LEGAL AND POLICY FRAMEWORK

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.⁴
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.”

**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