers of women activists to provide support services and still very limited funding.

Direct Victim Support Activities

Croatian women’s CSOs are key providers of access to shelters/refugee centers for women victims/survivors of GBV. In 1988 the first SOS helpline for abused women and their children was founded in Zagreb and in 1990 the first shelter was opened by AWHZ⁸. Through the persistent work of women activists, shelters, helplines, and counselling centres for women victims of violence were opened in various parts of Croatia and today each of the 21 counties has a shelter. However, with one centre for every 50,000 women there is still a need for much more.

The most critical problems for CSOs in running shelters and counselling centres is sporadic and uncertain funding from the state and other national donors. Access to shelters is fundamentally linked to accessing adequate counseling and psychological support, including group support for survivors as well as legal and medical advice, according to the specific situation women face. There are insufficient funds available for counseling, staff training and overall victim support. Victims require support on a wide range of issues for which staff may require some specialized knowledge (i.e. women knowing their rights before, during and after criminal proceedings, personal data protection, social mentoring and economic empowerment to break perpetrator dependence, etc.).

Women’s organizations are limited in their outreach to women in refugee and asylum centers (mostly Ukrainian women and asylum seeking women from Syria), due to the lack of collaboration with the police and women survivors of low/moderate levels of violence in remote places on the islands and in the hinterland of the coastal counties.

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² Idem
³ Retrieved March 23, 2023 from Autonomous Women’s House Zagreb (AWHZ) (https://azkz.hr/en/)
Existing shelters also need support to establish the capacities to admit women asylum seekers and refugees from other countries as well as women with the status of foreign workers whose numbers have quadrupled in the last year. Statistical data shows that 40% of migrants and asylum seekers are women at increased risk of GBV and human trafficking. 85% of refugees from Ukraine in Croatia are women and children.

The need for basic services, such as translation services, cultural mediation skills and informational material in multiple languages are urgent needs that also require addressing.

**Indirect Victim Support Activities**

Together with the provision of shelter and support for women victims/survivors of GBV, the key work areas for women’s CSOs are monitoring activities on EU and international policies, their practical application in national and regional laws and following up on the Istanbul Convention and CEDAW. Gaining knowledge on how to advocate at international and domestic levels as well as intergenerational knowledge transfer to strengthen young women activists are pressing issues for grassroots organizations. Key topics of women’s activism in Croatia are to claim the State’s responsibility for:

- **Research on victim-perpetrator relationships** to raise awareness about the structural character of GBV and differentiate between different forms of GBV.

- **Data collection on GBV** as well as the need for case studies on court processes; the need for protocols on the harmonization of data provided by the different state authorities (police data is different to ministry data, etc.).

- **Awareness raising and sensitization programs** for the overall population by introducing gender responsive and GBV aware materials into the mandatory curriculum of the state education system, working particularly with boys on male entitlement and violence as well as into the vocational training of the police, health system providers, judges, workplaces, teachers, etc.

- **Creating more strict laws and punishments** to send a clear message of zero tolerance to GBV, including structures to avoid insanity pleas and State initiatives to work with perpetrators in detention centers for effective rehabilitation.

- **Legal approval of the right to obtain the status of ‘victim of sexual violence during war’ or ‘status of civilian victims of war’ and improved legal efficiency in prosecution processes.**

Meanwhile advocating for the State’s responsibilities women’s CSOs are often the only ones responding, with very limited funds, to the growing need for gender-sensitive education and training of professionals on the dynamics of GBV in the work of judges, prosecutors, police, social welfare centres, health workers and other experts working in related institutions.

**Community Building and Outreach Activities**

To build a community free of GBV, Croatian women’s CSOs have identified the need for national TV campaigns. Grassroots organizations are active with smaller campaigns through social media and/or radio but do not have the funds and capacities for the needed wider community outreach.

Through public speaking and activism, the women’s movement increases its visibility. Therefore, activists need to develop expertise in public speaking and public relations. Overall, women’s CSOs advocate for developing close cooperation with governmental authorities in systematically building GBV aware communities through raising awareness about harmful social and sexual norms, cultural belief systems and traditions. The women’s movement also raises awareness about good practices in other European countries, such as models applied in Germany, Spain, and Sweden.

The need to build collaborations between women’s CSOs and State institutions (social welfare, police,
judges) has also been identified as well as making awareness raising seminars and training on GBV mandatory.

CSO Competency Building

The main priority for women’s CSO’s in Croatia is knowledge building so activists have the expertise to address the direct needs of victims and are knowledgeable for their lobbying and advocacy work. Specifically, knowledge building on European legal frameworks to learn how to frame the Conventions for the domestic implementation, (training on how frameworks apply to the national, regional, and local contexts), with a clear focus on how to prevent and combat GBV. Professional skill building as well as supervision and support for the ones working with survivors of GBV is also urgently needed to guarantee staff health and wellbeing.

Networking is also considered a key activity and part of women’s CSOs daily activities. In this ad hoc networking has been identified as the most efficient way, as they focus on specific topics without interruption from diverse interests. There is a consensus that through increased financial support for structural costs to provide some level of remuneration since many work on a voluntary basis and with precarious income, networking will take care of itself.

The lack of structural funds is a pressing issue which forces CSOs to rely on project-based funding which keeps them in a precarious state due to uncertainty of project approvals and the short-term character of project funding. Moreover, work capacities shift from the provision of direct victim/survivor support and advocacy work to dealing with increased administrative tasks, such as writing of project proposals, collecting documentation, narrative, and financial reporting.

Nevertheless, for many women’s CSOs project-based fundraising and knowledge about existing European funds and skill building on project writing is a key priority meanwhile others do not prioritize these aspects as the reality of their highly voluntary or low-level paid work necessitates a focus on the direct victim support activities. However, there is a need for support through helpdesks in monitoring, assessment, evaluation, and reporting. Specifically, their annual reporting and reporting on advocacy topics.

Overall communication skills are needed as well as analytical skills of the work done and the presentation of data and facts.

ABOUT THE STUDY

This study analyses the women’s CSO landscape in Albania, Bosnia-Herzegovina, Croatia, Cyprus, France, Greece, Italy, Kosovo, Montenegro, Serbia and Spain. It identifies the challenges women’s CSOs face and their needs to prevent and combat GBV. The study was carried out by INDERA SL at the request of Calala Women’s Fund jointly with the Mediterranean Women’s Fund (MedWF) and Ecumenical Women’s Initiative (EWI).

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Based on a review of the current initiatives at grass-roots level in the 11 countries and the project portfolio of EU supported initiatives, a model of activities was created comprising the following four areas: 1) Direct Victim Support Activities: services and activities which are provided directly to the victims of GBV; 2) Indirect Victim Support Activities: monitoring, advocacy, and watch dog activities regarding the adoption and implementation of laws and policies to combat and prevent GBV as well as research, awareness raising and preventative activities. 3) Community and Outreach: activities to strengthen stakeholders’ collaboration, networking and community building; 4) CSO Competency Building: activities to strengthen women’s CSOs structural, technical, financial and operational capacities.

Stakeholder interviews with women’s CSOs and experts from the 11 countries, together with desk research provided information and data about legal and policy frameworks, actors, tools and methods in the area of GBV and VAWG to identify needs to support actions with potential in prevention, protection, prosecution, service provisions, partnership building and prevalence.

The data provided in this study was collected in March 2023. More information at: www.calala.org
LEGAL AND POLICY FRAMEWORK

Cyprus ratified the UN Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) in July 1985, and its Optional Protocol in April 2002. In June 2015, Cyprus signed the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention) and ratified it in November 2017 with a series of reservations (on article 30, paragraph 2, on article 44 paragraphs 1, 3 and 4 and on article 59). Cyprus withdrew its reservations on articles 44 and 59 but upheld its right not to apply the provisions of article 30, paragraph 2.

Cyprus is one of the six EU members which has legally defined gender-based violence (GBV). Cypriot legislation covers the four forms of domestic violence specified in Article 3 of the Istanbul Convention: physical violence, sexual violence, psychological violence and economic violence. It has also legally defined femicide as a gender-based crime.1

Following the ratification of the Istanbul convention, Cyprus passed Law 115(I)/2021 “On the Prevention and Combating of Violence against Women and Domestic Violence” (VAW Law 2021). This law criminalizes different forms of violence against women, and amends the definition of rape with a view to aligning it more closely to the Convention. This law works in conjunction with the Criminal Code, Law 60(I)/2014 “Prevention, Fighting against Trafficking in and Exploitation of Human Beings and Protection of Victims”, Law 209(I)/2020 on “Combating Sexism and Sexist Behaviour” and Law 114 (I)/2021 “Protection from Harassment and Stalking.”2 Law 115(I)/2021 was recently amended by Law 117(I)/2022 to introduce femicide as a distinct criminal offence.

Law 115(I)/2021 departs clearly from the provisions of Law 119 (I)/2000 “The Violence in the Family (Prevention and Protection of Victims), amended by Laws 212 (I)/2004, 172(I)/2015, 78(I)/2017 and 95(I)/2019. While the 2000 Law adopted a gender-neutral definition of domestic violence that encompasses victims and perpetrators of both sexes, and all members of the household, treating cases of domestic violence as a public crime, the 2021 Law adjusted the definition of GBV and the types of punishable behaviours in line with the Istanbul Convention. VAW Law 2021 also eliminated the requirement for previous or current cohabitation, ensuring the application of the law to intimate partners that do not have a history of cohabitation.3 VAW Law 2021 foresees the establishment of a national coordinating agency for the prevention and combating of violence against women, which was set up in March 2022. The National Coordinating Agency developed the first National Strategy and Action Plan on Preventing and Combating Violence against Women and Domestic Violence 2023-2028, which was adopted on 15 February 2023.

Prior to this, there had been two National Action Plans for the Prevention of Violence in the Family: (i) between 2010-2013, and (ii) between 2017-2019.

In addition, the National Action Plan for Equality between Men and Women 2019-2023 includes “Combating Gender-Based Violence / Full compliance with the provisions of the Istanbul Convention” as a key priority.4

At the operational level, prejudices and patriarchal attitudes have led to inaction of the police and subsequent failure to record incidents of violence against women which has caused significant underreporting of GBV cases due to lack of trust. The lack of care in collecting and providing evidence and guidance consequently led to several unsuccessful cases when proceeding through the justice system. It has become evident that the legal framework in line with the Istanbul Convention lacks effectiveness when judges and prosecutors exhibit sexist and misogynist attitudes and that a shift can only be achieved through awareness raising and mandatory in-service training of professionals in all institutions to avoid revictimization and to guarantee the full implementation of the law.5
FACTS

In Cyprus 36% of women report having experienced some form of sexual harassment since the age of 15 and 1 in 5 women in Cyprus have experienced physical and/or sexual violence by a partner or non-partner. 28% have experienced some form of domestic abuse including economic, psychological, physical and sexual. Between 2019 and 2022, there were 20 femicides in Cyprus, the majority in the context of intimate partner violence.

In the second quarter of 2019 Cyprus was reported by Eurostat to be the country with the highest number of registered first-time asylum applicants in Europe relative to population. Since 2014 the number of first-time asylum applicants in Cyprus has grown continuously. From 1.480 applications in 2014 to 7.713 in 2018, reaching 6.554 applications already in the first six month of 2019. In 2018 men were with 68,2% the majority of asylum seekers, 31,8% were women and 14% children. Integration policies in Cyprus are gender blind impacting significantly its capacity to respond to needs and vulnerabilities related to sexual and gender-based violence (SGBV). Asylum-seekers and especially women are at a substantial risk of trafficking and sexual exploitation.

