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.
over recent years, there is still much work to be done. Hence, whilst much progress has been made in France fighting against GBV have dropped considerably.

Despite the divisions that the feminist movements 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.

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 and referral number 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.

8 Ibid
9 Ibid
10 https://www.egalite-femmes-hommes.gouv.fr/femme-contra-les-violences-faites-aux- femmes/histoire-monde-des-nouvelles-detroit-la-fin-pour-un-total-de-34-millions-pour-
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 23, 2023 from https://www.medwomensfund.org/files/rapport-ou_est_argent-vf.pdf

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.

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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.

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.

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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