Montenegro

Women's CSOs needs assessment to prevent and combat genderbased violence



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 ►

Ekumenska inicijativa žena





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.

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. 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



1 GREVIO's (Baseline) Evaluation Report on legislative and other measures giving effect to the provisions of the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention) SERBIA. Council of Europe, 2018

 2 Integrated policies – Integrated approach. Mapping of policies and legislation on violence against women and the Istanbul Convention in the Western Balkans and Turkey. European Women's Lobby, 2018.

³ Integrated policies – Integrated approach. Mapping of policies and legislation on violence against women and the Istanbul Convention in the Western Balkans and Turkey. European Women's Lobby, 2018.

⁴ OESCE-led Survey on Violence against Women. Organization for Security and Cooperation in Europe (OSCE), 2019.

⁵ Statistical Office Montenegro. Retrieved March 30, 2023 from <u>https://www.monstat.org/</u> eng/novosti.php?id=3625

⁶ GREVIO's (Baseline) Evaluation Report on legislative and other measures giving effect to the provisions of the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention) SERBIA. Council of Europe, 2018

7 Ibid

⁸ Ibid

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 licencing 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.⁷

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.⁸ 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)**.

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**







INDERA