A vulnerability assessment in 2019 displayed that from the 592 (186 women, 405 men) people assessed 113 cases (19%) had experienced SGBV. 49% of all women and 5.1% of all men assessed were identified as victims of SGBV. The most frequent form of SGBV identified was sexual violence (59.3%) followed by physical violence (40.7%), trafficking (40%), humiliation (37%), sexual exploitation (27%), forced marriage (18.6%), and confinement/detention (19.5%) and lower rates of FGM and sexual harassment, which may be due to the fact that four out of nine asylum-seekers that experienced sexual harassment have also experienced sexual violence/rape.

WOMEN’S CSOs LANDSCAPE - Challenges and Needs

In Cyprus, the capacity of civil society to mobilize and advocate effectively for policy change on gender equality issues and GBV remains weak and uncoordinated. Social and political actions in Cyprus have always focused on the division of the island, and together with the economic crises, the migration crises and a stagnant status quo of the ethnic division there is very little state funding for the CSO sector to prevent and combat GBV and violence against women and girls (VAWG).

More recently, however, civil society is growing and more human rights CSOs are taking an active part in public debates and advocating for a range of human rights issues, including on women’s rights and VAWG. However, there is a lack of meaningful consultation with women’s CSOs by state authorities on policy formulation and implementation on VAWG, and funding is restricted to only a limited number of CSOs that provide direct services.

The COVID 19 pandemic put a particular pressure on direct victim support services and their capacities to provide for the increasing victims of GBV. Access to services was particularly challenging for migrant women, including domestic workers, asylum-seeking and refugee women, that suffer multiple discrimination and are more vulnerable to violence and exploitation at every level.
Exhaustion, staff burnout and turnover became a constant reality as CSOs were often the only contact point for victims of GBV with the healthcare system falling apart and social welfare services and other authorities with minimum services.

**Direct Victim Support Activities**

Shelters for victims/survivors of GBV are available in each main city, co-financed by the State covering up to 50-60% of their annual budget, their management outsourced to a mayor NGO (SPAVO9), who must supplement the remaining costs with donations. SPAVO runs a 24-hour helpline and provides women, victims/survivors of GBV with a place in the shelter or alternative housing as well as psychological and medical support. They also run a perpetrator program and other social support services. However, there is a huge need for provision of legal advice to victims of GBV which is not fully covered. More generally, in Cyprus, specialized services for GBV victims are lacking.

Cyprus has a lot of refugees and asylum seekers constantly pouring into the country as well as foreign domestic workers often having already experienced some form of GBV or being at the risk of it. The demand for legal advice is huge and there are many professional women lawyers who are not formally organized but would like to associate and offer legal GBV specialized services to women in need.

In December 2020, the Government announced the opening of the Women’s House, a multi-agency and multi-professional crisis centre, offering victims of GBV support services, including migrant women and refugees regardless of status.

Another priority is to provide services to attend new forms of GBV formerly not common in the country like Female Genital Mutilation (FGM) and forced child marriage. There is a need to form expertise to be able to attend women that are at risk of these forms of GBV or have already experienced it. Awareness raising and capacity training about these new forms of violence to health professionals, welfare services, the police etc. as well as offering them supervision and support is also a priority.

**Indirect Victim Support Activities**

Despite a well-established legal framework sufficient budget is lacking for its implementation and women’s CSOs have identified the pressing need to monitor and advocate for the implementation of adopted laws on the prevention of GBV in Cyprus. The country lacks a systematic educational program on gender equality and GBV for efficient professional training on these matters as stereotypical behaviours prevail. It is up to the women CSOs to fill the vacuum.

In 2022 a new law was passed which now is comprehensive and covers all forms of violence against women and girls as well as a law on domestic violence that also covers other members of the family, and the law on preventing and combating sexism, etc.

There is a 5 Year Action Plan with no budget dedicated to its implementation, hence calling for a lot of monitoring and advocacy work to be done that these laws, which are in line with the Istanbul Convention, are fully implemented.

For the monitoring and lobbying processes there is an urgent need to have data on GBV and VAWG as well as research to inform policy makers and demand actions. Regarding data, what is available on GBV is scarce, inconsistently collected and incapable of providing an overall picture on the prevalence of violence against women in Cyprus, or to properly evaluate the response of the relevant institutions and the support and protection provided to victims.

**Community Building and Outreach Activities**

Community building, coalitions between stakeholders, partnerships and strategic cooperation has been identified as a priority in Cyprus. There is a lot of competition among CSOs as all are aspiring for the same funds, so strategic cooperation is key with learning initiatives and raising consciousness about the need to work together, how to do this, have common goals, and how to put it into in practice.

Another priority is community-based mobilization with the direct involvement of target groups to clearly define needs and best practices.
Specifically, the more informal grassroots organizations and groups of women from migrant communities, who do not have access to any funds, would immensely benefit from this. Small women’s CSOs and/or informally organized groups do not have significant budgets or are working, very systematically, but they really know how to raise awareness and communicate what is needed to prevent and combat GBV through community mobilization thematic local campaigns as well as using social media. With more financial support they could mobilize a lot of GBV awareness raising activities.

Gender-sensitive education and training for professionals is done through women’s CSOs in Cyprus, however, it needs to be implemented more strategically as an inhouse service in all institutions to guarantee its sustainability. At the moment these are on/off courses offered by women’s CSOs but initiatives are needed to institutionalize gender responsive professional training and education for health professionals, welfare services, the police, etc.

CSO Competency Building

To access funds is key for all women’s CSOs, however, for the more informal groups it will be difficult, due to their informal status to manage funds and adhere to project management requirements. Hence, the main priority for women’s CSOs in Cyprus is building capacities for CSO sustainability and to have a minimum structure, which then offers organizational growth.

Parallel to this getting technical support is a key priority, particularly on the area of monitoring and evaluation as well as reporting processes. Getting skilled on how to conduct an impact assessment is a key feature as this is rarely measured.

Another priority is to improve knowledge on key concept, so that people really know what it is they are addressing when talking about women’s rights or gender equality. In this specifically legal expertise is needed to be able to analyse a new law or the approval of a law.

CSO staff also needs training on a systematic approach to advocacy methods, policy monitoring and lobbying to know how to respond on time to Government consultations and how to focus their goals and interests.

Furthermore, CSO staff need to build professional expertise for improved direct victim attendance with a specific focus on new forms of GBV.

“In Cyprus 36% of women report having experienced some form of sexual harassment since the age of 15 and 1 in 5 women in Cyprus have experienced physical and/or sexual violence by a partner or non-partner.”

ABOUT THE STUDY

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LEGAL AND POLICY FRAMEWORK

In July 1980 France signed the UN Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) which was then ratified in December 1983, accepting its Optional Protocol in June 2000. In May 2011 France signed the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention) and ratified it in July 2014.

In 1996, concerned about the increasing trends in gender-based violence, the French government commissioned the first National Survey on Violence against Women in France (ENVFF) in order to better understand and estimate the extent of the problem. The survey findings were published in 2003 and since then, five ministerial plans dealing with Gender-Based Violence have established numerous measures to protect victims and prevent violence. In addition to a legislative framework, one of the more significant practical initiatives has been to establish a one-stop helpline (3919) for victims or witnesses of domestic violence. Since its launch in 2007, there has been an ever-increasing number of calls to the helpline. In the fifth plan in the fight to combat violence against women which ran from 2017-2019, the government identified nine areas for concentration regarding 1) Educating for non-violence and equality between girls and boys; 2) Free the voice of victims and promote the revelation of violence; 3) Protecting victims as soon as a complaint is filed; 4) Reinforced medico-social care; 5) A more protective justice; 6) Take into account the impact of domestic violence on children and family ties; 7) Follow-up and support for perpetrators to deal with the problem of domestic violence as a whole and better prevent the risk of recidivism; 8) Protect women who are victims of violence, including at work; 9) Protecting victims of violence with disabilities.

Despite the good intentions which drove the government’s ambitions and an expanding legislative framework, France is not in full compliance with the obligations of the Istanbul Convention and the figures on violence against women and the impunity of perpetrators remain worrying.

The 2019 GREVIO report reveals that at legislative level, the definition of sexual assault and rape is not based on the absence of free consent but refers to the use of violence, coercion, threat or surprise. Such inadequacies of the criminal-law’s response to violence, makes it difficult to ensure that perpetrators of gender-based violence (GBV) are held accountable and leads to a dysfunctional judicial system where crimes are reduced to less serious offences (i.e. reclassifying rape as a sexual assault offence) not only minimizing the seriousness of the crime, but negating justice to the victim.

Policies are not sufficiently acknowledging the specific nature of GBV and violence against women and girls (VAWG) which leads to inadequate specialised housing facilities for women victims of violence and their children and a lack of systematic use of protection orders. Furthermore, the interests and safety of children are rarely applied in relation to custody rights after separation, which exposes children to an ongoing risk of violence.

If the scourge of GBV in society is to be addressed, current attitudes and inequalities must be addressed. For instance, the existing disparities between men and women in pay and pension provisions in France must be resolved. Furthermore, women should have the same opportunities as their male colleagues in the workplace. In the 21st century, we should not be still talking about the need to break the glass ceiling.

These continuing inequalities in society between men and women continue to fuel toxic attitudes and dysfunctional behaviours which encourage justification for GBV in all its forms. Whilst front line CSOs are tactical in their response out of necessity, there is a need for more strategic thinking in the search for more long-term sustainable approaches to dealing with the complexities involved.
FACTS

According to the National Observatory of Violence against Women, 106 women were killed by their partner or ex-partner in France in 2022, which is equivalent to a femicide every three days. That same year, 23 men were killed by their female partner or ex-partner, and 14 minor children were killed by one of their parents in the context of domestic violence.

More than one in two women in France (53%) and more than six in ten young women (63%) have experienced sexual harassment or assault at least once in their lives. 16% of French people have suffered sexual abuse in their childhood.

On average each year over the period 2011-2018, 94,000 women aged 18 to 75 reported having been victims of rape or attempted rape. Of these female victims, 32% were between the ages of 18 and 29 and in 45% of the cases described the perpetrator as a spouse or ex-spouse. In 91% of cases of sexual violence, women know the aggressors. For the most part, these men are not violent psychopaths excluded from our society who hide in dark alleys but rather our partners, friends, brothers, colleagues or mentors.

85% of trans people have already experienced a transphobic act, especially on the street, and this discrimination has consequences on their social life.

For 1 in 6 women, entry into sexuality is through non-consensual and desired sex. For 36% of these respondents, this report took place before their 15th birthday.

WOMEN’S CSOs LANDSCAPE - Challenges and Needs

The feminist movement in France has made history and its iconic leaders have impacted democratic processes globally. The federation solidarité femme, a network of 78 organisations fighting GBV, has obtained to set up the 3919 listening platform (the national helpline for women victims of violence (in particular domestic violence), their families and professionals) in 13 languages financed by the State. The resources allocated to 3919 will increase by 2.9 million in the draft finance law for 2023.

Despite the divisions that the feminist movements in France have experienced in recent years, it is nonetheless focused on a unified claim: obtaining a budget of at least 1 billion euros to fight domestic violence. In addition, public subsidies for associations fighting against GBV have dropped considerably. Hence, whilst much progress has been made in France over recent years, there is still much work to be done

and women’s CSOs at grassroots level are focused on dealing with the effects of the ever-increasing forms of GBV.

The COVID pandemic and the recent increases in refugees coming into the country have greatly exacerbated the problems faced by CSOs on a day-to-day basis.

Following the COVID pandemic and the flow of refugees fleeing the war in Ukraine and elsewhere, the pressures on CSOs dealing with GBV have increased enormously. The upward trend in instances GBV in general and domestic violence against women have been accompanied by a downward trend in levels of funding as the demands for available funding elsewhere, such as the cost-of-living crisis, have had an impact.

11. This figure is based on a study “Où est l’argent pour les droits des femmes” carried out by the Mediterranean Women’s Fund, among others, which estimated that one billion euros was needed to combat domestic violence against women alone. Retrieved March 22, 2023 from https://www.medwomensfund.org/files/rapport-ou_est_argent-vf.pdf
NEEDS identified in the area of Direct Victim Support Activities:

The most immediate challenge facing CSOs in dealing with providing support to victims at grassroots level is in providing access to shelters and refuge centres where victims can gain some recovery and perspective in a place of safety. The challenge with current approaches is that existing provisions only provide very temporary respite whereas, women and their children who are victims of GBV need more long-term solutions as they try to build their lives a new in safe distance away from the perpetrators of violence against them. In other words, CSOs need to be able to take a more strategic response rather than merely reacting to the immediate needs of the victims in the short term.

The second priority is to provide counselling and psycho-social support to the victim as they try to come to terms with the trauma and make plans, for themselves and their families. There is also an urgent need to set up a sufficient number of emergency assistance centres for victims of rape and sexual violence, in order to provide them with medical and forensic examinations, trauma-related support and counselling, and to increase the number of facilities offering specialist support for women victims, such as the support and counselling centres (LEAOs) and day care centres.

The third priority need that CSOs have is to provide victims with advice on the legal framework and what they can do to seek the protection of the law and redress. This is a particularly complex challenge requiring specialist knowledge and not without risk since such actions taken by the victim can lead to further intimidation by the perpetrator.

Over the medium to longer term, the challenge for CSOs is also to be able to provide dedicated advice centres for survivors of GBV where they can access a range of expert services such as, for example, medical advice.

NEEDS identified in the area of indirect Victim Support Activities:

The biggest challenge and related need for CSOs is to relay the experience and needs from the front line so as to influence policy and decision-making processes. The challenge is to ensure that policy development is consistent with the needs on the ground and resources are targeted effectively.

It is important that CSOs have the mechanisms to effectively track and monitor all forms of GBV and so the second priority need is to have the necessary resources and expertise to collect data for statistical monitoring so that appropriate initiatives can be designed in response to trends. Particularly at the level of justice and law enforcement agencies, to train all professionals, including staff in contact with women asylum-seekers, to increase the number of specialised services with an appropriate geographical distribution and to ensure the operation of the “3919” helpline, 24 hours a day and seven days a week.

The third priority need with respect to this category is to develop activities which promote the effective implementation of legal provisions in the field of GBV. The challenge arises is that there is often a disconnect between the legal framework and the implementation of provisions in practice. This is a complex issue in that there are many reasons for such inconsistency, such as, for example, a lack of appropriate training and expertise amongst relevant institutions.

In the medium to longer term, once the above priority needs are met, CSOs should have the means to tackle gender stereotypes and the resulting dysfunctional attitudes and behaviours amongst men and boys as well as the resources to research and inform policy making at both national and EU levels.

NEEDS identified in the area of Community Building and Outreach Activities:

The challenge for CSOs in the wider context is essentially to change attitudes and behaviours with respect to GBV. This is a complex challenge but strikes at the heart of prevention. In this respect the first priority need is to provide gender sensitive training for professionals from every discipline dealing with GBV and its impacts. This is essential in order to combat potential victimisation of victims once they seek help and/or redress.
The second priority is to raise awareness in the wider community of both the horrors of GBV and the work conducted by CSOs in trying to address the complex issues involved. CSOs are relentless in their determination to establish all forms of GBV as unacceptable norms in society but this takes communication skills and resources which are not available.

The third priority must be to build coalitions and partnerships between CSOs in the field. Since resources are scarce and ever harder to come by, CSOs across the landscape need to share knowledge and experiences to get the most of scarce resources available.

In the medium to longer term, there is a need to focus on standardising legal processes across regions. Once again this would support CSOs in their efforts to maximise the use of resources available.

**NEEDS identified in the area of CSO Competency Building:**

Working with victims of GBV is a complex and highly stressful experience for those working in CSOs on the front line. The effects of such experiences encountered on a daily basis are very disturbing and the impact on counsellors and CSO staff is often overlooked or underestimated. Therefore, there is an immediate need for access to trauma counselling for CSO staff who work on the front line. This need has become particularly acute as CSOs struggle to cope with the aftershocks of the pandemic and inflow of refugees fleeing war.

CSOs need to build competencies in fundraising. So much is expected from those at the frontline but without adequate resourcing very little can be achieved. Public funding is obviously critical but public priorities are ever changing and so CSOs need to be creative in the way they generate support. This requires a different kind of skill set.

Most CSOs rely on teams of volunteers, concerned citizens who are committed to helping combat and prevent GBV in their local communities. To improve both effectiveness and efficiency, CSOs would benefit hugely from coaching to strengthen strategic thinking as well as training in managerial and team building competencies. This would do much to improve capacities and effective management of resources.
Greece ratified the UN Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) in March 1983 and its Optional Protocol in January 2002. In January 2013 Greece signed the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention) and ratified it in October 2018. Greece is one of the six members of the EU which defines GBV in its legislation (Law 4531/2018).1

In Greece, as codified in its Penal Code (mainly Section 19), Trafficking (Art. 323A), Rape (Art.336), Assault of sexual dignity (Art.337), Abuse of a person incapable to resist to sexual act (Art.338), Sexual actions with minors or in front of them (Art. 339), Abuse of minors (Art 342), Abuse in a sexual act (Art.343), Sexual act among relatives (Art. 345), Facilitation of sexual acts with minors (Art. 348), Pornography of Minors (Art. 348A), Procuring (Art.349), Sexual act with a minor against remuneration (Art. 351A), Violation of sexual decency (Art. 353) are all punishable crimes introduced through several laws, including 4619/2019, 4637/2019 and 4855/2021.2

Greece does not cover the four forms of domestic violence specified in Article 3 of the Istanbul Convention within its criminalization or definition of domestic violence. While it covers physical violence, sexual violence, and psychological violence, it excludes economic violence. Greece has not legally defined femicide either. As a result, such legal provision does not exist3 even though in the first ten months of 2021 Greece had already 13 cases of femicide recorded.

The legal concept of domestic violence that, among other things, charges rape as a felony, prohibits spousal rape, (including rape in a free union), and provides for prosecution by force of law for all domestic violence crimes was introduced in 2006 by Law 3005 on domestic violence.

Despite this significant progress in legislation, provisions are not thoroughly and consistently implemented, and a few significant gaps persist: the justice system does not have an information system on domestic violence offences;4 there is a lack of disaggregated statistics on women victims of sexual crimes, and not enough specialized and trained professionals for the adequate management of victims of sexual crimes, the treatment towards minors victims of sexual abuse by the Criminal Justice System remains anachronistic (Hellenic Ombudsman, 2020), the 2019 ministerial decision that ordered the establishment of Independent Protection Units for Child victims and defined standards for conducting forensic interviews with child victims of sexual abuse is yet to be implemented,5 there are no procedural criminal law provisions aimed to avoid re-victimizations during the prosecution and court hearings and rape reported to the police is not prosecuted ex officio.6

Despite rapid progress in terms of women’s rights, there are still many issues that Greek women face, particularly in the workplace. Research conducted in 2020 revealed that 85% of Greek women say they have faced sexual harassment at work with only 6% having it reported due to fear of retribution or loss of employment and the fear of not been taken seriously by the authorities.7

FACTS

According to the Hellenic Police, for the year 2020, the annual number of A) women victims (aged 18 and above) of domestic violence was 4,264, B) reported domestic violence offenses were 5,699 (4,026 of them were reported with male perpetrators and female victims), C) women victims of physical intimate partner violence with male perpetrators were 2,350, D) women victims of sexual intimate partner violence committed by men were 47, F) women victims of economic intimate partner violence committed by men were 1,638, G) women victims reporting rape were 202 and H) the number of women victims of intentional homicide (Art. 299 PC) in connection to the law on domestic violence were 8.8

Since 2020, the Hellenic Police records the victim’s and the perpetrator’s gender as well as the relationship.
between them. In this regard, and for that year, there were 4,758 male perpetrators (82%). Their victims were 3,693 women and 795 men.

There were also 1,047 women perpetrators (18%). Their victims were 301 women and 746 men. Regarding the relationship that perpetrators and victims had: 1,859 male perpetrators exercised violence against female spouses, 481 against ex-spouses, and 459 against permanent intimate partners. On the other hand, 280 female perpetrators exercised violence against male spouses, 116 against ex-spouses, and 53 against permanent intimate partners. The percentage of violence toward their sons (13.9%) and daughters (10.1%) exercised by female domestic violence perpetrator is higher than the percentages of men perpetrators (5.4% and 5.8% respectively). However, the number of women victims of violence committed by their fathers is more than twice the number of women victims of violence committed by their mothers (277 versus 140).9

Adding some perspective on the matter, the annual number of reported offenses of domestic violence over the last 10 years for which data are available, has been constantly increasing. The reported crimes increased from 5,220 in 2019 to 5,669 in 2020, documenting an increase of 8.6% compared to the previous year. The negative effects of the COVID lockdowns are clear.

WOMEN’S CSOs LANDSCAPE - Challenges and Needs

Greece does not count on a strong network of women’s CSOs and there are only a few women, non-binary and LGBTQI+ people who are active to claim their rights. The Greek government does not fund CSOs gender-based violence (GBV) programming. Instead, the organizations run response services through EU funds, UN agencies/INGOs and funds from private donors. The General Secretariat for Demography and Family Policy and Gender Equality (GSDFPGE) encourages the implementation of co-funded projects through the provision of a “Letter of Support” and also through its active participation in projects’ consortia.10

Direct Victim Support Activities

Women’s CSOs in Greece don’t have the financial capacities to run support services for women victims of violence such as shelters or helplines. The Greek government runs the main infrastructure that deals with the direct consequences of GBV. It does so through a system that includes a SOS 15900 helpline, 19 Women’s Shelters that provide safe accommodation and meals to women victims of GBV and their children and 43 Counselling centres providing social, psychological, legal consultation and occupational support; referral or accompanying services to police and prosecution authorities, courts, hospitals, health and mental health centres, welfare social services or other benefits such as access to structures for the promotion of employment and entrepreneurship and for protection and support of children.

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According to the CSOs, the public infrastructure is a resource-deprived and understaffed network that is not by any means sufficient for the number of women in need across the country, especially to address the specific needs of migrant women and the forms of violence they face. Despite this fact, this network remains the main provider of crucial direct victim support activities. There are women’s organizations who try to cover the gaps in state support, but due to lack of funding, the financial crisis and lack of policies related to gender equality and GBV prevention most of those organizations struggle to survive and somehow come to their surface and showcase the work that they do. In the north of Greece for example there is only one community centre for women providing them with a safe space regardless of their legal, status, and origin.

There is a public helpline to provide psychological support and a newly introduced app with a ‘panic button’, however mental health support is still a taboo in Greece and it’s difficult to access services. So, women’s CSOs provide these spaces for women, also collective group activities for psychological support.

Nevertheless, women’s CSOs are very much on the front line, attending women victims of violence with scarce resources, often being their first contact points, they are the ‘entrance’ for survivors of GBV and through the women’s CSOs they get the support to access a public shelter. They also offer support to access the medical system and getting medications if needed. They also cover the costs for private health services in emergency cases for women and children. Particularly for refugee, asylum seeking or undocumented women it is very difficult to access the generally free public medical services and if they do they need a translator. There is also a lack of professional knowledge on how to attend GBV cases particularly of related to trafficking and sexual exploitation. Women’s CSOs are the extended community network, the first safe place women can go to and are taken care of.

The main needs identified by women’s CSOs are emergency shelter (short term emergency accommodations) and legal aid. Given that providing legal aid is priority and that it is very expensive to argue in court, particularly when legal cases call for a submission to the European justice, women’s CSOs offer it particularly to women with low economic capacities, poor women, migrants and refugees.

Indirect Victim Support Activities

Women’s CSOs had an important role in the past in advising and monitoring the process of policy implementation and had been invited by the Government for consultations. However, with the new Government this is not the case. In this scenario, there is not much place for the needed advocacy work and domestic lobbying activities aimed at addressing important gaps in the legislation and the lack of fully-fledged implementation of policies. This scenario has also a negative impact on extant gaps in data collection on GBV, which cannot be covered by CSOs and which deprives CSOs (and society at large) of a realistic picture on this matter. Women’s CSOs express that it is a top priority to set up a monitoring and advocacy system aimed at reverting this state of things.

Because Europe is a source of both norms to be nationally transposed and funds for CSOs, women’s CSOs are very aware of the importance of both monitoring what happens at the European level and making things happen at the European level too. Hence, research and analysis of the Greek reality in terms of GBV aimed at informing policy making (EU and potentially domestic one) is another identified priority.

Tackling gender stereotypes and working specifically with youth groups is also a key priority for women’s CSOs.

Community Building and Outreach Activities

A key priority for women’s CSOs is community building and to support with collective actions to strengthen a social network for women victims/survivors of GBV or at the risk of it to have peer-to-peer support and safe spaces to access and express and be themselves.
Regarding community building women CSO’s have identified the need to engage in networking with relevant stakeholders so to promote and protect fundamental values (including gender equality) in the EU. In that regard, it is of interest for the CSOs to speak and act in the name of EU values.

Additionally, given the deficit of gender-sensitive skills and capacities of professionals managing GBV situations, increasing the offering of gender-responsive capacity training and education particularly in GBV first responders’ professions (police, health system, judges, etc.) is a clear priority.

**CSO Competency Building**

CSOs in Greece don’t receive any Government GBV funding and therefore they have to be skilled to apply for funding to private, European or international sources. Because women CSO’s are well aware of the need to submit competitive proposals and to have the competencies needed to have the biggest possible impact on the ground they have pointed to the need to receive technical and methodological support for the preparation and implementation of activities.

In relation to that, they need to build competencies on both project/programme design as well as on monitoring, evaluation, impact assessment and reporting.

The lack of Government funding for CSOs working on the GBV field turns the subject of CSO’s overall capacities as the key to ensure their sustainability. Flexible funding is an urgent request. They need to develop team and managerial capacities. They need to improve their fundraising abilities.

“**The annual number of reported offenses of domestic violence over the last 10 years has been constantly increasing. The reported crimes increased from 5220 in 2019 to 5669 in 2020.**”

Additionally, women CSO’s pointed out to the need of socially promoting gender expertise so to increase the level of watch dog activities regarding GBV. Related to this, it is important to maintain a solid base of volunteers and to them in the use of social media and in video-making.

The CSOs made clear also that there is a void that needs to be filled regarding the building of knowledge and thematic training on EU values, law and GBV policies so to change the language and the terms of the Greek conversation around GBV. The grounding of EU viewpoints and values through GBV is strategic also to strengthen gender equality as a fundamental right and as a shared aspiration.

**ABOUT THE STUDY**

This study analyses the women’s CSO landscape in Albania, Bosnia-Herzegovina, Croatia, Cyprus, France, Greece, Italy, Kosovo, Montenegro, Serbia and Spain. It identifies the challenges women’s CSOs face and their needs to prevent and combat GBV. The study was carried out by INDERA SL at the request of Calala Women’s Fund jointly with the Mediterranean Women’s Fund (MedWF) and Ecumenical Women’s Initiative (EWI).

**Methodology:**

Based on a review of the current initiatives at grassroots level in the 11 countries and the project portfolio of EU supported initiatives, a model of activities was created comprising the following four areas: 1) Direct Victim Support Activities: services and activities which are provided directly to the victims of GBV; 2) Indirect Victim Support Activities: monitoring, advocacy, and watch dog activities regarding the adoption and implementation of laws and policies to combat and prevent GBV as well as research, awareness raising and preventative activities. 3) Community and Outreach: activities to strengthen stakeholders’ collaboration, networking and community building; 4) CSO Competency Building: activities to strengthen women’s CSOs structural, technical, financial and operational capacities.

Stakeholder interviews with women’s CSOs and experts from the 11 countries, together with desk research provided information and data about legal and policy frameworks, actors, tools and methods in the area of GBV and VAWG to identify needs to support actions with potential in prevention, protection, prosecution, service provisions, partnership building and prevalence.

The data provided in this study was collected in March 2023. More information at: [www.calala.org](http://www.calala.org)
ITALY

Women’s CSOs needs assessment to prevent and combat gender-based violence

LEGAL AND POLICY FRAMEWORK

Italy has ratified the UN Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) in June 1985 and its Optional Protocol in September 2000. In September 2012 Italy signed the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention) and ratified it in September 2013.

Italy is one of the 21 European states that does not have a legal definition of Gender-Based Violence. Italian legislation does not cover the four forms of domestic violence specified in Article 3 of the Istanbul Convention within their criminalisation or definition of domestic violence. While it covers physical violence and sexual violence it excludes psychological violence and economic violence. Italy has not legally defined what femicide is either. As a result, such legal figure does not exist.

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Legislation against gender-based violence was first introduced into the Italian Penal Code in 1996 by Law 66, February 15, Art. 609 bis-Art.609. This was followed by a President of the Council of Ministers’ Directive (27.03.1997) that instructed the collection and the analysis of statistics of sexual violence and abuse, the creation of an observatory on violence against women and minors and the preparation of new legislation introducing urgent precautionary measures in cases of domestic violence (Art. 9). Since 2001, offenders can be precautionarily removed from the family home. Since 2002, any person experiencing gender-based violence (GBV) is eligible for legal aid irrespective of income.

Following the signature of the Istanbul Convention into law, Italy introduced the issues of battering and sexual violence into its Penal Code. Since 2009, stalking is a crime. Since 2013, the topic of prevention of GBV and all forms of discrimination is part of the education curriculum. Since 2013, women victims of sexual violence (except domestic workers) can be on work leave. Italy adopted in 2011 the first National Plan Against Gender-Based Violence and Stalking, followed in 2015 by an Extraordinary Plan against sexual and gender violence and in 2017 by the Strategic National Plan on men’s violence on women and by several laws (concerning economic compensation, paid leave, civil servant transfers, the safeguard of orphans as well as turning domestic violence, stalking and sexual violence into prioritised crimes), which have increased the number of protection measures for women. Since 2019 forced marriage, the deformation of an individual’s appearance through permanent facial injuries and the unlawful dissemination of sexually explicit images or videos or revenge porn are recognized as crimes. Recently, in 2022, Italy enacted Law 53 (May 5), to ensure that statistics are collected so to generate a flow of information adequate in cadence and content on GBV against women so to ensure effective monitoring of the phenomenon. Its article 4 stipulates that all public health facilities, and in particular emergency room operating units, have an obligation to provide data and information related to violence against women. This latter move is part of an agenda (sparked by the Istanbul Convention) aimed at getting more real regarding the quantification of the GBV phenomenon and the extent to which the measures in place are doing their job or not.

FACTS

According to data from the ISTAT, in 2020, 54,609 women contacted Anti-Violence Centres (AVCs) at least once, 3,964 more than in 2019. Of those, 30,359 have started a path out of violence with the Anti-Violence Centres that adhere to the State-Regions Agreement. The bulk of those women were Italians (72.3%). 27.7% were foreigners. In at least 3,048 of such cases, women’s lives were at risk.

As the following data makes clear, the situations left behind were complex and multifarious.

12,907 of these women suffered from physical violence. In 9,281 cases there were threats made to them. 1,958 were cases of consummated or attempted rape. 2,525 were cases of other forms of sexual violence. In 4,039 instances women were stalked. In 17,521 cases there was psychological violence. In 7,557 instances there was economic violence. They were also a minority of other situations (forced marriages, Female Genital Mutilation, forced abortions, forced sterilization and...
trafficking linked to prostitution). In the vast majority of these cases the perpetrator was their current partner (54.8%), followed by ex-partners (22.9%), by family members (12.5%) and by friends (9.9%).

The bulk of those women had between 16 to 59 years of age (within that the largest group were women from 40 to 49 years of age followed by 30 to 39 years old). The majority of women were referred to an AVC by family and friends (39.6%), followed by referrals made by law enforcement agencies (29%) and then by Emergency Room personnel (19.3%).

The great majority of women contacting an ACV during 2021 sought to be listened to (18.379) followed by women who sought to be admitted into one (14.335).

In 2021, as well, 1,179 women were admitted to hospitals for recovery from GBV. In that same year, 6,356 women who visited an Emergency Room (ER) got a primary diagnostic of domestic violence. Additionally, 99,580 women who visited an Italian ER for another reason were secondarily diagnosed as victims of domestic violence. Of those, 92,309 of them had multiple bruising and 30,000 reported high level of anxiousness.

During 2020, 36,036 women victims of GVB called the 1522 Helpline. By and large, most of those calls were made by women victims of violence. During 2022, according to the Italian Ministry of Interior, law enforcement authorities receive the following complaints regarding GBV: 12,771 cases of stalking against women, 18,788 reported cases of ill-treatment against women and 5,991 cases of sexual violence against women.

During 2021, in Italy there were 119 cases of women killed: 70 by their partners or ex-partners, 30 at the hands of other family members, 6 at the hands of someone known and 13 at the hands of an unknown.

WOMEN’S CSOs LANDSCAPE - Challenges and Needs

Italy’s strong civil rights and women’s movement disappeared a bit from the public scene after its strongest momentum in the 1970s surviving with isolated initiatives as any progress in civil rights came always up against strong opposition. In 2011 a strong wave of reaction against the state of affairs took shape in society and old and new women’s organizations launched a variety of initiatives against gender discrimination and campaigns against domestic violence.

In Italy legislation and women’s realities have substantially changed due to the relentless and rich debates within the feminist movement and the commitment of the women elected to Parliament as a consequence of it. Women’s CSOs are key players in advancing gender equality and preventing and combating GBV by offering the much-needed support for women survivors of violence and particularly by holding the government accountable for translating their commitments into laws and policies and into implementation and enforcement.
Direct Victim Support Activities

In Italy, the Anti-Violence Centres (AVCs) and Shelters are the core of the structure in place to deal with cases of GBV. In 2022, there were 366 AVCs and 368 shelters (88% of them with a secret address). Shelters and AVCs are unevenly distributed throughout the Italian territory. Northern Italy counts with 257 shelters (70.2%) and 146 AVCs (41.7%). Southern Italy has 104 AVCs (29.7%). The rest are spread throughout the rest of Italy. They are also unevenly distributed within the 20 administrative regions as well. Most of them (particularly AVCs) are located in major populated areas. AVCs and shelters may or may not adhere to the territorial network against violence that exists in every single region.

The vast majority of ACVs (283) have been promoted (and are managed) privately (on a non-for-profit basis, historically an initiative of women CSOs). Regarding shelters, 92% of them are also on the same regime. The rest of the AVCs and shelters have been promoted (and are managed) by public agencies. 81.8% of the shelters and 92% of the AVCs receive public funds. 59.1% of the shelters and 42.2% of AVCs receive exclusively public funds. Many AVCs operate on the basis of volunteers.

Given the increasing number of battered women, the first priority is to strengthen as much as possible the service of provision of medical help to victims of GBV. The current infrastructure is not enough. The established distinctiveness of AVCs of personalized women to women treatment, set AVCs apart from other regional social services. The importance of AVCs for women that both seek advice from them or simply need to be listened to as mentioned in the previous section cannot be highlighted enough. Yet, the fact that public funding is scarce and arrive slow and late, along with the fact that AVCs vary regarding what services they offer and how many days a week they are open for the public, united to the fact that women that wish to be hosted by one such institution, tend not to have their own financial means, fact that helps prolonging the period they stay there puts a lot of financial pressure on these organizations. As a result, they cannot keep up with the demand. For this reason, there is a demand from women CSOs to support the continual creation of GBV specialized AVCs in every district.

The same is true regarding shelters. It is necessary to support women CSOs’ quest to continue expanding the needed infrastructure particularly in remote, non-central areas within regions. It is also necessary to support women CSOs to support an increase of their public service times so they can attend to the needs of GBV victims.

Indirect Victim Support Activities

Italy is not short of legislation to individually punish those who engage in GBV. Italy has also been moving towards the creation of specialized units in both justice system and law enforcement to deal with this. That notwithstanding, the prevention side of the equation and the coping with victims, particularly helping them to move on in life, are still the weakest links in the chain. In such a context, women’s CSOs have pointed out to the importance of working with youth and adults to tackle stereotypes (what the state offers through the education system is not enough if we observe the inter annual flow of cases of GBV. According to CSOs, we are in front of a well-established cultural problem that has to be fully addressed) and to avoid harming behaviours (including through digital means).

The second priority is to engage in lobby and advocacy at both the regional and national levels (1) to ensure a sound working system of funding of those who deal with people affected by GBV and (2) to financially commit to help GBV victims to have the chance of a new beginning, which will also help increase the turnover of people under their care.

There is also a need to further engage the EU to deliver EU wide campaigns on GBV. Furthermore, another key need identified is to develop tools and standards that could support EU policies and actions regarding prevention of GBV.

Community Building and Outreach Activities

The first priority is the need to strengthen the capacity to build coalitions and partnerships between women CSOs working on the field of GBV prevention and to ensure a good flow of information, exchanges and best
practices between them. In that regard, they pointed out to the need to build a solid digital platform that could make it happen.

The second priority is to find new ways of coordinating efforts between women CSOs with other stakeholders (both public and private) so as a whole they are capable of coping with old and new challenges. In that regard, they pointed to the need of co-programming, hence of building more horizontal spaces of debate, exchange and deliberation capable of delivering the needed answers.

**CSO Competency Building**

Women CSOs working in the field of GBV need training that could help to build autonomous capacities and to ensure sustainability.

Another key priority is capacity training on GBV. However, women’s CSOs pointed out the lack of trainers that truly understand the GBV sector and therefore identified the need to generate trainers with specialized GBV expertise and methodologies so they can help with the strengthening of technical and managerial capacities with a clear strategic thinking flavour.

Additionally, they have also expressed the need for more traditional training on watchdogging, advocacy, lobbying and policy monitoring so to increase the weight that these organizations carry.

A final need that has to be met is given the visual impact of the effects of violence on women, there a clear need to train people by means of video making seminars.

**“During 2022, according to the Italian Ministry of Interior, law enforcement authorities receive the following complaints regarding GBV: 12.771 cases of stalking against women, 18.788 reported cases of ill-treatment against women and 5.991 cases of sexual violence against women.”**

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LEGAL AND POLICY FRAMEWORK

In 1999 Kosovo became a territory governed by the United Nations and in 2008, after failed negotiations on its legal status between Belgrade and Prishtinë/Pristina declared its independence. Although recognised by more than 100 UN member states Kosovo is still without membership in the UN and the Council of Europe (CoE). Therefore, Kosovo cannot ratify international Conventions such as the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) and the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention CETS Nº 210). However, Kosovo ensures the direct application of CEDAW through article 22 of the Kosovo Constitution and committed with the Strategy on Protection from Domestic Violence (DV Strategy) for the period 2016 until 2020 to actions that lead towards the harmonisation of its legislation with the Istanbul Convention.\(^1\)

The issue of gender equality is recognised as a fundamental value which is enshrined in the Constitution of the Republic of Kosovo. The provision of equal opportunities for both men and women to participate in all aspects of society is guaranteed through an ever-evolving domestic legal landscape which has at its core, specific provisions such as the Law on Gender Equality, and the Law on protection from discrimination both of which came into force in 2015 which aim to prevent domestic violence, in all its forms.

Under the law, violence on the grounds of gender refers to all acts of violence that result in, or are likely to result in, physical, sexual, psychological, social, or economic harm or suffering on the grounds of gender, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life.

The Law on Protection against Domestic Violence (LPDV)\(^4\) and the DV Strategy do not contain a specific definition of violence against women and girls (VAWG) just an overview of the definitions from the Istanbul Convention without further referring to activities and actions on how to fight and prevent the different forms of violence. Overall, the legal text has a gender-neutral approach and does not even refer to ‘women’ as a specific vulnerable group for gender-based violence (GBV).

In Kosovo, gender-based violence is studied mainly in the context of domestic violence. National statistics compiled by the Kosovo Police confirm that women are most likely to experience gender-based violence, and the highest percentage of perpetrators are those who are in a close relationship with the victim. When the victim of domestic violence is male, most of the perpetrators are also close family members. Children are also another vulnerable group susceptible to gender-based violence.

According to the Law on Protection from Domestic Violence (LPDV), the Kosovo Police are responsible for responding to any report of domestic violence. The LPDV further stipulates that the Police are responsible for the protection of the victim and the prevention of further violence, by offering protection and a wide range of support services.

Whilst the Kosovan authorities and policy makers are resolute in their determination to provide an effective legal framework, and considerable progress has been made to that effect in recent years, the challenge of effective law enforcement remains.

Whilst role of the police in dealing with GBV is far reaching and expectations are high, police lack adequate resources to deal with the complex issues involved. A study of attitudes toward domestic violence carried out in 2017, underline the importance of the cultural context of patriarchal structure, gender inequality, and rigid gender roles that continue to strongly influence males’ tolerant attitudes towards violence against women. Successive studies show that violence against women\(^2\) is somehow normalized in Kosovo society.
FACTS

Domestic Violence remains worryingly underreported in Kosovo. Police data shows that between the years 2009 and 2017 the number of reported cases of Domestic Violence in Kosovo was between 944 and 1269 which experts consider to be grossly underestimated.  

Police Data shows that from 2011 to 2018, 79% of all reported cases of Domestic Violence were reported by women and girls. For instance, women were the victims in 78.5% of all cases of Domestic Violence reported to the Police in 2018, and 77% of those reported in 2017. Throughout the period 2011-2018, most domestic violence perpetrators were men. For instance, men were the perpetrators in 93.4% of all Domestic Violence cases reported to the Police in 2018, and 94.2% of those reported in 2017.

Data obtained by the Kosovo Police shows that for the years 2018 and 2019 however, the rate of reporting Domestic Violence drastically increased for the first time since 2009. In 2018, a total of 1533 cases were reported, which marks a 20.8% increase compared to the previous year, and a 25.1% increase compared to two years prior. By June 2019, 785 cases were reported to the Kosovo Police, continuing the trend of more frequent reporting.

A survey from the Organization for Security and Cooperation in Europe (OSCE) on the safety and well-being of women in Kosovo, carried out in 2019 found that 64% of women surveyed thought violence exercised by partners, acquaintances, or strangers toward women is common. When asked about the forms of violence women had experienced, 54% of women said they had experienced psychological, physical, or sexual violence at the hands of an intimate partner, and nearly 29% said that they had experienced sexual harassment.

As is the case with many jurisdictions, KOSOVO has seen an increase in instances of GBV as an unfortunate side effect of the COVID 19 pandemic. A survey with 908 respondents conducted between July 27 to August 23, 2020, found that the leading causes of domestic violence during the pandemic were stress (18.9%), socioeconomic insecurity (11.4%), and the limited physical space for quarantine in the house/apartment (4.4%).

In assessing the impacts of the pandemic, it’s also worth bearing in mind that KOSOVO has some pre-existing vulnerabilities, which include, among others, a relatively low level of spending on healthcare with 2.5% of GDP compared to 12.6% in OECD countries, a high poverty rate with 24.4% of the population at or below the poverty line compared to 2.9% in OECD countries, a high unemployment rate with 25.7% compared to 5.8% in OECD countries and a low spending for social protection with 6.5% of GDP compared to 20.1% in OECD countries.

Women have been one of the most hard-hit groups within the population considering they are more likely to be unemployed or employed in precarious jobs – making up most frontline workers in healthcare, spending more time on unpaid domestic work thus taking over most of the workload in the family caring for children and elderly.
**WOMEN’S CSOs LANDSCAPE - Challenges and Needs**

In Kosovo CSOs serve as a link between citizens and institutions relying entirely on international donor support. Civil society engagement is particularly affected by the frozen conflict between Kosovo and Serbia and although cooperation among CSOs is well developed, communities rarely interact beyond ethnic boundaries. The challenge for women’s CSOs in meeting the needs of victims and changing the attitudes and behaviours as a prerequisite to combating and preventing GBV in society is to work with the limited resources available. Whilst trends in GBV, particularly, but not exclusively, against women continue to increase, access to adequate resourcing is becoming increasingly difficult. Given the sensitivities involved, providing effective victim support requires women’s CSOs to have a wide and diverse range of practical knowledge and expertise.

**NEEDS identified in the area of Direct Victim Support Activities:**

- In Kosovo, the most immediate challenge and need for women’s CSOs is the ability to provide victims with advice on the legislative framework and the avenues of recourse available to them. In order to meet this need, CSO advisors and counsellors must have the requisite knowledge and expertise.

- The second most immediate challenge and need is the ability to provide counselling and psychological support to victims. Victims of gender-based violence suffer considerable trauma and the psychological impacts are complex and often long lasting. Unfortunately, in Kosovo those who experience gender-based violence are all too often victimised after they come forward to report such crimes and request help and protection. There is a lack of recognition and provision of adequate measures to deal with this victimising of victims.

- The third most immediate need facing CSOs is the need to provide adequately resources, dedicated advice centres for survivors of gender-based violence which would include family members. The issue that is often overlooked, or underestimated, is that even if the victims can find protection from perpetrators of GBV, such as, for example, finding shelter, the circumstances that gave rise to GBV in the first place still need to be dealt with.

All these priorities require sustainable resourcing which will ensure stability over the long term.

**NEEDS identified in the area of indirect Victim Support Activities:**

- The primary challenge is preventing GBV and as such, there is an urgent need to raise awareness particularly amongst young people. GBV is a phenomenon most prevalent amongst families in the domestic context and unfortunately the police are often not adequately trained and equipped to deal with it. This lack of understanding by legal authorities leads to insensitivity when dealing with reported cases and the result can often lead to victim blaming.

- The second priority need for CSOs is lobbying and advocacy to influence policy and decision making by the relevant authorities. CSOs have direct experience on the front line are best placed to determine what is needed to address complex challenges. It is important that this experience influences policy so that front line needs are addressed. But this takes time, a different skill set and dedicated effort.

- The third challenge for front line CSOs is tackling the issue of gender stereotypes which give rise to dysfunctional attitudes amongst men and boys. This challenge encompasses a range of priority needs such as research on GBV and monitoring trends, as well as developing educational programmes targeting perpetrators and those who are at risk of offending.

“**In 2019 64% of women surveyed thought violence exercised by partners, acquaintances, or strangers toward women is common.**”
NEEDS identified in the area of Community Building and Outreach Activities:

The need to **build coalitions and partnerships among CSOs** is an important priority when it comes to community building. It is important that CSOs can share experiences and lessons learned. Moreover, given that resources are so scarce, it makes sense to share and optimise resource usage.

The second priority is the need to **raise awareness of both the complex issues related to GBV but also the activities and services which women’s CSOs provide**.

The third priority need which is extremely important is **to provide gender sensitivity training and education to those professionals** who must respond to instances of GBV as they arise. Law enforcement professionals from police to judges, from local government officials and social workers must have the required knowledge and skills to deal with the trauma to which GBV gives rise.

If we consider the issue of community-based mobilisation and the involvement of target groups, it is important to recognise the heterogeneous nature of diverse groups and as such, combining groups with distinctive characteristics and priority needs could prove problematic.

NEEDS identified in the area of CSO Competency Building:

CSO advisors and counsellors providing victim support on the front line must have the necessary competencies in order to do so. They must be knowledgeable in a wide range of areas and must have the skills necessary to communicate and counsel victims who are often traumatised.

One of the most important challenges facing CSOs is the need to design and develop effective programs which are actionable on the front line. It is also critical to be able to monitor and assess the effectiveness during implementation. The challenge is that CSOs are reactive and responsive to needs as they arise because they have to. They do not have the time or resources to think and plan strategically for the long term.

Of course, fund raising is a constant challenge and there is a never-ending need to lobby donors for support. The COVID pandemic had a profoundly negative impact on women’s CSO since many of the ongoing projects were put on hold and funding avenues were disrupted.

“54% of women said they had experienced psychological, physical, or sexual violence at the hands of an intimate partner, and nearly 29% said that they had experienced sexual harassment”

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Stakeholder interviews with women’s CSOs and experts from the 11 countries, together with desk research provided information and data about legal and policy frameworks, actors, tools and methods in the area of GBV and VAWG to identify needs to support actions with potential in prevention, protection, prosecution, service provisions, partnership building and prevalence.

The data provided in this study was collected in March 2023. More information at: www.calala.org
LEGAL AND POLICY FRAMEWORK

Montenegro ratified the UN Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) in October 2006 together with its Optional Protocol and was among the first ten countries that signed in May 2011 the Council of Europe Convention on preventing and combating violence against women and domestic violence (Istanbul Convention), ratifying it without any reservations in April 2013. It was also among the first signatory states in which the Convention entered into force, on 1st August 2014. This has led to more targeted support provided to the Montenegrin authorities by a range of international stakeholders. In addition, the process of accession to the EU is contributing to important judicial, administrative, economic, and other reforms as well as the alignment of Montenegrin legislation with EU law. Since its independence in 2006, the authorities in Montenegro have made much progress towards building a legislative, policy and institutional framework to prevent and combat violence against women (VAW).1 The ratification of the IC came three years after the adoption of the Law on Domestic Violence Protection (LDVP). This law represents important comprehensive legislation specifically addressing a form of violence covered by the IC. It introduces a misdemeanour offence of domestic violence (DV) with the aim of allowing statutory agencies to respond more efficiently to such violence. It also introduces emergency barring and restraining orders as well as other important rights for victims such as the right to legal aid. Amendments to the Criminal Code in 2017 seek to criminalise other important forms of VAW covered by the Convention: stalking, female genital mutilation and forced sterilisation. Moreover, important policy documents such as the Action Plan for Gender Equality (2017-2021) and the Strategy for Protection from Domestic Violence (2016-2020) aim at more comprehensive measures to prevent and combat VAW. In any case, all these relevant legal acts contain gender-neutral definitions of VAW, which are not in line with IC and fail to acknowledge that women are disproportionately affected by violence.2

Despite the positive steps towards a more holistic implementation of the IC, most attention in law and policymaking has focused on DV. Measures addressing other forms of gender-based violence (GBV) have yet to reach the same level of comprehensiveness, as little or no preventive and protective measures seem to exist for victims of rape and sexual violence, sexual harassment and forced marriage, and no specific services such as rape crisis or sexual violence referral centres have been established. Instances of rape seem to be significantly underreported due to the cultural stigma that attaches to victims. Victims of rape and sexual assault in Montenegro all too often find themselves on their own in a judicial system which does not appear to be particularly gender sensitive.

Attitudes among a range of crucial professionals such as law enforcement officers, judges and social workers seem generally to weaken the response to DV and other forms of GBV. Despite the introduction of standardised procedures and extensive training efforts, many professionals seem to minimise the violence, undermine women’s confidence in the authorities, or are unaware of the dynamics of DV and the impact that witnessing such violence may have on children.

There are, thus, several structural issues which result in insufficient levels of prevention and protection of victims of DV such as the attitudes displayed toward women victims of DV, the frequent attempts at downplaying the violence, the use of dispute resolution processes, delays in handling DV cases and the reluctance to issue protection orders. Challenges persist for law enforcement agencies and prosecution services to investigate into, record and fully assess the history of abuse that victims experience at the hands of their abusers, leaving many incidents of DV unaccounted for. The widespread tendency of downplaying DV and encouraging reconciliation results in the fragmented recording of violence incidents and discourages victims from reporting every single incident. Most domestic violence offences are prosecuted under the misdemeanour offence which carries low sanctions, leaving those victims disillusioned with the outcome.

There is no certainty about the financial resources that the Government of Montenegro has earmarked for the implementation of its policies, strategies and legislation to prevent and combat VAW and DV. It seems that most operational costs are to be borne by the regular...
budgets of the respective ministries, while some of the specific activities set out in the various action plans and strategies are to be funded by international donors. In any case, budgets are generally very modest.

The Government of Montenegro recognises the expertise of women’s CSOs and seeks to officially involve women’s CSOs in multi-agency co-operation (for example the Co-ordinating Board or Multi-Disciplinary Teams). Policy documents such as the Protocol on Action, Prevention and Protection from Domestic Violence and the Law on Gender Equality envisage co-operation of state actors with CSOs working in this field. However, despite the formal state commitment to ensure active cooperation with CSOs, this obligation has not been implemented to a sufficient extent. The state hardly ensures any funding for women CSOs, so they strive for sustainability, since they are predominantly financed through the projects supported by international donors.6

FACTS

There is no official centralised electronic data collection system; therefore, it is not possible to determine the prevalence of IPV in all registered DV cases, or to automatically obtain information on how individual cases were prosecuted and the outcomes. Representative surveys conducted by UNDP showed that 42% of women in Montenegro have, during their lives, been exposed to some form of violence by their spouses or partners. The study showed that patriarchal attitudes and gender stereotypes are still widely spread in Montenegro, and seriously affect institutional response to protection from VAW. Recent reports showed that 5.8% of women aged 20 to 24 years were first married or in union before age 18.4

In 2021 the Statistical Office implemented for the first time the Survey on Living Conditions and Women Safety (EUGBV) in Montenegro. It was implemented in line with the Eurostat’s methodology to ensure data comparability on GBV across the EU countries. According to the survey one in five women (20.2%) reported having experienced violence by an intimate partner during lifetime, 6.2% of women reported violence by a non-partner during adulthood, 7.5% of women reported having experienced DV during adulthood, 11.7% of women had experienced violence by any perpetrator and 17.5% of women reported having had experienced sexual harassment at work during lifetime.5

WOMEN’S CSOs LANDSCAPE - Challenges and Needs

Montenegrin women’s CSOs have a key role in providing support and protection for women and children survivors of GBV. Based on a victim-centred and feminist approach, they offer services that do not exist elsewhere in the country and that are the only specialised support services for women: run helplines and shelters, offer psychological and legal assistance, organise trainings, campaigns, and participate in drafting of national legislation and policies.
Direct Victim Support Activities

Together with the provision of shelter and support for The newly introduced licensing regime seeks to ensure quality standards for CSOs operating shelters and other counselling services by linking the provision of funding to criteria that women’s specialist support services may find difficult to comply with in terms of size and staff ratio. An additional difficulty is the lack of licensed training courses that staff are required to complete in order to qualify as a licensed CSO service provider. To face these regulatory demands, many CSOs invested funds in reforming their structures, receiving training, etc., with the hope that this would mean receiving funds to develop their actions of direct victim support. However, the funding that they have ended up receiving has continued to be linked to specific projects, to specific calls and not to the assumption of a stable and coordinated role for the provision of these services.

Hence women’s CSOs operating shelters for women victims of GBV need urgently support to compel with the newly introduced licensing regime, the required professional training and specifically to collaborate with the authorities to clearly communicate the purpose of needed funds.

In addition, the government’s plans to introduce a system of mandatory referrals by Centres for Social Work would further weaken the role of women’s specialist support services in providing women-centred counselling, shelter accommodation, advocacy, and support to women with a view to protecting their human rights as individuals. Hence, raising awareness of women’s CSOs key role as first contact points for victims of GBV with the authorities is a key priority, particularly taking into consideration that Centres for Social Work are seriously underfunded in terms of human and financial resources as well as infrastructure which clearly impacts on the Centres’ ability to serve their clients. No state funds have been committed to the implementation of the new Strategy on Protection from Domestic Violence, so the activities promoted have been implemented by CSOs and funded by international donors.

Another key priority is to strengthen the provision of specialist support services for women victims of violence in Montenegro as it is already lacking in terms of geographic distribution and the forms of violence they address. There are no services for victims of rape and sexual violence, neither are there any counselling services and shelters for women and girls fleeing forced marriage.

As far as the situation of existing specialist support services run by CSOs is concerned, their funding situation is precarious and currently not sustainable as it is mainly dependent on the funding of international donors. It is only the national helpline run by the SOS Helpline in Nikšić that is partially funded by the state on an annual basis.

Indirect Victim Support Activities

Many of the CSOs present in the country monitor closely, and advocate for, the correct implementation of laws and policies. Moreover, they prepare assessment reports, publish data, and conduct research related to VAW and DV. Despite these existing initiatives there is a need to increase CSOs capacities to have more elements that support the discourse of these organizations before government authorities, citizens, and the international community.

Community Building and Outreach Activities

There is a significant knowledge gap between organizations with more experience and those made up of younger people. On the one hand, the most recently created CSOs still need training to help them consolidate some core, basic concepts of the theory that supports GBV. On the other hand, the oldest CSOs need to increase their capacities to face new challenges such as crowdfunding, social networks, promotion, and visibility of the actions they develop with women victims of violence. Hence, collaboration between CSOs would support their growth and expansion and strengthen their collective representation of identified needs and interests.

There is also a need for more long-term and regular awareness-raising campaigns to lift existing taboos around rape and sexual violence, but also to raise...
awareness more generally of the forms of violence that women in Montenegro, including Roma and Egyptian women, experience at the hands of men.

Renewed efforts to develop effective training measures at all stages of professional development are equally called for. Overall, there is a limited understanding of the gendered nature of violence which is demonstrated by the perception among members of a wide range of relevant professionals that DV is caused by substance abuse by the perpetrators or their mental health problems. DV perpetrator programmes have yet to be set up and would constitute an important milestone. More extensive professional skills in relation to VAW would also contribute to a more coherent application of the two legislative frameworks on DV (the LDVP and the CC).

CSO Competency Building

CSOs in Montenegro have developed strong capacities related to project management (needs identification, proposal writing, implementation, and evaluation), as evidenced by the funds they have been receiving from international donors with complex calls. The needs that have been identified are more oriented towards increasing their capacities to attract funds from other instances, such as the private sector, or to optimize their resources when they come from projects financed by the EU, to avoid that a large part of their staff ends up working only to ensure compliance with the bureaucracy associated with these funds.

The main priority for women’s CSOs is training and knowledge building on new national legal requirements but also on core concepts around GBV, EU values and laws as well as to support networking and collaboration between CSOs and other stakeholders.

“42% of women in Montenegro have, during their lives, been exposed to some form of violence by their spouses or partners.”

ABOUT THE STUDY

This study analyses the women’s CSO landscape in Albania, Bosnia-Herzegovina, Croatia, Cyprus, France, Greece, Italy, Kosovo, Montenegro, Serbia and Spain. It identifies the challenges women’s CSOs face and their needs to prevent and combat GBV. The study was carried out by INDERA SL at the request of Calala Women’s Fund jointly with the Mediterranean Women’s Fund (MedWF) and Ecumenical Women’s Initiative (EWI).

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The data provided in this study was collected in March 2023. More information at: www.calala.org
Serbia ratified the UN Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) in March 2001 and its Optional Protocol in July 2003. In April 2012 Serbia signed the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention) and ratified it on 21 November 2013 being among the first states parties in which it entered into force on 1st August 2014. Since then, the Serbian authorities have made much progress towards building a legislative, policy and institutional framework to prevent and combat violence against women (VAW). Several legislative acts, action plans and strategies now address some forms of VAW and domestic violence (DV). In addition, the process of accession to the EU is contributing to important judicial, administrative, economic, and other reforms as well as the alignment of Serbian legislation with EU law in many areas, including the area of victims’ rights and gender equality.

At a legal level, important legislative changes have been made. Serbia included DV as a crime in its Criminal Code in 2002. The Family Law entered into force in July 2005, which at that time included new protection measures against DV. Amendments to the Criminal Code in 2016 have introduced offences not previously criminalised in Serbia such as stalking, sexual harassment and female genital mutilation. The Law on the Prevention of Domestic Violence (LPDV) addresses DV in a comprehensive manner and institutes multi-agency co-operation of key professionals around this form of violence.

Since the National Strategy for the Prevention and Elimination of Violence against Women in Family and in Intimate Partner Relationships ended in 2015, VAW is not addressed in a specific policy document but does get mention under the National Strategy for Gender Equality (2016-2020). Importantly, this strategy defines VAW as a violation of women’s human rights and recognises it as gender-based violence (GBV) and a form of discrimination of women.

In Serbia, most efforts in law and policy have focused mainly on DV as the most widespread form of VAW.

While some policy documents such as the General Protocol for Action and Cooperation of Institutions, Bodies and Organisations in Situations of Domestic and Intimate Partner Violence against Women place women victims of DV at their centre, many interventions by statutory agencies are gender neutral. Several legislative acts, national action plans and strategies now address the various forms of VAW and DV as covered by the Istanbul Convention.¹

Recognition has also been afforded to the importance of addressing the situation of women exposed to or at risk of intersectional discrimination and the obstacles they may face in seeking help from the authorities for experiences of violence. In this context, efforts have been made to set up a National Coalition for Ending Child Marriage, uniting all relevant institutions and NGOs, as well as the stated intention to intensify training for professionals on the protection from child marriage as well as more support for Roma girls, their families and Roma organisations.

Even though forms of violence such as stalking, forced marriage and female genital mutilation are now criminalised, difficulties persist in ensuring their application in practice. The reasons range from low levels of reporting to lack of guidance on how to build a case, and insufficient training on more recently introduced offences. Judicial and police responses to DV cases remain weak. Criminal and misdemeanour sanctions are minimal, with suspended sentences imposed in most criminal cases.

Victims also receive limited services and support. Free legal aid is not generally available, and the strict requirements to qualify exclude many victims where it does exist. The NGOs that provide these services face funding shortages. In addition, there are economic and procedural barriers for women to use the limited number of shelter spaces that are available, and financial aid from the government is too low to assist women in breaking economic dependence on violent partners.
**FACTS**

Significant efforts were invested in improving the institutional response to GBV to recognize and prevent it. Part of these efforts are continuous appeals to report violence to competent institutions and increase the availability of information on sources of help and support. Nevertheless, the fact that 75% of women killed by a partner or family member in 2021 had never previously turned to institutions for help is a serious reminder that violence does not only affect the immediate victim, but also the family and the entire community.2

In 2020 there have been a total of 27,953 reported events of violence of which 11,616 cases have been physical violence, 1,012 economic, 19,375 psychological and 182 of sexual violence. Data from the Ministry of Interior of the perpetrator-victim profiles from February 2021 show that in 82% of the cases the perpetrators of violence are men with this ratio being constant over the years and that in an average of 70% of cases, the victims of violence are women. During 2020, police officers imposed 29,540 emergency measures, of which in approximately 70% of cases a temporary ban was imposed on the perpetrator to contact and approach the victim of violence. However, the wrong practice of temporary removal of the perpetrator from the apartment but not a temporary ban on the perpetrator from contacting and approaching the victim of violence, leads to a 9% rate of violations of emergency measures which is slightly lower in 2020 compared to 2019, but significantly higher compared to 2018.3

The number of female victims of violence recorded in the CSW Helpline (which does not meet the criteria for confidentiality and advice, established by the Istanbul Convention) in 2019 was 3,358 with the highest reporting age group being 26-49 years old women.

**WOMEN’S CSOs LANDSCAPE - Challenges and Needs**

For many years, women’s CSOs providing support to women and girls survivors of GBV, have been the key promoters for gender equality and the principle of zero tolerance to violence. These women’s CSOs are recognised for their expertise and are acknowledged for their enormous influence on developments at both national and local level. On the other hand, attacks on women anti-violence advocates are still frequent. Moreover, notwithstanding the contributions in the field, it is observed that public administration’s support decline to specialised women’s CSOs: lack of cooperation, exclusion from public administration multi-agency bodies, the introduction of costly service licensing rules, and denial of public funds, among other issues.

**Direct Victim Support Activities**

An extensive network of women’s CSOs, activists and direct support service providers, is present in Serbia. The network consists of more than 20 local helplines run by specialised women CSOs covering most of the country, whose services comprise facilitating empowerment process for women and understanding the characteristics of VAW, giving policy related information to survivors, individual consultations regarding personal needs, risk assessment and safety planning, self-help, and support group work.

The network has also identified the need to build more capacities to work with multiple discriminated and marginalised groups of women, such as women from the Roma community and other national minorities, women with disabilities, sexual minorities, and human trafficking survivors as groups under particular risk of VAW."}

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CSOs in Serbia oversee providing direct support to victims in a wide range of ways: giving medical help to victims/survivors of GBV, providing counselling and psychological support, offering legal advice, running shelters, etc. The pervasive problem in providing direct support services to GBV victims is the lack of public funding. CSOs have had to look to international or private donors for support that increased during the height of COVID but are now again clearly insufficient.

The State institutions have funded safe houses (shelters) but there are still serious issues going on: they are not enough in number, they are not receiving sufficient funds from the State institutions, they are crowded, the time that a woman can spend in a shelter is limited to one month, etc. Still, victims prefer to go to the CSOs shelters rather than to the institutions, mainly because there is a lack of trust and the perception that they are very bureaucratic and do not guarantee anonymity, etc.

As for the help lines, the one promoted by the State seem not to be working and the help lines provided by NGOs are facing relevant problems: they are project-based (funded by the international community and big donors), they are volunteer-based, they are dealing with burnout situations (because they can’t deal with the pressure), and they don’t work round the clock, so there is no options for a woman who is in need of support to call any time to the help lines that are currently functioning.

Indirect Victim Support Activities

In Serbia, the advocacy work of the CSOs at the political and legal level has had very significant results, such as the approval of the LPDV itself, in whose elaboration women’s organizations played a very important role. This law has included aspects that substantially improve the situation that existed previously.

Some of the women’s organizations have acquired, over the years, important capacities for GBV-related research, as well as for the collection of data and statistics that complements (and in some cases questions) the figures provided by the governmental organizations.

Women’s CSOs are strong in advocacy, however, limited financial resources are an extra burden activists carry. Funds are needed to strengthen their capacities to ensure that the legislation currently in force is complied with. Although the current legislation is advanced (despite its shortcomings), its development in practice needs to be promoted from a rights perspective that can and should be reinforced.

Community Building and Outreach Activities

One of the most important problems is that the state system is still not aware of the accumulated experience of NGOs, particularly those that are highly specialized in serving a specific part of the population or very specific groups. Women’s CSOs have identified the need to raise awareness about their work so that public agents trust more and give more continuous financial support to women’s CSOs that are achieving very positive results in combating and preventing GBV.

The work with the communities is not being a priority for the organizations. Citizens are not sensitized; they do not participate in the mobilizations (either in person or through social networks). The focus is being placed on training and awareness raising of certain groups, such as youth, because working with other population groups has been perceived as too complicated and has not had satisfactory results in the past.

There is an urgent need to work on the growing normalization and naturalization of violence through the internet, specifically for the younger generations, and its direct impact in fostering GBV. National campaigns and awareness raising activities are urgently needed to incorporate educational material on the prevention of GBV and DV into the general curriculum of the national education system.

One of the most current noteworthy features is the debate on whether the increase in the numbers of cases reported in GBV is due to a real increase in cases of violence or the reflection of a situation where the people affected have decided to act and denounce, something which was not done before. Furthermore, a very significant increase in GBV cases was observed.
during the COVID pandemic and it now seems to have been assumed that this reality is to some extent unchangeable.

To raise awareness about GBV amongst Serbian citizens it is key to increase the degree of coordination and collaboration between women’s CSOs and State institutions in the area of social protection, health, care, welfare and police. There have been lots of training programs on the dynamics of domestic violence and the roles of these professionals; however, such trainings are not universally available. Of particular concern is the lack of training available to doctors and judges. Police appear to have taken significant steps to extend training to the greatest number of employees.

In addition to the existence and consistent application of effective treatment procedures that will enable the victims to report GBV violence, receive the protection, help, and support they need, a special focus must be placed on vulnerable social groups where an increased prevalence of violence has been observed.

CSO Competency Building

The CSOs work in a network, especially now that the negotiations for Serbia’s accession to the EU are taking place. Important steps are being taken to prepare reports that shed light on GBV in the country and, although the points of view are very different among some organizations, the results are still satisfactory. There is a need to foster these already existing networking activities to strengthen collaboration amongst them and facilitate the opening up to other relevant stakeholders with a view to promote and protect fundamental EU rights and values in the country.

Having stable funding for their core activities and the skills and instruments to guarantee the sustainability of their actions is the biggest challenge for CSOs. There is an urgent need for intergenerational knowledge transfer to future generations so that they will have the capacities to provide the necessary direct and indirect victim support services, including the work with men as a guarantee of change in the programs that are carried out, as well as lobbying and advocacy skills to promote the practical implementation of adopted laws, etc.

Based on the fact that the CSOs consulted have sufficient tools for the identification of needs, the programming and the design of projects, these organizations are calling for the need to go from generic training to more specialized training, fostering capacities on more specific topics (such as parental alienation syndrome) that are on the international agenda but that are not yet being developed significantly in the country.

“In 2020 there have been a total of 27,953 reported events of violence of which 11,616 cases have been physical violence, 1,012 economic, 19,375 psychological and 182 of sexual violence.”

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LEGAL AND POLICY FRAMEWORK

In July 1980 Spain signed the UN Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) which was then ratified in January 1984, accepting its Optional Protocol in July 2001. In May 2011 Spain signed the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention) and ratified it in April 2014.

The Organic Law 1/2004 of 28 December, on Integrated Protection Measures against Gender Violence approaches gendered violence (directed against women for the fact of being women) from an integrated point of view considering it the most brutal symbol of inequality and one of the most blatant attacks on women’s fundamental rights and modified articles of several Spanish laws such as the Criminal Law, the Employment Act, the Workers’ Statute Act, the Organic Judiciary Act, the Civil Service Reform Act and the General Social Security Act.

In 2007 the Organic Act 3/2007, March 22, for the Effective Equality between Women and Men (the Equality Act) was passed and as a result central, regional and local governments have to actively mainstream the principle of equal treatment and opportunities for women and men in the adoption and implementation of their legislative provisions, budgeting, policy making, implementation and evaluation in all areas of public policy. Furthermore, in November 2008 both the Action Plan to Tackle and Prevent Gender-Based Violence in Foreign and Immigrant Population 2009-2012 and the Specific Employment Programme for Gender-Based Violence Victims were passed.

Since the Istanbul Convention came into force in 2014, Spain has made a series of important advances (including legislative reforms) such as the adoption of the State Pact against Gender-based Violence in 2017 and in 2018 the assumption by the Government Vice-presidency of responsibility for questions of equality, including public policies for combating violence against women.

Spanish law differentiates between gender-based violence (GBV), (committed by the male partner or ex-partner of the woman victim against her or her minor children) and domestic violence (committed in the home by any member of the family according to Article 173.2 of Spanish Criminal Law). However, Autonomous Community legislation has extended the concept of GBV, considering any form of violence against women as GBV, including that which occurs outside the context of partners and ex-partners.

In 2020, Law 17/2020 amended the Law 5/2008 on the right of women to eradicate GBV and new forms of GBV were incorporated, such as vicarious violence and second-order violence (Art. 4). Both forms of violence refer to violence perpetrated against the woman’s environment (children, family, friends, professional network), as a way to consistently cause her harm and suffering, punishing her network of support and isolating her. Vicarious violence is particularly applied when children are instrumentalized by the abuser to harm the mother.

More recently, as of May 2022, the government sponsored a new law against sexual violence of the Organic Law for the Comprehensive Guarantee of Sexual Freedom, known as the “Yes is Yes Law”. This law comprehensively addresses sexual violence, including prevention, care, and protection of victims, and places consent at the centre stage, as recommended by the Istanbul Convention. It also guarantees specialized and accessible comprehensive assistance through the creation of Crisis Centres available 24 hours a day to attend to women, girls and children who suffer this type of aggression. It also promotes gender responsive training to all parties involved who may come into contact with victims (police, health and justice personnel, forensics) to avoid any kind of gender stereotypes and prejudices with women who decide to report aggression.

Regarding the achievement of rights, Spain has incorporated ILO Convention 189 into its legislation (2022), essential for domestic workers to push for their rights and justice.

In February 2023, the government in Spain decided to pass new reforms and laws in favour of LGBTQ+ people. The country allows now trans people from the age of 16 to self-identify as trans. They no longer require a psychological or medical diagnosis.
WOMEN’S CSOs LANDSCAPE - Challenges and Needs

Over the last decade, Spain became known for social movement contestation. The emergence of the 15M movement\(^7\) gave rise to the longest wave of mobilisation since the transition to democracy, transforming social mobilisation on a global scale. Civil society organisations (CSOs) are strong in Spain and key supporters of democratic structures and rights. Spain is the OECD DAC member that channels the highest share of its ODA through CSOs (56.4% in 2020)\(^8\) with the highest share of interventions that target gender equality as their principal objective (18.4% in 2020).

Women’s CSOs are key actors in advancing gender equality in Spain and combating and preventing GBV. Their combined actions have had a significant impact on public policies, norms and representations. Despite the lack of financial resources directed at women’s CSOs they are consistently supporting women victims/survivors of GBV in their recovery and empowerment processes, offering comprehensive, specialized and accessible care.

FACTS

According to the XIII Annual Report of the State Observatory on Violence against Women, the number of female fatalities during 2019 (latest report published in 2022)\(^4\) was 55 and the total number of female fatalities from 2003 to 2019 was 1,035.

In 2019, two out of three women (66.1%) were living with their killer. Of the 55 female fatalities in 2019, 20% (11) had reported their attacker. Seven of these women were granted restraining orders, which were still in force in four of the cases at the time of the murder. By age, more than half of the fatal victims of gender-based violence in 2019 (58.4%) were between 20 and 39 years old. With regard to legal proceedings brought before the courts prior to the murder of the women, it is worth noting that of the 835 female fatalities recorded since information on institutional guardianship became available (1 January 2006 to 31 December 2019), only 217 cases (26%) had been reported for GBV.

During 2019, a total of 168,057 complaints of GBV reached the courts, which implies a monthly average of 14,005 complaints and a daily average of 460 complaints. This represents an increase of 0.7% in the number of GBV complaints compared to the previous year.

In the same year, 85.3% of the crimes against sexual freedom and indemnity were committed against women and 96.9% of those responsible for crimes against sexual freedom and indemnity were men. The most frequent crime (47.6%, 6,368 women) was sexual abuse followed by sexual assaults (14.3%, 1,918 women) and penetrative sexual assaults (12%, 1,609 women).

In 2019 there were 10,155 (75.9%) victimizations of Spanish women and 3,226 of women from other nationalities. Among the foreigners, women of nationality from the American continent (11.1%) were the most numerous (1,486).

Sexual abuse is the most frequent crime in all age groups. Crimes against sexual freedom are not just physically committed. They are also committed through new technologies. Of the 905 crimes against sexual freedom and indemnity that took place in 2019, 384 cases originated in contacts through technology with children under 16 years of age. In 2022 the report ‘Apps without violence’\(^5\) based on almost a thousand surveys of Tinder users, displayed that 57.9% of the interviewees have felt pressured to have sex with the men they met, and 22% suffered rape.

Since 2013 children\(^6\) victims of GBV have been counted in Spain. Until summer 2021, 41 have been murdered, in most cases due to vicarious violence, either by the partners or ex-partners of their mothers or, in the case of teenage girls, by their own partner.

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7. Social protest movement launched 15th of May 2011 against austerity and corruption.
8. The OECD (Organisation for Economic Co-operation and Development) Development Assistance Committee (DAC) is an international forum of many of the largest providers of Official Development Assistance (ODA).
For this purpose, they collaborate closely with public institutions that are an integral part of the fight against GBV.

The historical difficult situation in accessing resources has been aggravated by the COVID-19 pandemic, despite the fact that many women’s CSOs were the only accessible support for the increasing number of victims of GBV during restrictions.

**NEEDS identified in the area of Direct Victim Support Activities:**

Women’s CSO are at the forefront offering specialized care for women victims/survivors of GBV. There is an ongoing need for financial resources to provide counselling and psychological support to victims of GBV to overcome the trauma and recover their self-esteem. This may include individual and group therapy, psychological counselling, and support programs for personal empowerment. For this purpose, the need for better coordination with the public institutions of the Circuit against GBV has been identified (For more detail see below in Outreach and Community Building).

Along with it, another priority is to provide victims of GBV (particularly migrant women) with legal advice and assistance. This may include information about legal proceedings, protective/restraining orders, safety measures, injunctive relief and the possibility of filing a formal complaint against the abuser.

In the victim recovery process, women’s CSOs offer support groups for victims and families to guarantee everyday direct support working with the victim’s direct environment. Since migrant women usually don’t have direct family members with them and often suffer from isolation, the labour and neighbour environments are key factors in their recovery process. Thus, women’s CSOs provide them with access to support groups and collective care activities.

Additionally, support against cyber bullying in networks is also a pressing need as GVB is ever more present in digital environments. Therefore, CSO’s require specific training to guarantee adequate interventions in digital violence. There is a need for networking, generating support practices in prevention, response and reparation of digital violence.

**NEEDS identified in the area of indirect Victim Support Activities:**

Women’s CSOs are strong in providing activities aimed to prevent GBV offering workshops and training for women at risk and/or victims of GBV as well as for the people around them and for the volunteers and employees of different stakeholder groups. In this the need to support the community promoter figure has been identified as important. (For more detail see below in Outreach and Community Building).

Despite the fact that the entire network of women’s organizations is mostly made up of small low-budget entities their capacity to influence policy and decision-making processes through watchdog and monitoring activities on EU and international policies, particularly through the Istanbul Convention, is significant and an integral part of the work of women’s CSOs. Women’s rights would not be recognized at the level they are without their relentless work and financial resources are urgently needed to support these activities that build and sustain the country’s democracy and are often done non-remunerated basis in addition to the full work schedule of many activists.

Lobbying and advocacy work needs urgently research into new forms of GVB, including violence against LGBTIQ groups and the normalization of all forms of violence, including GBV in the younger population. Additionally, it is needed to carry out studies both at a quantitative and qualitative level to know the true effectiveness of every single way to deal with GBV and to address GBV from an intersectional perspective, including all women in Spain, regardless of their origin. Furthermore, there is a need to develop standards and procedures to repair the damage caused to women by GBV.

There is a new approach aiming to establish links with men and boys who collaborate in tackling and overcoming gender stereotypes as a root cause of GBV. There is a need to support actions addressing fragile masculinities with specialized personnel to address the deteriorating social pressure on particularly young men, motivating normalized violent attitudes and behaviours meant to restore the threatened status of being a ‘real’ man.

**NEEDS identified in the area of Community Building and Outreach Activities**

Spain counts on a unified public structure against GBV (the so-called “Circuits”) which are present in most Spanish territories. Circuits are an area of...
inter-institutional cooperation aimed to deal with the prevention and detection of GBV, as well as with the attention, recovery and reparation of women and their children affected by GBV in a comprehensive, multidisciplinary and transversal way.

There is a need to improve these public circuits through professional training of staff, increase of vacancies and flexibility of resources to address the diversity of needs. The services offered also need to be reinforced, particularly primary health care with a focus on mental health, the reparation for victims, the care of women in the judicial system and the provision of GBV prevention courses addressing men and adolescents.

The associative network of small low-budget women’s CSOs are mostly the first contact points for women victims/survivors of GBV and their support and care facilitate then the access to the public circuit. Victims/survivors of GBV may be reluctant to present themselves to a public institution due to legal and administrative irregularities causing fear of being arrested or due to their overall difficult situation. The women’s CSOs are also providing a very beholding environment as they assist women on a daily basis and provide them with contacts in their community and safe spaces. Hence, well established coordination and collaboration between all stakeholders is very much needed and in this specifically the recognition of the foundational work women’s CSOs are doing and the provision of resources.

Overall, community building is a key priority supported through the community promoter figure (women who a) accompany other women in situations of GBV; b) raise awareness about vulnerabilities; c) take leadership in the neighbourhood and communities; d) build alliances with other women and organizations). Therefore, the need to increase resources for that role, involving specialized personnel, has been identified.

NEEDS identified in the area of CSO Competency Building

Support with fundraising and achieving financial sustainability is urgently needed for women’s CSOs in Spain. Many organisations are made up of a large number of members and are sustained by activism and volunteering with most of them working unpaid. The lack of time and economic resources, full time work and family responsibilities are having an impact on the capacities of many CSOs to access the needed funding. The total annual budget of 54% of these organisations is below 20,000 € per year and not guaranteed, varying from one year to another. This also leads to the lack of structural funds needed to participate in projects, as the percentage of own contribution is not guaranteed. There is also an urgent need to gain capacities for grant application, training personnel in project design, monitoring, evaluation and reporting not only before and during, but also after project implementation.

Training on dissemination and communication strategies to effectively present their activities, goals and results is also urgently needed.

To strengthen women’s CSOs sustainability the need to improve leadership and management skills has been clearly identified, specifically considering the high amount of volunteer-based work the organisations rely on.

ABOUT THE STUDY

This study analyses the women’s CSO landscape in Albania, Bosnia-Herzegovina, Croatia, Cyprus, France, Greece, Italy, Kosovo, Montenegro, Serbia and Spain. It identifies the challenges women’s CSOs face and their needs to prevent and combat GBV. The study was carried out by INDERA SL at the request of Calala Women’s Fund jointly with the Mediterranean Women’s Fund (MedWF) and Ecumenical Women’s Initiative (EWI).

Methodology:

Based on a review of the current initiatives at grassroots level in the 11 countries and the project portfolio of EU supported initiatives, a model of activities was created comprising the following four areas: 1) Direct Victim Support Activities: services and activities which are provided directly to the victims of GBV; 2) Indirect Victim Support Activities: monitoring, advocacy, and watchdog activities regarding the adoption and implementation of laws and policies to combat and prevent GBV as well as research, awareness raising and preventative activities. 3) Community and Outreach: activities to strengthen stakeholders’ collaboration, networking and community building; 4) CSO Competency Building: activities to strengthen women’s CSOs structural, technical, financial and operational capacities.

Stakeholder interviews with women’s CSOs and experts from the 11 countries, together with desk research provided information and data about legal and policy frameworks, actors, tools and methods in the area of GBV and VAWG to identify needs to support actions with potential in prevention, protection, prosecution, service provisions, partnership building and prevalence.

The data provided in this study was collected in March 2023. More information at: www.calala.org